Academic dishonesty

Guidance for Colleges to help detect and deter dishonesty in summative exams
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Introduction

High stakes summative examinations [exams] form a core part of all UK postgraduate medicine assessment systems. Their value and integrity are determined by a variety of factors — most importantly the reliability and validity of the pass-fail classification that stems from the setting of a pass standard. Standardisation of these exams is vital — all candidates must perform under uniform conditions. Academic dishonesty undertaken with the intention of unfairly seeking an advantage over other candidates, or falsifying the outcome of an exam, is a substantial risk to their validity and integrity.

Actions which undermine the validity and integrity of any component of an assessment programme (in particular summative exams) threaten patient safety. Those who engage in academic dishonesty may, therefore, increase the safety risks faced by patients.

A number of Medical Royal Colleges have expressed concerns around exam content becoming public knowledge. This can happen in several ways and threatens the integrity of the exam. The Academy Assessment Committee considered that it was appropriate to look into this further, explore Colleges’ experiences and develop some guidance.

Considerable investment of time and money is required to sit and pass mandatory summative postgraduate medical exams and failing them can have potentially detrimental consequences thus making them by definition, ‘high stakes.’

The Academy recognises the high levels of stress associated with summative exams and believes that support for candidates is central to high quality training and mentorship, but it does not believe that academic dishonesty can be condoned in any circumstance.

As such, we believe that the potential impact of academic dishonesty on patient safety, fairness for other candidates and the academic reputation of all Colleges and Faculties, is such that all efforts should be made to prevent it and action should be taken in all identified occurrences.

Honesty and integrity are core values of the medical profession and are regarded by patients and the public as central to the trusted position of the doctor in clinical care and society. The General Medical Council’s Good Medical Practice recognises this and emphasises the need for doctors at all stages of their careers and in all areas of their professional life to ‘make sure that your conduct justifies your patients’ trust in you and the public’s trust in the profession […] You must always be honest about your experience, qualifications and current role.”

Research on academic dishonesty among medical students, doctors and other healthcare professionals demonstrates the need for vigilance to ensure that all candidates taking medical exams are held to these standards.

The prevalence of academic dishonesty in post-graduate medical exams in the UK is reported to be low (selected examples are given in Appendix C). There is a potential discrepancy however, between those instances that have been discovered and reported and the potential total occurrence rate. It is not known whether the low reported rates reflect a true low occurrence or whether detection methods are poor. Regardless, the reported prevalence at undergraduate level
should be a source of concern and provide the impetus for improved scrutiny by examination providers at post-graduate level. Unprofessional behaviour during training has shown to be predictive of disciplinary problems later in medical careers.\textsuperscript{2, 3}

Traditional forms of academic dishonesty in exams include copying from other candidates, taking reference notes into the exam hall, or seeking advance knowledge of questions or patients (simulated or real) included in the exam. Invigilation during the exam and high levels of security around exam materials are typical methods to prevent academic dishonesty.

However, modern technology has introduced new challenges. Watches and pens capable of internet browsing, glasses that transmit images and hidden ear pieces provide new ways of being dishonest and could therefore pose additional challenges for those tasked with prevention and detection of dishonesty. Similarly, the use of the internet and social media has made it easier to share exam content for those seeking to do so.

This guidance provides information on how to prevent, detect and regulate academic dishonesty in high-stakes summative exams. It is intended to provide a common basic standard to which individual Colleges and Faculties may add their own requirements.

Workplace based assessments are another potential area for academic dishonesty. These are discussed further in Appendix A.

In order to keep the main document focussed, Appendices A-E provide additional supporting information and resources.
Academic dishonesty is defined as any activity knowingly undertaken by a candidate for the purposes of gaining an unfair advantage for themselves or another candidate in an exam or assessment.

It should be noted that this definition does not include instances where innocent candidates are inadvertently exposed to exam materials.

Examples

Although there can be considerable overlap, examples are described according to whether they take place before, during and after the exam.

Before

— Providing false documents or altering documents from websites that are required as part of an application to sit the exam or that form part of eligibility requirements of an exam

— Falsely claiming a disability

— Using plagiarism of any type to create documents required as part of an application to enter an exam

— Attempting to gain or pass on information about exam content prior to the exam being held by any means. For example, bribery, theft, unsanctioned access

— Impersonation of an individual who has been accepted for entry into an exam

— Bribery of another candidate, exam staff, patient or simulation patient with the intent of gaining information or influencing the conduct of the exam in any way.

