

**UNITED REPUBLIC OF TANZANIA**



**MINISTRY OF HEALTH, COMMUNITY DEVELOPMENT,  
GENDER ELDERLY AND CHILDREN**



**MEDICAL COUNCIL OF TANGANYIKA (MCT)**

**THE REGISTRATION AND LICENSURE EXAMINATION  
GUIDELINE FOR MEDICAL, DENTAL AND ALLIED  
HEALTH PROFESSIONALS IN TANZANIA**

**November, 2020**

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## **ACRONYMS**

AMEPTA	– Association of Medical Practitioners in Tanzania
APTA	– Association of Physiotherapists in Tanzania
MAT	– Medical Association of Tanzania
MCQ	– Multiple Choice Questions
NACTE	– National Council for Technical Education
TCU	– Tanzania Commission for University
TDA	– Tanzania Dental Association
TOTA	– Tanzania Occupational Therapy Association

## DEFINITION OF TERMS

**“Accrediting bodies”** shall refer to TCU and NACTE or any other body vested with that function by law

**“Certificate”** means a document awarded by a recognized institution as proof that the candidate has successfully completed the training program in a particular field and level

**“Cheating”** means any action or omission that involves Falsification, impersonation, use of unauthorized materials or gadgets during the course of examination.

**“Competence”** means Knowledge, skills and attitude

**“Council”** means the Medical Council of Tanganyika.

**“Dates of examination”** means day and time the examination is held.

**“Educational programme”** means a course of training, or study recognized by the Council.

**“Examination Centre”** means a venue in a specified geographical area approved by the council to be used for the purpose of conducting licensure examinations.

**“Examination levels”** means distinct categories of registration examination required for the candidates to pass for registration.



**“Examination Offence”** means any irregularity committed or omitted either before, during, or after the examination by the conduct of any offender in relation to examinations.

**“Examination Appeals”** means an application made to the Council requesting for a review of the examination results.

**“Examinee”** means any qualified person who has applied to the Council to sit for an examination.

**“Examiner”** includes any person appointed by the Council as setters, moderators, invigilators and markers for purposes of processing and administration of examination.

**“Examination Marking Panel”** means a group of professionals appointed by the Council to mark, score and record marks of the examination and submit initial report on candidates’ performance to the licensure examination committee.

**“Invigilator”** means an officer in charge of licensure examinations in an examination room to ensure that the examination is properly conducted and no candidate or other person violates the examination regulations.

**“License”** means an official written or printed document granted to a person that may be used as proof or an evidence of competence(s) that a person is allowed to practice in the country.

**“Examination and registration Committee”** means committee as appointed by the Council to regulate examination and registration.

“**Licensure**” examinations mean examinations prepared by Medical Council for registration in the country.

“**Licensure**” means a mandatory credentialing (allows an individual to practice a profession) process established by a government entity, usually at the state level.

“**Marker**” means an individual professional appointed by the Council to mark, score and record marks attained by examinees.

“**Moderator**” means any person appointed by the Council to proofread, reconstruct and recommend to the Council questions items for licensure examinations.

“**Paper setting Panel**” means a group of professionals appointed by the Council to set from database, safeguard the production, packing, and safekeeping of licensure examinations.

“**Professional course**” refers to a course adding to a professional qualification.

“**Question Moderating Panel**” means a group of professionals appointed by the Council to proofread and reconstruct; and recommend to the Council question items for licensure examinations.

“**Provisional Results**” means examination results, which have not been approved by the Council.

“**Registrar**” means an official secretary and chief executive officer of the council who effects registration and in the country.

**“Registration”** refers to process of making official entries into register, roll and list names of successful graduates.

**“Scope of Practice”** means the procedures, actions, and processes that are permitted for the licensed individual and is limited to that which the law allows for specific education, experience, and specific demonstrated competency.

**“Security Organs”** means an official organization that includes importantly police and other security parties involved in ensuring security of licensure examinations.

**“MCT Secretariat”** means all persons appointed by the government to work at the headquarters of the Council to manage day to day activities

## **Foreword**

The Medical Council of Tanganyika is mandated with the regulation of training, registration, licensing and practice of Medical, Dental and Allied Health Professionals in Tanzania Mainland. Among the regulatory tools is the licensing examination guideline. The development of this examination guideline is aiming at putting in place quality assurance checks in the training and qualification of graduates.

