Regulations and rules for MRCPCH and DCH examinations

Examinations team
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This is the regulatory guidance and policy relevant to exam candidates preparing for the MRCPCH (membership) and/or DCH (Diploma of Child Health) examinations. These include general regulations and rules, plus a series of appendices detailing our policies related to: malpractice in exams, reasonable adjustments, currency and number of attempts in examinations, cancellation or suspension of examinations, complaints / feedback and re-marking and appeals.

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Examination regulations and rules

1. Interpretation

The Interpretation Sections of the Charter and Bye-laws of the College shall apply to these Regulations. In addition the following words shall bear the following interpretations:

(a) “Medical qualification” shall mean a qualification rendering the holder eligible for registration with the General Medical Council of the United Kingdom, or in the case of overseas bodies, being recognised by the General Medical Council of the United Kingdom.

(b) “DCH” shall mean the Diploma in Child Health and “DCH Examination” shall mean the
Examination for that said Diploma.

(c) “Membership Examination” shall mean the Examination for Membership of the College.

(d) “MRCPCH” shall mean Membership of the Royal College of Paediatrics and Child Health.

(e) “Regulations” and “Rules” shall mean the Examination Regulations and Rules prescribed by the Council of the College.

2. Entry qualifications

(a) Candidates will not be permitted to sit any examination unless they hold a recognised medical qualification.

3. MRCPCH Diploma of Membership

In order to pass the examination for Membership of the College in accordance with the Regulations and Rules candidates must:

- Successfully complete all parts of the Membership Examination;
- Pay the membership fee as may be prescribed from time to time by council.

4. Rules

The Council of the College shall pass rules for the further and more precise regulation of the DCH Examination and the MRCPCH Examination from time to time.

5. Guidance

The Examination Board of the College may issue Notes of Guidance to prospective candidates.

The examinations

6. MRCPCH

(a) The MRCPCH Examination shall consist of:

- **Foundation of Practice (FOP) theory examination** (basic child health)
- **Theory and Science (TAS) theory examination** (basic scientific, physiological and pharmacological principles upon which clinical practice is based)
- **Applied Knowledge in Practice (AKP) theory examination** (knowledge synthesis/evaluation, clinical decision making and management)
- **MRCPCH Clinical examination** (multi station OSCE)

(b) The theory examinations can be taken in the candidate’s order of preference. On successful completion of the 3 theory examinations, candidates are eligible for entry to the MRCPCH Clinical Examination.

7. DCH
(a) The DCH Examination shall consist of:

- **Foundation of Practice theory examination** (basic child health, the same examination paper as MRCPCH FOP)
- **DCH Clinical examination**

(b) From 2017, the theory and clinical examination elements of the DCH can be taken in the candidate’s order of preference.

**Examination rules**

**8. Conduct of the examinations**

(a) Candidates, when making their first entry to the examinations, must submit their original medical registration certificates or diplomas of medical qualifications (primary medical qualification) unless their names appear in the current annual edition of the Medical Register of the General Medical Council of the United Kingdom. Photocopies, scans and/or official translations will only be accepted if they have been prepared or authenticated by the issuing University or Medical School.

(b) Candidates will only be admitted to the examinations in their full names as given on their original medical registration certificates or diplomas of medical qualification or official translations of their diplomas, or as in the current edition of the Medical Register of the General Medical Council of the United Kingdom. Entries will not be accepted if there is any discrepancy in the spelling, order or number of names given and candidates must retain the same surname/family name in any further application.

(c) Candidates who change their names on marriage/civil partnership or by deed poll must submit original documentary proof of this if they wish to be admitted to the examinations in their new name.

(d) Candidates who attend examinations must produce some means of identification in addition to the admission documents. This would normally be a passport but where candidates do not possess one some other form of identification may be acceptable such as a driving license provided it contains both a photograph and the signature of the candidate concerned. If there is any doubt regarding what constitutes suitable identification college approval prior to the examination should be sought.