During

— Reading or copying the work of another candidate

— Communicating with another candidate

— Transferring information relevant to the exam to or from external third parties

— Colluding with another candidate to gain mutual advantage in any way
— Using materials or devices other than those permitted for the exam

— Using recording or transmitting equipment to:
  — Remove materials or content from an exam without permission
  — Release content from any exam to a third party/commercial organisation

— Failure to abide by the reasonable instructions of an invigilator or other exam official

— Disseminating or sharing exam material and/or details to candidates about to sit the same exam, before the diet is completed

— Any other form of dishonesty or conduct likely to give an unfair advantage to a candidate or others

— Aiding or abetting any of the above.

After

— Attempting to influence or corrupt results processing

— Falsification or alteration of any results document, qualification, or any other article from an exam provider.
We recommend that all Colleges and Faculties have clear internal policy documents and regulations relating to academic dishonesty and that these are publicly available on websites and/or elsewhere. The Royal Colleges of Physicians have produced a Code of conduct for exam applicants. This has been reproduced with permission, in Appendix D for Colleges and Faculties to use as a template for their own policy where necessary.

Suggestions for handling and reporting incidents of academic dishonesty are included in Appendix E.

General preventative actions

Some or all of the following actions should be considered:

— Colleges and Faculties should openly acknowledge that dishonesty can occur and that it presents a serious problem if it does
— Standards of conduct and probity for examiners and candidates should be clearly defined and publicised
— Entry to an exam should bind candidates to the College’s rules and regulations
— Medical Schools can help set high standards of moral behaviour:
  — The regulator should consider requiring medical schools to instil high moral conduct regarding academic dishonesty from the start of medical training and reinforce this regularly
  — Moral and ethical behaviour should be emphasised as an important part of the medical school curriculum. At undergraduate level, there is evidence that case-based ethics training improves moral reasoning
  — Create a culture of integrity and academic honesty in institutions with leaders acting as positive role models
— Developing a robust and transparent policy for dealing with dishonesty. This should:
  — Emphasise the seriousness with which all cases of misconduct are treated by an institution
  — Provide a clear definition of what constitutes misconduct
  — Outline the procedures for investigating cases of alleged misconduct
  — Give a list of penalties (usually in ascending order of seriousness) that will be imposed if allegations are found proven.
Impersonation and other fraud

Traditionally, exams have required photographic ID to be presented at the time of entry into the exam venue. This can guard against much identity fraud.

However, identity authentication is likely to be more of a challenge in electronic exams and assessments which require a username and password to access them. Therefore, identity verification by traditional or biometric methods must remain a key part of exam management to ensure that the correct candidate is taking the exam.

In addition, falsified documents may be used to infer eligibility to sit an exam. Commercial companies may be set up as bogus higher education establishments and issue falsely accredited degrees (‘degree mills’), sometimes sold on the internet.

The Academy considers that the following activities should be classified as academic dishonesty:

— Impersonation or substitution — taking the place of another candidate in an exam or asking another to substitute for oneself
— Sharing or using another’s exam login details
— Purchase or use of fake identification documents
— Purchase or use of fake qualifications attained from bogus schools or internet companies.

Preventative actions

— Robust checking of appropriate entry qualifications and criteria when a candidate applies to the exam
— Unimodal, or even multi-modal, biometric testing may be useful to check the identification of a candidate if the technology is available to deliver it.

Sharing exam materials

There is a wide spectrum of activity that may be included under this heading, making it a complex area. This activity might range from a candidate telling a family member with no connection to medicine about a single question in their exam, to candidates collaborating for personal gain with commercial course providers in the systematic, technology assisted harvesting of the detailed content of a large number of questions. The former is clearly not academic dishonesty but the latter is.

In general, candidates using simple memory recall of topics covered and discussing them with trainee colleagues and supervisors for entirely innocent educational purposes is not academic dishonesty and is commonplace.

It can occur between:

— A candidate and another candidate who sat the same exam at the same sitting
— A candidate and others who have already passed the exam
— A candidate and trainers
— A candidate and other candidates who are yet to attempt or pass the exam.
However, some Colleges and Faculties hold exams that use a limited question bank due to the nature of the assessment. In such cases, even innocent discussion (for educational purposes) of the topics included in the exam may threaten the exam’s integrity. Colleges and Faculties in this position should make it clear to candidates as part of the exam application process that any discussion of exam content should not occur and would be viewed as academic dishonesty.