Regulation of training is one of the important functions of the Medical Council of Tanganyika and the development of these examination guidelines will ensure that graduates of the programs meet expected levels of competence. These guidelines provide for the standardized criteria for assessment of all graduates trained from the various institutions within the country, from outside the country and those who hold equivalent qualification from other countries and would like to practice in the country.

This guideline provides full information to candidates and other stakeholders on Council's licensure examinations procedures. Adherence to this guideline will ensure smooth implementation of examinations procedures and support the council in realization of its objectives.



**Prof. David Paul Ngassapa**  
**Chairman of Medical Council of Tanganyika (MCT)**

## **ACKNOWLEDGEMENT**

The establishment of Registration and Licensure examination is an important step towards controlling the quality of Health practitioners in the country. This follows a good practice which has been implemented by other professionals in the country and Medical throughout the world. Hence, following enactment of the Medical, Dental and Allied Health Professionals Act, CAP 152; which prescribed Examinations before Registration the Council had to put in place this guideline which will help in the conduction of the examinations.

The Council wishes to acknowledge the contribution given by a number of individuals in the making of this guideline. The making Prof. Bakari Lembariti, Dr. Ndimila Mabula, Dr. Sara Urasa, Dr. Elisha Osati, Dr. Larry Akoko, Dr. Delfina Msanga and Mr. Gideon Kaluguru,

The document was enriched by the contribution of various stakeholders including Medical Association of Tanzania (MAT), Tanzania Dental Association (TDA), Tanzania Occupational Therapy Association (TOTA), Association of Physiotherapists in Tanzania (APTA), National Council for Technical Education (NACTE) and Association of Medical Practitioners in Tanzania (AMEPTA).

Last, but not least the Council wishes to extend its appreciation for the daily efforts made by the Secretariate which in part has contributed in making this guideline a reality. To you all we Say Thank you.



**Dr. David Paul Mnzava,**  
**Registrar Medical Council of Tanganyika (MCT)**

# **1. INTRODUCTION**

## **1.1 Background**

The Medical, Dental and Allied Health Professionals Act no. 11 of 2017 establishes licensure examination in Section 20 (1) (b) by providing that to be one of the requirements for registration. The development of this examination guideline was necessitated by the changes that have taken place in Health sector, Leadership and Integrity that impacted on quality of healthcare delivery in the country.

Regulation of practice is one of the main functions of Medical Council of Tanganyika and there is need to maintain highly competent Practitioners at all levels. This guideline is therefore geared towards making sure that the graduates released to the public are competent to be able to provide the highest quality of healthcare to Tanzanians as provided for in the Tanzania health Policy in order to protect the public from harmful practices. The guideline is designed as a quality assurance assessment tool for all graduates trained from the various institutions in country and those who train outside the country and those who hold equivalent qualification from other countries and would like to practice in Tanganyika.

The aim of this guideline is to set the standards to be used for conduction of the licensure examination in the country for assessing generic competences of exiting graduates. In keeping with set standards, students and training institutions are required to familiarize themselves with this guideline and any other regulations that may be issued by the Council from time to time.

## **1.2 Vision**

“An excellent and adaptable regulatory body that oversees adherence of professional ethics and conduct of practitioners for public safety”

## **1.3 Mission Statement**

“To regulate medical, dental and allied health practice through registration, licensing and continuing professional development for the provision of quality health care to the public”

## **1.4 Core Values**

### **Integrity**

We practice with optimal diligence and competence, in the right manner, demonstrating appropriate attitudes in executing duties.

### **Accountability**

We adhere to standards, guidelines and be responsible for any action taken.

### **Justice and Fairness**

We uphold fairness and equitable treatment for medical, dental, allied health professionals and the public.

### **Transparency**

We discharge the council duties using participatory principles and openness.

### **Confidentiality and Privacy**

We strive to achieve confidentiality and privacy regarding information of the council and its clients.

## **Professionalism**

We abide to ethical standards and practice of the highest order in executing Council functions.

## **Result oriented**

We strive for efficiency and effectiveness in performance of our daily duties.

## **Teamwork**

We pledge to work together in achieving Council Goals through sharing competences, experience and mentoring.

## **1.5 Guideline Purpose**

The purpose of this guideline is to provide for quality assurance in the process planning, administration and overall management of licensure examination.

