



Physician Associate Registration Assessment

Code of Conduct for OSCE Examiners

The Royal College of Physicians (RCP) Assessment Unit relies on the professionalism and commitment of a large number of healthcare professionals to deliver the Physician Associate Registration Assessment (PARA) objective structured clinical examination (OSCE).

To maintain the quality of the examination, the RCP Assessment Unit monitors all aspects of the examination, including the appointment and performance of examiners, and their compliance with relevant equality and diversity legislation.

All individuals involved with any RCP activity are, in the first instance, expected to follow the RCP's [Code of Conduct](#). Further to this the RCP Assessment Unit has developed the following code of conduct specifically relating to PARA OSCE examiners, which provides a framework against which allegations of misconduct will be judged. In the event of any allegation of misconduct the RCP Assessment Unit will undertake an investigation governed by the principles given in the Physician Associate Registration Assessment OSCE Examiner Misconduct Policy.

1. General standard of behaviour

- 1.1 Examiners are expected to behave in a professional manner befitting of a healthcare professional who is acting in accordance with the principles and values set out by their respective regulator's guidance on best practice.
- 1.2 All examiners are expected to respond to communications from the RCP Assessment Unit, including allocation emails and requests for information, in a timely and open manner.
- 1.3 All examiners are expected to attend the examiner briefing before the start of each OSCE date, regardless of whether they have attended previously in the same assessment period. Briefings can, and do, change as an assessment period progresses, and day-specific information regarding reasonable adjustments is often provided which examiners are required to note.
- 1.4 Examiners are expected to dress professionally when attending an OSCE. Leisure wear, jeans and trainers should not be worn (unless there is a medical reason for doing so, which must be highlighted to the RCP Assessment Unit prior to the examiner's arrival at an OSCE).
- 1.5 Examiners should ensure all personal electronic devices are turned off before the examination begins. Examiners must not use any electronic devices during the OSCE, except those provided by the RCP Assessment Unit for the purposes of electronic marking.

2. Interacting with candidates

- 2.1 The RCP Assessment Unit expects all examiners to behave in a way that is non-discriminatory in terms of attitudes, activities, assumptions and beliefs.
- 2.2 Some candidates will have sat before and be familiar with how the OSCE should be run; others will have no previous experience. Some will be very nervous, and examiners should be mindful of this when interacting with candidates.
- 2.3 The role of the examiner is to provide a consistent approach to the candidate's encounter with a patient in a way that helps candidates to show what they can do and what they know. The examiner's manner and tone should be tailored accordingly.
- 2.4 Examiners should allow the candidate to complete their clinical examination without interruption or direction, unless they are required to do so as part of their examiner instructions (for example to ask a question or present the candidate with information to interpret), it is evident that the candidate has misinterpreted the aims of a station (for example they are trying to examine a patient in a history-taking station), or they are causing the patient clear discomfort during a physical examination.
- 2.5 Examiners should not make any remark to the candidate about their ongoing performance, irrespective of whether the performance is judged to be good or bad.
- 2.6 Examiners should not discuss any aspect of the examination or a candidate's performance with a candidate at any point during or after the OSCE. Examiners must not teach or coach candidates during the OSCE, or ask any questions not listed in their examiner instructions.
- 2.7 Examiners should avoid making any physical contact with the candidate, for example, to guide them towards a patient, or towards the exit of a station.
- 2.8 Examiners should report any procedural irregularities that occur in their station as soon as possible to the Chief Invigilator, lead examiner or a member of staff. This is particularly important where the examiner feels the irregularity has affected a candidate's performance within the station.

3. Completion of Marking

- 3.1 Examiners are asked to complete their marking via the electronic marking system during the two-minute period between stages. Examiners should not submit their final marks for a candidate until the station has concluded and the candidate has left the station.
- 3.2 Examiners should be aware that once marks are submitted for a candidate these are final and cannot be amended.

4. Interacting with patients

- 4.1 Examiners should maintain an awareness of patient comfort and safety at all times.