Colleges and Faculties already make every effort to create as large a question bank as possible, both to ensure broad sampling of the syllabus and to minimise the risk of leaked questions weakening the validity of the exam. There is again, however, a spectrum of approaches that organisations take towards their question banks. Some publish them, arguing that if a candidate knows the answers to the questions, then the standard of the exam has been reached. Others, and particularly those with limited opportunities to develop an extensive question bank, are understandably anxious about any details leaking out to potential future candidates.

In addition to making every effort to create as large a question bank as possible, Colleges and Faculties should write their own regulations for candidates, examiners and exam staff regarding sharing exam content with others. These should describe clearly what is permitted and what is not. They should be included in the published general exam regulations which candidates are asked to confirm that they understand and agree to abide by.

We recommend that all Colleges and Faculties remain vigilant to the possibility that recent or current exam materials could be used by commercial course providers. If this occurs, it may be necessary to change the questions and if copyright has been contravened, they should be ready to take action.

Preventative Actions

— Colleges and Faculties should define what is acceptable practice, particularly around discussion of exam content for educational purposes and the development of study aids. This should be written into the published exam regulations which candidates are required to agree to follow when applying to enter the exam

— In particular, Colleges and Faculties should clearly indicate in their regulations what activities would be viewed as academic dishonesty. These include:
  
  — Selling questions
  
  — Uploading questions to the internet or distributing them via social media or written means
  
  — Making efforts to share exam content outside the candidate’s immediate educational sphere
  
  — Any deliberate attempt to undermine the integrity of the exam

— Examination bodies should ensure that there is sufficient copyright protection of exam content

— Employers and Statutory Education Bodies should aim to minimise fatigue and burn out among trainees as these have been shown to have a direct association with dishonesty and cheating and an inverse association with altruistic, professional behaviour.

— Consider generating sufficient questions to ensure that reuse is minimised. However, this may be unfeasible due to cost, labour intensity and assessing the validity/performance of exam questions

— Take legal action against both candidates and commercial courses using recall questions if copyright violation has potentially occurred

— Take action against candidates, examiners or examination staff if exam regulations are breached

— Switch Objective Structured Clinical Examination (OSCE) stations from circuit to circuit to dissuade the sharing of information, change scenarios for morning and afternoon sittings, confiscate communication devices, or quarantine candidates until their peers have completed their OSCE circuit.
During the exam

Academic dishonesty during an exam includes, but is not restricted to:

— The introduction into any exam of any materials, audio or communication devices (including mobile phones and smart watches), other than those specifically permitted for the exam
— Any attempt to access the internet
— Any attempt to remove materials or content from an exam other than those specifically permitted, except by a person with authority to do so
— The use of any recording equipment (including all photographic, video and audio recording equipment)
— Any attempt to communicate with another candidate
— Any attempt to gain access to, read or copy the work of another candidate
— Impersonation or attempted impersonation of a candidate
— Bribery (of another candidate, exam official, actual or simulated patient)
— Failure to abide by the reasonable instructions of an invigilator or other exam official, or breaching of Exam Regulations
— Falsification or alteration of any form of identification, admissions document, results document or qualification including falsified documentation submitted as evidence to support a reasonable adjustment (e.g. falsification of educational psychologist dyslexia reports)
— Any other form of dishonesty or conduct likely to give an unfair advantage to the candidate or others
— Aiding or abetting any of the above including making work available to another person for copying.

Preventative actions

The following actions can be useful to reduce the possibility of dishonest behaviour during an exam:

— Colleges and Faculties should provide clear written definitions to candidates of those actions that are regarded as academic dishonesty during an exam
— Publicising rules governing expected standards of behaviour and how these will be enforced
— These definitions should be freely available at the time of application and emphasised or repeated, verbally and/or in writing at the exam venue before the start of the exam
— Candidates should know that if they have any concerns about the conduct of a fellow candidate this should be brought to the attention of the exam organisers as soon as is practicable. The means by which they can do this, during or after the exam, openly or anonymously, should be made clear
— Colleges and Faculties should work together to examine the use of technology to identify and prevent dishonesty
— Having clear documentation of what candidates can expect on exam days
— Clear announcements at the start of exams stating that candidates are not permitted to communicate with each other during the exam
— All candidates should be told that no items are permitted to be taken into an exam unless express permission is granted in advance and said items are inspected before the exam begins
— Ensuring an appropriate ratio of invigilators to candidates, for example a minimum of 1:25
— Sufficient spacing between desks to make copying or collusion difficult
— Seating arrangements that either randomly assign candidates to seats or allocate
specific seats to specific candidates (it is recommended this is not done using any obvious categorisation such as alphabetical order)