## **1.6 Target Persons**

The target persons include all graduates who are holders of:

- i. Technician Certificate of clinical Medicine
- ii. Ordinary Diploma in clinical Medicine
- iii. Medical Doctor degree or equivalent
- iv. Dental Surgeons degree or equivalent
- v. Ordinary diploma in Clinical Dentistry
- vi. Advanced diploma in Clinical Dentistry
- vii. Advanced diploma in Clinical Medicine
- viii. Ordinary diploma in Dental Technology
- ix. Ordinary diploma in Dental Laboratory Technology
- x. Degree in Physiotherapy
- xi. Ordinary diploma in Physiotherapy
- xii. Certificate in Physiotherapy
- xiii. Degree in Occupational Therapy
- xiv. Ordinary diploma in Occupational Therapy



- xv. Certificate in Prosthetics and Orthotics
- xvi. Degree in Speech and Language Pathology
- xvii. Ordinary diploma in Speech therapy
- xviii. Certificate in Speech therapy
- xix. Bachelor of science in Mental Rehabilitation
- xx. Bachelor of prosthetics and Orthotics
- xxi. Ordinary Diploma in prosthetics and Orthotics
- xxii. Certificate in prosthetics
- xxiii. Certificate of Orthotics

## **2.0 LICENSURE EXAMINATION SCOPE**

### **2.1 Eligibility criteria**

- i. Candidates trained and qualified at examination level of bachelor degree, Diploma and certificate, from health Training Institutions accredited or recognized by TCU and NACTE and approved by MCT.
- ii. Applicants desired to upgrade from one examination level to next examination level of Medical, Dental and Allied Health profession for example from Certificate to Diploma, or diploma to bachelor degree.
- iii. In case of post graduate training he/she has not been registered in the country except from those countries whose Council has reciprocal recognition agreement with the Council in Tanzania
- iv. Candidates who have passed qualifying examination and awards offered at Health Training Institutions.
- v. There shall be a Licensure Examination for:
  - a. Graduates for Certificate Examination
  - b. Graduates for Diploma Examination
  - c. Graduates of Advance Diploma
  - d. Graduates for Bachelor Degree Examination
  - e. Those who have not practiced for more than 3 years without retaining themselves BUT only after 3 months attachment to a facility recommended by the Council.

### **2.2 Licensing Examination Scope**

- i. According to the prescribed standards of Practice for Medical, Dental and Allied Health Professionals, formulation of licensure examination shall focus on the scope of practice guidelines that is required to

- be demonstrated by each qualification level and category in its daily practice.
- ii. Furthermore, Licensure examination shall include questions assessing all the competences as outlined in the respective curricula framework. Examination format may include multiple choice questions (MCQ), OSCE/OSPE, essays, log books and oral components.
  - iii. The number of examination papers and extent of the examination shall be determined by the council from time to time depending on feasibility of such expansion and availability of resources.

### **3.0 EXAMINATION PREPARATION**

There shall be six areas to be addressed during examination preparation

#### **Identification of item setters**

- i. The Council shall identify examination setters annually from among its licensed members practicing.
- ii. Setters shall be practicing professionals with good standing.

#### **Moderators**

- i. The council committee for examinations and registration shall appoint a panel of moderators.
- ii. The moderators shall come from among Professionals from academic and Teaching Hospitals in health and allied institutions.

#### **Invigilators**

There shall be a team of experienced qualified registered practitioners appointed to invigilate examinations

- i. The Council Shall appoint invigilators during each examination session according to the examination calendar
- ii. The total appointed invigilators shall reflect the number of candidates, examination room capacity and available resources
- iii. The council shall appoint a chief invigilator from among the appointed invigilators.
- iv. The chief invigilator shall be a senior member in the invigilation team.
- v. Invigilators shall be practicing professionals with good standing.

- vi. Appointed invigilator shall receive an appointment letter and terms of references for examination invigilation.

### **Markers**

- i. The Council shall appoint examination markers following every examination session completion.
- ii. The number of examiners shall correspond to the number of examinees, type of examination (MCQ vs essays) and available resources.
- iii. Markers shall be practicing professionals with good standing.
- iv. The council shall appoint a chief marker from the panel of markers
- v. The council shall appoint script verifiers from among the markers.

### **Supervisory authority**

- i. The head of health services in the districts, regions or zones that will be hosting the examinations shall be notified by the Registrar to offer support during examination process.
- ii. The institution shall have a safe custody or strong room for storage of examinations. To arrange for safe custody of examination.

### **Security officer(s)**

The Registrar shall liaise with security organs to offer security personnel for the examination process.