For further details please refer to [Appendix D - MRCPCH and DCH candidate identification policy](#)

(e) The College reserves the right to bar any candidate from sitting or passing any examination for any reason. Examples of reasons that may be deemed to be sufficient are:

- where there is any doubt concerning the sufficiency or authenticity of the certificates produced by the candidate.
- where there exists any other reason that causes the College to doubt the fitness of the candidate to become a member or to hold the DCH. Such reasons may include criminal behaviour or other professional misconduct.
- where the candidate is suspected of malpractice, cheating or attempting to cheat in this
or any other examination
- where numbers of applications received by the College exceeds the number of examination places available, the College reserves the right to return applications to candidates
- should an application be found to be incomplete in any manner or received after the closing date, the College reserves the right to reject that application.

(f) Any invigilator or examiner present shall be empowered to refuse to allow a candidate to continue with an examination only in certain extreme circumstances. Examples of reasons that may be deemed to be sufficient include:

- where the candidate causes disruption during their examination to the extent that they cause distress or alarm to other candidates, test centre staff or patients/role-players/parents
- should they cause any harm to other candidates, test centre staff or patients/role-players/parents.

For further details of standards of conduct expected of all RCPCH examination candidates, please refer to Appendix K - MRCPCH DCH Examination Candidate Code of Conduct

9. Currency of MRCPCH examination

In line with GMC rules with effect from 1 July 2014, candidates are required to complete all components of the MRCPCH examinations within a 7 year period.

For further details please refer to Appendix E - Currency and number of attempts in MRCPCH examinations

10. Number of attempts

In line with GMC rules with effect from 1 July 2014 each examination candidate will be allowed up to 6 attempts at each part of MRCPCH.

If a candidate has failed an examination on six occasions, that candidate must provide the RCPCH with evidence of additional educational experience before further attempts at that examination will be allowed.

Candidates who do not attend an examination will have that examination counted as an attempt. Candidates must inform the College in writing and provide evidence to support non-attendance within thirty days of the examination date in order to ensure that their non-attendance is not counted as an attempt.

Examinations sat before 1 July 2014 are not counted.

For further details please refer to Appendix E - Currency and number of attempts in MRCPCH examinations

Please also refer to the GMC guidance on national professional examinations.

11. MRCPCH Clinical examination – eligibility for entry

(a) Candidates must pass all 3 theory examinations before applying for MRCPCH Clinical. It
is also strongly recommended for candidates to complete a minimum period of training of 2
and half years from the date of graduation given on their diploma of medical qualification.
Within a 5 year period before the date of the examination not less than 12 months should be
spent in posts involving acute paediatric care.

(b) At least one of the three completed theory examinations must have been passed within
the last 7 years to be eligible to sit the clinical examination. If 7 years has elapsed since
passing the last theory examination and a candidate has not sat or passed the MRCPCH
clinical, the candidate will be required to successfully re-sit/complete the Applied Knowledge
in Practice theory examination before they would be eligible to apply for any further attempts
at the MRCPCH Clinical Examination. Individual circumstances will however be taken into
consideration and exceptions may be made. This will require application to the RCPCH by
the candidate, supported by their Deanery/LETB.

12. Currency of DCH examination and eligibility for entry

DCH examination candidates are expected to complete both components of the DCH
examination within a 7 year period of successfully completing the first element sat.

For further details please refer to Appendix E - Currency and number of attempts in
MRCPCH examinations

(a) Candidates are permitted to apply to and sit the DCH/MRCPCH Foundation of Practice
examination and the DCH Clinical examination in any order.

(b) It is recommended that all candidates complete a short period of training in paediatrics
before attempting the DCH Clinical examination. The aim of the examination is to assess
whether candidates have reached the standard in clinical skills expected of a newly
appointed General Practitioner who has completed a short period of training in paediatrics.