— Training for invigilators on ‘enhanced’ invigilation techniques, such as making sure that candidates are aware that they are being monitored by walking around the room, making eye contact with candidates, not appearing distracted

— Ideally only one candidate at a time to be permitted to leave the room, accompanied by an invigilator, for rest or toilet breaks

— Invigilators should immediately attend to any suspicious conduct by the students. If the conduct is suspicious (but not necessarily conclusive), invigilators should consider moving the students to other locations in the room

— If a candidate is suspected of dishonesty during an exam, s/he should be allowed to finish the exam as s/he may subsequently be found to be innocent

— Keep written records of the description of the dishonesty incident and the actions taken

— Instruct all candidates that all note paper and question papers must be left in the exam room at the end of their exam

— If possible use more than one examiner in each exam station of an OSCE or oral exam

— If possible use facilities/venues that have CCTV cameras set up to view/record student behaviour to act as both a deterrent and possible evidence of malpractice

— Utilising collusion detection software in answer sheet analysis

— If the same exam is being delivered repeatedly during a single day or across different time zones then it may be necessary to quarantine exam candidates to ensure that there is no possibility of sharing exam content with others overseas before they start their exams

— Ensuring that candidates hand in all mobile phones or other devices before the start of the exam and do not have any other unauthorised material

— Exam bodies using third party exam centres for computer based summative assessment should satisfy themselves that security and invigilation during the exam meets the standards that they require

— Sending ‘mystery shopper’ type observers to third party centres to monitor the quality of invigilation and security procedures.

After the exam

Academic dishonesty after an exam includes attempting to remove exam materials from exam centres and providing lists of question topics on the internet or social media (see Sharing exam materials above).

Examiners and examination staff should also be reminded of their responsibilities for maintaining the security of material with which they are entrusted and that they should not divulge exam content. Published exam regulations should make this clear and should include clear conflict of interest policies to provide guidance about which teaching and preparation activities they can participate in. For example, some Colleges and Faculties preclude their examiners from teaching on exam preparation courses. Candidates should be encouraged to inform Colleges and Faculties of any concerns regarding potential breaches of exam regulations in relation to the sharing of exam content.

Preventative actions

The following actions can be taken to reduce the possibility of dishonest behaviour after an exam:

— Emphasise what would constitute academic dishonesty in terms of content sharing in the exam’s regulations and code of conduct documents

— Require candidates to confirm their agreement to abide by the exam regulation

— Actively monitor internet preparation sites to identify whether they are being used to share recent exam material. Request that candidates inform their College or Faculty if
they suspect or are aware of exam material being shared in this way

— Develop clear copyright and security policies so examiners and content creators are aware of their specific responsibilities for protecting material

— Act against commercial course providers that are identified as breaching copyright

— Publicising that action has been taken against dishonest candidates using the published regulations and emphasising the serious consequences that this can have for future careers.
Appendix A

Workplace Based Assessments

In 2005, Workplace Based Assessments were introduced into Foundation training in postgraduate medical education to support the move to a competency based curriculum. Unfortunately their introduction proved challenging. The Academy document of 2009 *Improving Assessment* stated ‘unfortunately unrealistic time scales, together with the lack of resource and inadequate assessor training, led to the hurried implementation of workplace based assessments and the development of undesirable practices. This has resulted in widespread cynicism [...] and the profession is rightly suspicious of reductive tick boxing approaches to assess the complexities of professional behaviour’.

Although the literature is sparse, some of this is reflected in documents which refer to gaming and subversion in Workplace Based Assessments and high degrees of subjectivity and assessor bias.

It would appear from both Academy feedback and some published work that there has been at best, poor understanding of the use of workplace based assessments and at worst, genuine dishonesty in completion of WPBA by some trainees and trainers.