## **ROLES AND RESPONSIBILITIES**

### **Examination item setters**

- i. Shall develop examination items and send to the council examination and registration committee for banking.
- ii. Shall develop examination marking guide/scheme for each item(s) set.
- iii. Ensure inclusion of practice contribution in the assessment items development

### **Examination moderators**

- i. Shall ensure relevancy, validity, reliability, and applicability of the examination items in accordance to the standards competencies and scope of practice for Medical, Dental and Allied Health profession
- ii. Shall determine level of difficulty of the licensing examination in relation to purpose and objectives of the examination as well as qualification level of candidates.
- iii. Shall ensure fairness and manageability of examinations given the number of examinees.
- iv. Shall perform paper setting ready for examination administration.

### **Chief invigilator**

- i. Shall be the leader of the invigilation team.
- ii. Shall ensure examination candidate attempts his licensure examination.
- iii. Shall check correctness of candidate's name and registration number entered into the Attendance list.
- iv. Shall monitor examination to be conducted in accordance to given instructions and time table.
- v. Ensure examinations is conducted as per set regulations.

- vi. Ensure proper filling of all examination related documents.
- vii. Ensures all Invigilating Procedures adhered to by all invigilators.
- viii. Sort out any pending matter before examinations kicks off.
- ix. Shall submit examination center report on the conduct of the examination and other relevant matters to the Registrar.

### **Invigilators**

- i. Shall conduct a pre examination invigilators meeting with chief invigilator and invigilators on site.
- ii. Venue preparation (ensure cleanliness, inspect for unauthorized materials Safety).
- iii. Organize sitting arrangements for the candidates.
- iv. Introduction of invigilators to the candidates
- v. Verify candidates' number and their names against their printed identification
- vi. Briefing candidates about the expectation during the examination (Appendixes I & II: Invigilators and candidates' instructions).
- vii. The chief invigilator shall make a report on any candidates who is unable to continue with the examination due to a specific illness or state (Appendix).
- viii. Supervise the examination process and ensure all regulations are adhered to.

### **Chief Markers**

- i. Conduct panel discussion for standardization of the answer guide/scheme
- ii. Arrange and conduct sample examination marking

to ensure that markers mark in accordance with the agreed answer guide.

- iii. Observe and comments on the work of candidates and report any malpractice/irregularity observed.
- iv. Ensure that candidates answer sheets and mark sheets are well arranged, and packed.

Write a detailed examination report not only on the marking exercise but also performance of candidates.

- v. Prepares final examination results ready for submission to the council examination and registration committee.

### **Examination markers**

- i. The markers shall ensure that all scripts are marked according to the approved marking scheme for that examination.
- ii. The markers shall use a pen which writes in Red ink for marking.
- iii. The Chief Marker and Checkers shall use a pen, which writes in black ink.
- iv. Candidate's scripts shall be marked and graded in a uniform way.

### **Examination scripts verifier**

- i. Check all marked scripts and transfer of marks from scripts into mark sheet or relevant examination place.
- ii. Verify the Mark and score is correct
- iii. Perform compilation of examination results
- iv. Confirm that all scripts are marked and graded by the examiners
- v. Recheck to ensure correct examinees registration numbers are recorded in the score transfer sheet



## **Supervisory Authorities**

- i. Facilitate smooth conduct of the exam
- ii. Assist in local coordination
- iii. In Collaboration with the security officer ensure security of the exam before and after.

## **Security Officer**

- i. Monitor to ensure security of the examinations during storage, transport and conduct.
- ii. Advise on all security matters related to the whole examination process.

## **4.0 EXAMINATIONS ADMINISTRATION AND OPERATIONAL PROCEDURES**

### **4.1 Examination Dates and Time**

There shall be examinations as determine by the council from time to time to be conducted in the following manner:

- i. The dates of examination shall be announced by the Council at least 2 months prior to the examination date
- ii. Applicants shall submit their application and pay required fees 21 days prior to the examination date.
- iii. A candidate shall be required to sit for examination at the center he/ she has registered

### **Establishment of an Examination Centre**

- i. The Council shall determine the number of examination centers from time to time.
- ii. The examination centers shall be communicated to the examinees during the exam advertisement
- iii. Each examinee shall be required to choose the examination center they wish to sit for the exam
- iv. The Council shall prepare and provide identity for licensure examination to candidates 14 days before the stated date
- v. Candidate shall report to the examination center one day before the day of examination
- vi. The examinee shall arrive 30 minutes before the examination to the examination room

### **Application and Registration for examination**

- i. Application will be open to candidates who are eligible examination for the examination at least 2 months the examination date

- ii. The applicants shall be required to attach copies of relevant examination certificates i.e.
  - a. Award letter
  - b. Certificate of equivalent recognition award from accrediting bodies
  - c. Birth certificate
  - d. Form four certificate
  - e. Form six certificate
  - f. Certificate of internship
  - g. Assessment from each rotation
  - h. Undergraduate certificate
  - i. A colored passport size with blue background.