13. Reasonable adjustment

The RCPCH is committed to providing supportive and fair opportunity to all examination
candidates. All candidates are entitled to request a reasonable adjustment to their
examination and the RCPCH Examinations Team will consider all requests providing the
appropriate supporting evidence is submitted.

It is the candidate's responsibility to ensure that the College is informed of any requirement
for adjustment/s to be made for any part of the MRCPCH/DCH Examination at the earliest
opportunity.

For further details please refer to Appendix C – Reasonable adjustments policy for RCPCH
Examinations

14. Withdrawing from an examination

It is the candidate's responsibility to ensure that the College is informed of an intended
withdrawal from any part of the MRCPCH/DCH examination at the earliest opportunity.

Notice of withdrawal from any part of the examination must, in all cases, be received in
writing by the College. The College will not formally withdraw any examination candidate until
such time as written confirmation is received.

15. Refunds

Candidates whose withdrawal requests are received on or before the closing date for applications will be refunded 100% of the examination fee paid. Any request for a refund submitted after the closing date will be reviewed on a case-by-case basis.

Fees cannot be transferred to the next examination.

Withdrawals after the closing date may entitle the candidate to a refund depending upon the circumstances (e.g. medical, bereavement, etc.). Evidence must be supplied if the candidate is requesting a refund (e.g. medical certificate).

If the withdrawal has been prompted by accident/illness or bereavement, written submissions should be made to the Examinations Manager no later than 14 days after the date of the examination. Any such request must be supported in writing by the candidate’s College Tutor/Educational Supervisor/senior colleague. Additionally, those withdrawing due to illness must send a letter from the physician responsible for their treatment. In most cases the maximum refund issued after the closing date will be 85% of the examination fee (15% of the fee is retained as an administrative charge). Requests for discounted attempts or refunds due to withdrawals must be approved by the Examinations Manager or Examinations Executive Committee. Requests are not automatically granted. The decision of the Examinations Executive Committee is final.

Visa difficulties do not warrant an automatic refund. Any refund provided will be at the discretion of the Examinations Manager. If a candidate needs to apply for a visa he or she should apply for the examination at beginning of the application period and clearly state that a letter for a visa application is required.

16. Cancellation of examinations

In the event that an MRCPCH / DCH examinations is cancelled please refer to Appendix F – Cancellation or suspension of MRCPCH/DCH examinations.

This document sets out to explain who makes the decision to cancel a centre or examination (and what information this should be based on) as well as how such a decision is communicated to internal and external stakeholders.

17. Complaints and feedback

Should an RCPCH examination candidate for MRCPCH and/or DCH examinations wish to submit a complaint or feedback to the RCPCH Examinations Team they should refer to the complaints and feedback policy

For further details please refer to Appendix G – Examination Complaint/Feedback Policy

General information – MRCPCH / DCH theory examinations
18. Entry to the examination test centre

Under no circumstances will candidates be permitted to enter the examination room more than 30 minutes after the start of the examination. It is the candidate’s responsibility to allow for any potential transport delays when planning their time of arrival at the examination centre. All candidates must have appropriate ID with them in order to verify their identity. A current passport or driving license are acceptable forms of ID. Candidates will not be allowed entry to the exam room unless they have valid ID with them.

19. Theory examination pass mark

The pass marks for the Foundation of Practice, Theory and Science and Applied Knowledge in Practice examinations are criterion referenced using Modified Angoff methodology. Each candidate is judged against an absolute standard rather than relative to other candidates. This ensures that all candidates who meet the required pass mark are able to pass the examination (ie the percentage passing or failing the examination is not fixed). In determining the pass mark Angoff judges are required to consider what proportion of borderline candidates will answer each question correctly. In order to do this it is important to consider who a typical candidate is for each part of the examination (see below).

The theory examinations can be taken in any order, at any stage of training but progress is required within certain timeframes for those who are already in paediatric training programmes.

Doctors are only able to progress to ST3 (the third year of a paediatric training programme) if they have successfully passed 2 parts of the theory examinations and to ST4 when they have completed all parts of the MRCPCH examinations (all 3 theory papers and the clinical examination).