The Academy document, *Improving Assessment*, recognised many of these challenges and made recommendations, particularly around workplace based assessments being considered formative rather than summative. For those assessments that are still used in a more summative way, such as multi-source feedback, there does appear to be better evidence in the literature for educational viability. In a follow up document in 2016, the Academy also looked in more detail at the roles and responsibilities of trainees and trainers. This includes emphasis on the formal training of trainers as is now required by the GMC, as well as trainees. The aim is ‘a shared understanding and a consistency in the use of WPBA’s and the application of Standards.’
All forms of academic dishonesty undermine the validity of assessments and potentially jeopardise patient safety by awarding qualifications to those who have not fairly demonstrated or attained the requisite level of knowledge or skills required to pass. Scores obtained by fraudulent means are not valid and if allowed to stand, may have a negative impact on the validity of all scores for that assessment.

There is a perception that research findings about academic dishonesty do not apply to those working in medicine, 'In health professional education, there is a tendency to assume the nobility of these disciplines would result in a lower incidence of dishonest behaviours'. However, it has been suggested that anything between 50% and 90% of undergraduate medicine or nursing students have either participated in, or witnessed some form of academic dishonesty.

There is a suggestion that dishonesty is perhaps more prevalent in high-stakes exams and that some forms of exams are thought to be more vulnerable, such as multiple-choice knowledge based assessments.

A number of reasons why exam candidates engage in academic dishonesty have been suggested:

— Certain personality traits may make people more likely to act dishonestly in exams
— Pressure to obtain good grades and progress through training
— An attitude that ‘everyone does it, so why shouldn’t I?’, can perhaps contribute to an atmosphere where dishonesty is common. Candidates believe that dishonesty is seldom detected, and that action is rarely taken against those who get caught
— Believing that dishonesty is a less serious form of unprofessional behaviour because it does not directly harm patients.

Dishonesty can also take the form of institutional fraud. In some undergraduate settings candidates’ exam performance may directly reflect the performance or quality of the educating institution. A widely accepted definition of institutional fraud describes it as ‘the use of public office for private gain in the academic field, especially regarding accreditation of courses and institutions, examinations for access and for the transfer between institutions, certificates and diplomas, university/college research and publications.’

This can manifest in a number of ways prior to the candidate taking the exam:

— Educational Institutions collude by providing extensive study guides/ tutorials or giving the same exam previously given
— Exam staff, paper setters, moderators or administrators leaking the exam paper prior to the sitting because of favouritism, bribery or a desire to protect the academic reputation of their institution. For example, in August 2017 questions were found to have been leaked by teachers at top public schools who were also serving as examiners
— Improper allocation of candidates to targeted exam centres
— The use of ‘ghost centres’ — fictitious centres established by corrupt officials where candidates can complete the exam with support.
Although performance in UK postgraduate exams partly reflects on the quality of training provided, Colleges and Faculties are not directly responsible for the delivery of that training. There is no suggestion or evidence of any UK postgraduate examination or training institution being implicated in fraud or of having any motivation to act fraudulently.

The literature suggests a number of ways to address academic dishonesty and that a combination of approaches will work best in trying to prevent and detect dishonesty. No one single method can work entirely on its own and all test centres need to adopt specific practices such as:

— Adopting a zero tolerance attitude to any breach of regulations
— Involving trainees and candidates in the prevention and detection process. For example, asking trainees to be invigilators or requiring sign up to ‘honour codes’. These are used in American universities and emphasise students moral and ethical responsibilities, which has been shown to reduce dishonesty 26, 29
— The literature consistently suggests that peer behaviour has a strong impact on ethical decisions 31 and that minimal success has been reported following the use of sanctions 30 as the risk of being caught is low. Therefore, approaching the problem from a positive perspective, promoting the desired behaviours and values, assists in creating a positive and supportive environment and works more effectively than tackling it in a purely punitive manner 23, 28

Specialised software can be used to identify suspicious patterns of answers between pairs of candidates or other anomalous patterns of results. An example is Acinonyx which was developed by MRCP(UK) and is used at a number of institutions. 26 The existence and use of this software should be made clear in exam regulations. In summary, the existing literature suggests that the following will all help to mitigate against academic dishonesty in exams:

— Demonstrating that academic dishonesty will not be tolerated
— Promoting a positive environment that values honesty but also highlights the measures that are in place to prevent and detect academic dishonesty
— Highlighting the serious penalties that can be imposed if dishonesty occurs.