### **Postponements of examination**

- i. A candidate who fails to show for a registered examination and provides such information 15 days before the examination date shall have the examination fee deferred to the next examination when next offered.
- ii. No show for a registered examination shall not bar a candidate who has been registered for examination to sit for it when it is next offered.
- iii. Candidates who fail to complete examination during the examination process due to medical reasons shall be allowed to sit another examination when next offered but after paying another examination fee.

### **Invigilation team**

Each examination center will have an invigilation team comprises of the following members:

- i. The chief invigilator
- ii. Appointed invigilators (there shall be a minimum of 2 invigilators per center)

- iii. Regional/District Medical Officer (Local logistics and Supervisory Authority)
- iv. Security Officer

### **Examination marking**

Worked scripts shall be centralized marked according to the available examination system and application.

### **Declaration of Examination Results**

- i. The chair of the examination and registration committee shall convene a meeting that shall comprise of the members of the examination committee and examination markers.
- ii. The chief marker shall present the examination report and analyzed examination results to the members of the examination and registration committee.
- iii. The examination and registration committee shall discuss the report and analyzed results for adoption and recommend to the council for final approval
- iv. The consolidated mark sheet containing the final results, of all candidates, shall be signed by the Registrar or the Chairman of Medical Council.
- v. The Council shall in its' seating declare the results received from this committee

### **Examination offence**

- i. A candidate who violates any of the requirements as stipulated in the examination regulations commit an offence and upon conviction his examination results shall be nullified.
- ii. The following shall entail examinations irregularities during licensure examination process: -

- a. Entered with or uses any of unauthorized materials in the examination room.
- b. Helps or attempts to help another candidate with the examination.
- c. Obtains or attempts to obtain help with the examination from another candidate.
- d. Communicates with another candidate during examination session.
- e. Causing disturbance in and outside the examination that brings chaos to the examination room.
- f. Evidenced to have been drunk or use of intoxicating drugs and entered the examination room
- g. Assists another candidate to commit an examination irregularity.
- h. Impersonation: Impersonation occurs when a registered candidate hires or arranges for some other person to sit the examination on his behalf.
- i. Refuses to comply with a lawful order or directive given by the medical, dental and allied health professionals official e.g. invigilator.

### **Examination penalties**

Any candidates who violates any of the requirement or conditions stipulated in the examination regulations commits an offence and upon conviction after the decision of the Council, shall have the following sanctions and penalties against a candidate depending on the gravity of the offence committed:

- i. Examination results shall be nullified and the candidate shall not be allowed to take examination at any other time for the following offences: -
  - a. Cheating in examinations.
  - b. Own examination questions items before the examination time.

- c. Caught with any books/materials or electronic gadgets during the examination.
  - d. Hired another person to sit on his behalf
  - e. Obtains help from other candidates during examination.
  - f. Forged certificate or names during the examination
- ii. Any candidates who attempts to help or helps another candidate with examination shall be Disqualified from all licensure examinations for a period of not less than two years.

### **Dissemination of Examination Results**

The Registrar of the council shall release results as approved by the council through the website and to individual student's electronic mailing accounts used during the registration for the licensure examination.

### **Appeals and Re-marking**

- i. If a candidate is dissatisfied with the results, he/she has a right to appeal to the Registrar in writing within two weeks of declaration of the results.
- ii. The candidate shall complete an appeal form and state clear grounds of appeal and attach necessary documents to support such an appeal.
- iii. Grounds to allow an appeal shall be limited to sickness, medical reasons during examination that may have affected the results or any other plausible reason as may be determined by the council.
- iv. No appeal shall be granted for social reasons.
- v. Appeals shall be logged to the Registrar after paying stipulated fee, rates of which shall be determined by the council from time to time

- vi. The outcome of the appeal shall be communicated to the candidate in writing within four months from the time of appeal.
- vii. In the event the candidate dispute marking, the council shall identify markers for remarking.
- viii. A candidate shall be allowed to appeal only once per examination, thereafter, a re-appeal shall not be allowed.