This method was introduced for the Foundation of Practice and Theory and Science examinations in January 2012 and introduced for the Applied Knowledge in Practice examination in August 2006. This method follows a set procedure approved by the Examinations Executive Committee and external educationalists.

Current Angoff methodology

After the examinations are held a panel of professional judges independently grade each item of the examination and estimate the percentage of borderline candidates (a group of candidates who have a 50% chance of passing the examination) that will answer the question correctly. They initially attend a meeting where the standard is set using a proportion of the questions and their respective candidate performance data. This is conducted by first requesting the panel to judge each question without conferring; they then discuss their judgements with the rest of the panel before making a second judgement.

The final judgement is made after viewing the candidate performance for the question. The final judgements are averaged for each question to obtain the criterion referenced score. The weighted mean of the final judgements becomes the pass mark for the examination.

A Standard Monitoring Meeting (SMM) is additionally held after the examinations, consisting
of a group of senior examiners. The provisional pass marks (derived using the procedure above) and the resulting pass rates are presented at this meeting for approval. An item analysis is conducted prior to the meeting for all the questions. The decisions made at this meeting are fed back into the final marking pass mark of the examination.

**Typical candidates for the MRCPCH Foundation of Practice (FOP) examination**

The aim of the MRCPCH Foundation of Practice examination is to ensure that doctors who will come into contact with children have acquired a knowledge-base which will provide a secure footing for clinical practice. Some of these doctors will go on to pursue careers as paediatricians but others may work in primary care settings or work in other hospital settings. In setting the expected pass mark for the Foundation of Practice examination the Angoff panel are asked to consider the typical candidate as having the clinical knowledge base which would be expected of a competent medical graduate with 4 to 6 months experience of paediatrics and child health.

Most candidates would be expected to put at least 150-200 hours of preparation time into this examination.

**Typical candidates for the MRCPCH Theory and Science (TAS) examination**

The aim of the MRCPCH Theory and Science examination is to ensure that doctors who intend to become paediatricians can demonstrate an understanding of the theoretical and scientific principles which should underpin their practice upon completion of training. Whilst this is a broad subject area, the typical candidate for the MRCPCH Theory and Science examination will be a medical graduate who has completed Foundation programme training and in addition has 6 to 12 months of experience in paediatrics and child health. Most candidates would be expected to put at least 200 hours of preparation time into this examination, but the precise amount of time required will depend upon their existing knowledge-base.

**Typical candidates for the MRCPCH Applied Knowledge in Practice (AKP) examination**

The aim of MRCPCH Applied Knowledge in Practice is to assess the candidate’s knowledge, understanding and clinical decision making abilities, and to ensure that they have reached the standard of someone entering their core specialist training. There are two examination papers of 2.5 hours each, which take place on the same day.

The questions are typically a combination of best of five, extended matching and ‘n from many (a multiple response question). Candidates’ marks will be combined from the two AKP papers for an overall mark. Each paper will carry approximately the same amount of marks.

A typical MRCPCH AKP candidate would be expected to know how to successfully manage children with a range of diseases which would be encountered within 12 to 18 months of paediatric practice. They would usually have devoted at least 200 hours of additional personal study to this examination.

**20. Theory Examination feedback information**

Candidates taking the MRCPCH Foundation of Practice, Theory and Science and Applied
Knowledge in Practice receive feedback on their examination performance. This is of value to those passing the examination, and to those who do not achieve the pass mark in planning their future examination preparation. Along with their overall grade, candidates are provided with feedback on their percentage score in each category. The feedback includes mean percentage scores in each category of candidates that passed the examination overall, for comparison.

Candidates are made aware that the percentages in their feedback will not add up to their overall mark, neither can candidates take a mean of these percentages to get an overall examination percentage score. Each of the categories contains a different number of questions, and therefore the feedback scores will not match the overall score.

The theory examinations assess paediatric knowledge in the areas given in the respective syllabi; feedback provided is based on these.