A number of examples of academic dishonesty have been published and include:

— In 2013 an Australian medical school delivered an MCQ exam on tablets. Students took screen shots and disseminated them to students yet to take the exam 32
— In March 2017 it was reported that more than 270 final year students at Glasgow University had to retake an OSCE exam as individuals who had already sat the exam were caught sharing information with students yet to take the exam via Facebook, Whatsapp and the university’s own information platform. 33

Some attitudes to sharing recalled exam questions are clear. The American College of Radiology states that ‘taking questions is theft and selling, posting or otherwise giving the question to others is transfer of stolen property. Accepting the questions or using them in any way is possession of stolen property.’ 34 Similarly, in 2010 the American Board of Internal Medicine suspended or revoked certification 139 physicians found to be disclosing exam questions from memory to a commercial company. 35
## Appendix C
Examples of Colleges’ experience of academic dishonesty

<table>
<thead>
<tr>
<th>College</th>
<th>Incident</th>
<th>Scenario</th>
<th>Outcome</th>
<th>General Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td>RCPCH</td>
<td>One suspected</td>
<td>Computer based knowledge test</td>
<td>Insufficient evidence to investigate</td>
<td>No evidence of use of examination materials by commercial course providers</td>
</tr>
<tr>
<td></td>
<td>One suspected</td>
<td>Computer based knowledge test</td>
<td>Under investigation</td>
<td>No knowledge of what is taught on commercial courses</td>
</tr>
<tr>
<td>RCGP</td>
<td>Regular attempts</td>
<td>Attempted removal of notes describing material used from the examination</td>
<td>Candidates sign a non-disclosure agreement</td>
<td>No evidence of use of examination materials by commercial course providers</td>
</tr>
<tr>
<td></td>
<td>One investigated</td>
<td>ePortfolio seen at ARCP contained detailed discussion between trainee and trainer of cases from the trainee’s examination</td>
<td>Investigated — no sanction (was viewed as reflection and education aimed at improving future practice)</td>
<td></td>
</tr>
<tr>
<td>RCPsych</td>
<td>None</td>
<td></td>
<td></td>
<td>One course provider warned by the GMC about the use of examination materials</td>
</tr>
<tr>
<td>RCPath</td>
<td>Two investigated</td>
<td>One case — no further action</td>
<td></td>
<td>No involvement or endorsement of commercial course providers</td>
</tr>
<tr>
<td></td>
<td></td>
<td>One case — candidate referred to GMC</td>
<td></td>
<td></td>
</tr>
<tr>
<td>RCoA and FICM</td>
<td>Very few</td>
<td></td>
<td></td>
<td>Robust misconduct policy with greater awareness, higher security and better invigilator training</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Concerns, but no evidence of use of examination materials by commercial course providers</td>
</tr>
<tr>
<td>RCR</td>
<td>A few every year</td>
<td>Range in severity</td>
<td>Five disqualifications and a number of written warnings</td>
<td>Publication of questions online by candidates - asked by College to remove them</td>
</tr>
<tr>
<td>College</td>
<td>Incident</td>
<td>Scenario</td>
<td>Outcome</td>
<td>General Comments</td>
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<tr>
<td>MRCP(UK)</td>
<td>80 cases investigated since 2011</td>
<td>Copying and communication between candidates</td>
<td>14 candidates referred to GMC</td>
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<tr>
<td></td>
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<td>Unprofessional behaviour</td>
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<td>Attempting to gain prior knowledge of examination content</td>
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<tr>
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<td>Falsely claiming to hold qualifications</td>
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</table>
Appendix D
Template Code of conduct for examination applicants and candidates

The following template can be adapted for your College or Faculty if such a code is not already in place. It is reproduced, with permission, from the Code in use by MRCP(UK).

Code of Conduct for Examination Candidates

Candidates for [NAME OF ORGANISATION] examinations are required to behave in a professional manner throughout their dealings with the [NAME OF ORGANISATION]. This includes conduct during the examination and in all interaction with examiners, invigilators and staff before, during and after the examination.

Candidates should note that by virtue of applying to sit an examination they are deemed to have understood and agreed to respect and abide by all relevant regulations, including this Code of Conduct.

This policy has been developed to provide a framework against which allegations of misconduct related to behaviour will be judged. In the event of any allegation of misconduct [NAME OF ORGANISATION] will undertake an investigation governed by the following principles:

General standard of behaviour

The [NAME OF ORGANISATION] acts to maintain the safety and security of all individuals associated with its examinations.

Candidates are expected to behave in a professional manner, befitting a member of one of the Royal Colleges, in all activities associated with the examination. Adherence to the principles and values within General Medical Council [GMC]’s Good Medical Practice is expected at all times.