### **Supplementary Examination**

The examinee who has failed to attain the pass mark shall be allowed to sit for two more supplementary examinations which shall run on the regular Council examination time.

### **Clinical Assessment**

- i. The candidate who fails the two prescribed supplementary examination while waiting for the next supplementary examination shall be attached for a minimum of six months before attempting the next supplementary examination as listed below:
  - a. For those with certificates and diploma they should attach themselves to teaching Hospital or a health facility after being offered an attachment letter from the council
  - b. For those who have done pre internship examination they should attach themselves to regional referral, zonal referral or teaching Hospital after being offered an attachment letter from the council.
  - c. For those who have done post internship examination they should attach themselves to an internship center after being given an attachment letter from the council.

- d. For those who have graduated from outside the country and done pre internship examination they should attach themselves to a teaching hospital of their choosing.
- ii. The candidate shall be required to rotate in discipline specific rotations and their log book signed by the respective departmental heads.
- iii. The candidate shall be attached to a mentor who shall provide a written monthly feedback to the council and be signed off after the specified period.
- iv. The candidate shall undergo a clinical assessment in all six departments.
- v. A candidate is deemed to have passed a clinical assessment if he/she attains minimum of 57% in each of the assessed clinical areas.
- vi. A candidate who fails to attain a score  $\geq 57\%$  in each of the clinical assessment areas shall not be allowed to sit for the licensing examination.
- vii. When the examinee has failed the subsequent supplementary examination offered under this section, the examinee shall continue to attempt the failed examination when he is ready at the time when it is next offered indefinitely.

## **REGULATIONS**

### **Invigilators regulations**

- i. Present in the examination room at least 60 minutes before the commencement of the examination. In case of special case, the chief invigilator shall communicate with the council examination and registration committee secretariat on any adjustments needed.



- ii. Invigilators shall not be allowed to read newspaper, mark scripts, work on laptops and phones during the invigilation process in order to allow maximum supervision of the examination process.
- iii. No person other than invigilators shall be allowed into the examination room except with direct permission from the chief invigilator.
- iv. Only candidates with official examination identity shall be allowed in the examination room.
- v. A functional clock should be placed where candidates can see it.
- vi. The invigilators should update the candidates every 30 minutes and shall be informed that no extra time is allotted for, at the end of the examination.
- vii. A candidate, on entering examination hall must proceed without delay, to the place which the candidate is directed by an invigilator.
- viii. Candidates are required to be seated 15 minutes before the examination starts.
- ix. Candidate found to be drunk, disorderly or cause any disturbance, shall not be allowed into examination room.
- x. The sealed examination bags shall be opened in the presence of the candidates on the date and time stated for the examination.
- xi. The chief invigilator shall start all examinations in accordance with guidelines.
- xii. Candidates shall not commence writing until the invigilator has given permission.
- xiii. A candidate shall not be allowed in the exam hall thirty (30) minutes after the start of the examination.
- xiv. Candidates shall sign an attendance register at beginning and when handing in the answer scripts for every examination.

- xv. Invigilators shall frequently walk around the examination room in order to detect and discourage any misconduct.
- xvi. No candidate shall be allowed to move out of the examination room during the first 30 minutes and the last 30 minutes of the examination.
- xvii. Invigilators shall not be allowed to leave the examination room until when the exam is over and have collected and sealed the scripts.
- xviii. Shall gather evidence instantly on any examination irregularity when it happens and sign the irregularity form provided (Appendix)
- xix. Ensure no candidates bring mobile phones and personal electrical devices shall not be allowed in the examination hall.
- xx. Candidates are required to only use the official stationery provided and Question papers and unused stationary must be returned to the invigilators
- xxi. Candidates shall not remove any materials from the examination room.
- xxii. No candidate shall be allowed to move around the room during the stipulated examination time.
- xxiii. If any examination paper is confirmed to have leaked, invigilators shall communicate with the Examination committee.
- xxiv. Invigilators shall not enter into argument or debate with a candidate for any instructions given to the candidate.
- xxv. Invigilators may require any candidate present in the examination room to provide identity card
- xxvi. Any candidate who must visit the toilet/washroom shall seek permission from the invigilators.
- xxvii. Invigilators shall not edit any examination question

- xxviii. Invigilators shall instruct candidates to respond to questions as set and shall not provide answers to questions relating to the content of examination.
- xxix. Collect all answer booklets or score sheets, and ensure the candidate signs out in a special envelope witnessed by the last candidate.