For further details please refer to theory exam structure and syllabi.

21. Quality control of theory examinations

Following each examination, prior to the calculation of pass / fail grades, a full statistical review of scores and the related questions forming an examination is performed. This statistical analysis allows the College to ensure that RCPCH examinations are reaching optimal levels of reliability and fairness. This ensures questions are appropriate to current practice and training. Any questions that may undermine the reliability or fairness of the assessment are presented to a subgroup of the Foundation of Practice, Theory and Science and Applied Knowledge in Practice Examinations Board. Questions that negatively correlate with total scores or are unusually difficult (both of which threaten the reliability and discrimination of the examination) are considered for review or deletion from the examination.

In the light of these analyses, members of the Examinations Board may make modifications to the questions and answers to ensure that the quality of the examination is maintained.

All examination result submissions (theory examination answer responses and clinical examination station scores) are checked by College staff before results are published.

22. Re-marking of individual theory examinations

Requests for a re-mark of a theory examination answer script must be made within two weeks of the examination result letters being sent, via email, to candidates. Remark requests received after this deadline will not be considered.

For further details please refer to Appendix I - Theory examination re-marking policy

General information – MRCPCH Clinical / DCH Clinical examinations

23. Entry to the examination test centre

Under no circumstances will candidates be permitted to join the examination circuit for either the MRCPCH or DCH OSCE after the start of the examination circuit. It is the candidate’s
responsibility to allow for any potential transport delays when planning their time of arrival at the examination centre. All candidates must have appropriate ID with them in order to verify their identity. A current passport or driving license are acceptable forms of ID. Candidates will not be allowed entry to the exam room unless they have valid ID with them.

24. MRCPCH Clinical Examination pass mark information

Candidates must achieve an examination score of 63 or higher in order to successfully complete the examination and be eligible for College membership.

Standards expected of candidates are detailed in the anchor statements available for each station. Every examiner is provided with these anchor statements and bases each domain mark awarded against the standards outlined for each level of performance. The domain marks awarded reflect the examiner's judgement of a candidate's performance across the relevant domains in each station.

Candidates should be aware that their final mark cannot be raised.

Significant issues, procedural irregularities and other unexpected incidents impacting on candidate performance are reviewed in detail by the MRCPCH Clinical Examination Board (CEB) after each exam. Where there is sufficient evidence of a fault, error or significant disruption to a candidate's examination experience, the CEB may recommend further action be taken.

Candidates can access guidance on the MRCPCH Clinical examinations.

MRCPCH Clinical Examination pass mark - breakdown of scores

A candidate's performance is scored at the end of each station of the clinical examination as per the mark structure below.

The following marks are awarded for the overall judgement score:

- Meets Standard 2
- Borderline 1
- Below Standard 0

The MRCPCH Clinical Examination includes consideration towards any unprofessional conduct. Where there is sufficient evidence of unprofessional conduct during the examination, CEB have the authority to factor this evidence into a candidates final overall mark.

25. Expected standards of candidate performance - MRCPCH Clinical

The MRCPCH Clinical Examination is criterion referenced. The standard is set to meet the competences outlined within the Progress - Level 1 Generic Syllabus

The MRCPCH Clinical Examination is a heavy time, cost and resource commitment with respect to hospital staff, host examiners, examiners, patients and candidates. We ask all candidates to ensure that they are ready and well prepared for their examination in advance of application and to act professionally and respect all individuals they encounter during their
examination. Our valued volunteers do not deserve to be exposed to rude or unprofessional behaviour and we ask all candidates to consider this.