The [NAME OF ORGANISATION] expects all candidates to treat everyone they encounter during their examination experience with dignity and respect.

Interacting with other candidates

[NAME OF ORGANISATION] strive to ensure that the examination experience is as calm and pleasant as possible for everyone.

Candidates are expected to act with respect for fellow candidates

Candidates are expected to ensure that their behaviour is not disruptive and does not affect other candidates attempting the examination at the same time.

Examples of inappropriate behaviour may include, but are not restricted to, threats, unwanted advances, questioning the fairness of another candidate’s success in getting a space or passing the examination.
The following are guidelines for trainees/examination candidates:

— Assistance or the communication of information by one examination candidate to another in an assessment (usually relevant only to examinations and online tests) is not permitted.

— Copying or reading from the work of another examination candidate or from another candidate’s books, notes, instruments, computer files or other materials or aids is not permitted.

— Offering a bribe of any kind to an invigilator, examiner or other person connected with an exam/assessment is not permitted.

— Any attempt to tamper with assignment or examination scripts after they have been submitted by examination candidates is not permitted.

— Fabricating or falsifying data or results by individual candidates or groups of candidates for example a member of staff tampering with assessment or examination scripts or results after candidates have submitted them. This would be a case of centre malpractice.

Collusion is a form of plagiarism that involves unauthorised cooperation between at least two people with the intent to deliberately mislead or deceive. Collusion can take the following forms:

— Two or more candidates conspiring to produce a piece work/answer questions together with the intention that it is submitted as his/her own, individual work. Or with the intention of at least one candidate submitting it as his/her own, individual work.

— A candidate submitting the work of another candidate (with their consent) as his/her own, individual work. In such cases, both candidates would be deemed to be guilty of collusion.

— The submission of a piece of work that is not the candidates own individual work that has been purchased from a third party. For example, from an essay or assignment writing service or by approaching another individual to produce a piece or work on their behalf. It is acknowledged this is also an example of plagiarism.

— Unauthorised cooperation between a candidate and a third party in the production of a piece of work that will be submitted as the candidates own.
Appendix E
Reporting incidents of academic dishonesty to the regulator. Possible sanctions and actions

It is recommended that all Colleges and Faculties have published policy procedures in place for the investigation of academic dishonesty. The policy should include guidance on reporting the decisions of any College internal panel to the regulator (GMC). The policy should also detail the appeals process to any decision made by the panel. Colleges should contact the GMC at an early stage if academic dishonesty is suspected in order to ascertain whether formal reporting is required before or after any internal inquiry.

Sanctions that Colleges may wish to consider when deciding that academic dishonesty has occurred may include, but not be restricted to, any of the following:

— Declaring the results of the related exam null and void
— Declaring all previous exam results null and void — candidates would have to re-enter all exams
— Recommending to the College or Faculty Council that the candidate should not be considered for membership of the College/Faculty in the future
— Recommending to the College or Faculty Council that the candidate’s membership of the College/Faculty should be considered for termination or suspension in accordance with the regulations concerning the conduct of members
— Informing the candidate’s educational supervisor of their offence against the College or Faculty
— Informing the candidate’s employer of their offence against the College or Faculty in the interests of patient safety.

If found guilty of academic dishonesty in a professional exam it will be reported to the GMC, or equivalent body if the candidate is resident in another country. Ordinarily Colleges and Faculties will not take this step until the internal review process has been completed. However, Colleges/Faculties reserve the right to take appropriate action at any stage, particularly if the circumstances of the allegations suggest that regulatory action (such as suspension) may be necessary in the interests of patient safety while investigations are pending.

In deciding which sanction to apply investigatory panels should take into account:

— The risks to patients from not applying each and any of the above
— The need to preserve the integrity of College 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.
References


14. Fake Diploma Review [online] Available at: https://www.fakediplomareview.org [accessed 18 November 2018]


29. Harvard University. The Honor Code. Available at: https://honor.fas.harvard.edu/honor-code [accessed 20 November 2018]


Acknowledgements

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Gareth Griffiths
Andrew Elder
Benjamin Gillon
Rosalind Bacon
Daniel Crane
Chris McManus
Marina Soltan
David Black
Carlo Berti
Coreen Beckford
Kenneth Dagg

With thanks and acknowledgement to all members serving on the Academy Assessment Committee.