- 4.2 If a patient is for any reason uncomfortable about participating in the examination, either before the OSCE starts or once it has begun, examiners should make the Chief Invigilator or lead examiner aware of this as soon as possible and facilitate the withdrawal of the patient if appropriate.
- 4.3 The dignity and modesty of all patients must be respected at all times. Examiners should ensure that the degree of exposure of a patient is acceptable to the patient for the duration of the OSCE.
- 4.4 Examiners should be aware of the impact of discussions regarding a patient on that patient. Examiners should ensure that any information discussed between a patient and candidate is clarified for the patient once the candidate has left the station, particularly when erroneous information has been stated by a candidate.
- 4.5 Examiners should ensure that anyone in contact with the patient observes the appropriate hygiene protocols.

5. Interacting with colleagues

- 5.1 Examiners are expected to act with respect for fellow examiners, patients, role players, volunteers and RCP staff (including invigilators) running the OSCE.
- 5.2 If an examiner has any concern about the conduct or performance of a fellow examiner this should be brought to the attention of the examiner in question, or, confidentially, to the lead examiner or Chief Invigilator.

6. Handling personal and sensitive data

- 6.1 Examiners are reminded to maintain strict confidentiality and avoid divulging the identity of patients and scenarios to be used in the examination, provisional results, candidate performance or any other information relating to a candidate to any third party who does not have a right to such information.
 - 6.1.1 Candidates – Examiners are expected to maintain the confidentiality of candidate results. They should not engage in any conversation with candidates, or any other individual (aside from the Chief Examiner or Chief Invigilator) present on the day of the examination, relating to performance in the examination. This includes general indications of performance, as well as specific marks and grades.
 - 6.1.2 Examination material – Examiners are expected to ensure the security of all station material, before, during and after the examination.

7. Participation in commercial activities

- 7.1 It is not acceptable for PARA OSCE examiners to take part in commercially run (i.e. for profit) training or revision courses, including online courses. If a non-examiner takes part in such courses and is invited subsequently to become an examiner, it is on the understanding that such activity will cease.
- 7.2 It is not acceptable for examiners to write or contribute to books, website or other materials, or to re-edit or revise existing texts or other publications whose specific purpose is to help candidates prepare for any or all parts of the PARA.

- 7.3 The only exceptions to sections 7.1 and 7.2 are individuals who teach on an approved postgraduate or apprenticeship Physician Associate course at a higher education institution (or equivalent) or who publish materials internally for use on these courses. These materials should not attract an additional fee payable by students that falls outside of the overall course fee paid.
- 7.4 Individuals who cease examining for the PARA OSCE may not contribute to any of the commercial activities listed in 7.1 or 7.2 for a period of three years after they cease examining.

8. Copyright and use of materials

- 8.1 All PARA questions and content, including OSCE scenarios, are confidential and are under the copyright of the RCP. The RCP reserves the right to initiate legal action if theft of intellectual property is suspected.
- 8.2 Examiners must agree not to publish, independently of the RCP, any material which they have prepared for, or reviewed, in connection with the PARA.
- 8.3 Examiners must not use scenarios from the OSCE within their own courses.

9. Regulatory/membership body reporting and clinical practise requirements

- 9.1 Examiners should hold registration with the General Medical Council¹ (or equivalent) and be in good standing with their regulatory body.
- 9.2 Should an examiner become the subject of fitness to practise proceedings, or have limitations placed upon their practise by their regulatory body, they are expected to inform the RCP Assessment Unit of this without delay.
- 9.3 Examiners must be in active clinical practice at the time of appointment and may continue to examine for a maximum of three years after they retire. They are expected to inform the RCP Assessment Unit without delay when they retire from clinical practice so a formal end date for examining can be confirmed.
- 9.4 Where examiners are not in clinical practice, they must be able to demonstrate current, substantial, involvement in a PA educator role at the time of appointment and may continue to examine for a maximum of three years after they retire from their educator role. They are expected to inform the RCP Assessment Unit without delay when they retire from their educator role so a formal end date for examining can be confirmed.

10. Appeals and Complaints

- 10.1 The RCP Assessment Unit receives appeals against examination results from candidates, and complaints against examiners. The RCP Assessment Unit is committed to investigating any such cases in a fair and transparent manner in line with the RCP Assessment Unit Examination Appeal Regulations and RCP Assessment Unit Complaint Procedures.

¹ Registration on the Physician Associate Managed Voluntary Register is also permitted until 13 December 2026, after which date all examiners who are Physician Associates must be registered with the GMC

- 10.2 It is often necessary to approach examiners for comment on appeals and complaints, and examiners are expected to respond to any such approaches in an open and timely manner.