For further details please refer to Appendix H – Examination results: MRCPCH/DCH theory and clinical examinations

26. DCH Clinical examination pass mark information

Candidates must achieve a minimum examination score of 120 in order to successfully complete the examination. The minimum examination score of 120 is reflected through an average of 12 pass marks over 12 ‘assessments’. The DCH Clinical examination has 8 stations. Four of these stations are awarded 1 overall mark and 4 are awarded 2 overall marks. Standards expected of candidates are detailed in the anchor statements available for each station. Every examiner is provide with these anchor statements and bases the marks awarded against the standards outlined for each level of performance. The mark awarded is the examiner's judgement of a candidate's overall performance in a specific area of assessment (refer to the DCH anchor statements and mark sheets), it is not a composite of the feedback grades noted on the mark sheet.

Candidates should be aware that in some exceptional cases their final mark can be raised at the DCH Clinical Examination Board (CEB), which meets after each examination for quality assurance purposes.

The performance of all candidates scoring in the range 116/118, which is just below the pass mark, are reviewed in detail by the DCH CEB. This ensures consistency of outcome and that the principles of standard setting have been adhered to.

Candidates can access guidance on the DCH Clinical examination.

DCH Clinical Examination pass mark - breakdown of scores

A candidate's performance is scored at the end of each station of the clinical examination as per the mark structure below. Some of the DCH Clinical Examination stations assess candidate ability/performance over 2 domains while others only assess 1 domain (refer to the DCH anchor statements and mark sheets). Candidates will fail the examination if they do not achieve a score of 120 or more.

The following marks are awarded for the overall judgement score:

- Clear Pass 12
- Pass 10
- Bare Fail 8
- Clear Fail 4
- Unacceptable 0

27. Examination appeals

MRCPCH and DCH examination candidates may choose to submit an appeal in relation to key aspects of their examination. The appeals process is open to those examination candidates who have submitted a complaint within 72 hours of their examination date and who wish to appeal the outcome of their complaint. Associated appeals must be submitted
within 10 days of the relevant examination results letters being sent out (calculated from the date of the letter). Appeals received after the deadline will not be considered.

For further details, including the current appeals fee, please refer to Appendix J - Examination appeals policy

28. Results

Results of all MRCPCH/DCH theory and clinical examinations are released when the Chair of the relevant Examining Board (or in their absence the Officer for Examinations/Examinations Manager/Quality and Standards Manager) is satisfied that the examination has been conducted appropriately and in accordance with the procedures of the RCPCH.

For further details including processing timelines please refer to Appendix H – Examination results: MRCPCH/DCH theory and clinical examinations

29. Malpractice

The RCPCH Council has agreed to the establishment of rules with regards to the investigation of malpractice in College examinations.

For further details please refer to Appendix B - Process for cases of suspected malpractice in college examinations

30. Reporting results to Heads of Schools

With the programme of run through training it is necessary that Regional Leads, Programme Directors and Heads of School are kept informed of candidate progression through the MRCPCH. After each examination the Examinations Team will routinely send a report on examination performance to each respective LETB/deanery. This will facilitate a process whereby the requirement for any necessary additional support for trainees can be better identified and targeted.

For further details please refer to Appendix A - RCPCH examinations privacy statement

Downloads
Appendix A. RCPCH Examinations Privacy Statement 109.98 KB
Appendix B - Process for cases of suspected malpractice in College examinations 144.74 KB
Appendix C - Reasonable adjustment policy for RCPCH examinations 210.23 KB
Annex 4 - Request for reasonable adjustment form (MS Word) 56.94 KB
Appendix D - Examination candidate identification policy 54.85 KB
Appendix E - Currency and number of attempts in MRCPCH examinations 143.07 KB
MRCPCH Further attempt application form (MS Word) 36.65 KB
Appendix F - Cancellation or suspension of examinations 62.26 KB
Appendix G - Examination complaint feedback policy 133.88 KB
Examinations feedback and complaints form 68.71 KB
Appendix H - Examination results (for all exams) 63.63 KB
Appendix I - Theory examination re-marking policy 82.31 KB
Appendix J - Clinical examination appeals policy 281.18 KB
MRCPCH Clinical appeals form (Sep 2019) 89.03 KB
DCH Clinical appeals form (Sep 2019) 175.83 KB