### **Candidates regulations**

- i. Candidates should present their examination cards with identifiable passport size photograph to prove their candidature before entering the examination room.
- ii. Candidates should be seated 15 minutes before examination time.
- iii. All candidates should read and adhere to the examination instructions provided on the examination paper and on the council web before examinations.
- iv. Any candidate who must visit the toilet/washroom or has a special need shall communicate with the invigilators directly.
- v. No papers, books, mobile phones and other electronic devices should be brought into the examination room.
- vi. Candidates should bring their own pens, pencils, rubbers, rulers and calculators. Borrowing during examinations process shall not be allowed.
- vii. Candidates should not write their names or name of their training institution on any answer examination script/paper.

- viii. Candidates should enter their exam number on the space provided in the answer booklet, answer sheet and attendance registers.
- ix. Candidates should correctly number their questions.
- x. During submission of examination scripts, a Candidates shall document the serial numbers of each booklet used during submission of scripts.
- xi. During the examination the candidates shall not communicate to another candidate
- xii. A candidate found with any examination irregularity will be allowed to finish the examination but such irregularity shall be documented and reported with evidence to the examination committee for decision.
- xiii. No candidate name shall appear anywhere in the examination documents
- xiv. The face of the candidate shall be identifiable for comparison with the candidate identification card
- xv. The candidate shall bring another identity card which shall identify him/her for identification purposes.

### **Markers regulations**

- i. Open the examination parcels carefully to avoid tearing and loss of paper or damages.
- ii. Count the answer sheets to correlate with control sheets and signed student's attendance register.
- iii. Check carefully on the number of scripts received for marking against attendance list and supervisor's information there on the attachment.
- iv. Quick review of the answer sheet paper for correction to avoid errors such as faint shading and incorrect filling of the candidate numbers.
- v. Arrange the answer sheet scripts in a chronological order against the candidate examination number.

- vi. Report any irregularity on the part of supervisors e.g. discrepancies between number of scripts indicated on the returning envelope and the actual number of scripts enclosed.
- vii. All matters connected with the marking of scripts and their content, identity and personal particulars of candidates shall not be disclosed to unauthorized person (i.e. a person outside the marking panel).
- viii. Cases of dishonest must be reported immediately to the Chairperson/ Chief marker of the panel, who in turn must report the same to the medical, dental and allied health professional's Registrar.
- ix. Markers should not communicate with examination centers or candidate in any matter related to examination.
- x. Marking should conform to an agreed answer guide.
- xi. Each marker should be held personally responsible for the accuracy of his marking and for the addition of the marks and their transcription into the mark sheets.
- xii. Markers should sign a declaration regarding the checking of additions and transcriptions of marks on worked scripts / mark sheets

## **6.0 MONITORING AND EVALUATION**

### **Process of conducting examination**

The examination and registration committee shall receive, analyze and provide a recommendation from them of various submitted reports from:

- i. Report from setters
- ii. Report from invigilators
- iii. Moderators
- iv. Markers
- v. Evaluation form for examinees
- vi. Report from supervisory authority and security officers

### **Curricula implementation**

- i. The examination and registration committee shall perform analysis of candidate's performance on Item level
- ii. The examination and registration committee shall perform analysis of candidate's performance on Center level
- iii. The examination and registration committee shall perform analysis of candidate's performance on Competence level
- iv. The examination and registration committee shall perform analysis of candidate's performance by institution

The compiled report of recommendations shall be used to inform need for registration and licensure examination guideline and curricular improvement.

**APPENDIXES**  
**APPENDIX I: APPLICATION FOR LICENSURE**  
**EXAMINATION**

**Personal Particulars:** (Full name as they appear in your certificate of secondary education).

.....  
First Name                      Middle Name                      Surname

Date of Birth..... Sex:.....

Nationality:.....

PhysicalAddress .....

MobileNumber: .....

Email Address: .....

**Academic Information:**

Ordinary Level CSEE index number or Equivalent and year  
.....

Advance Level ACSEE index number or Equivalent (if any)  
and year .....

Diploma Level and index number or Equivalent (if any) and  
year.....

Degree Level and index number or Equivalent (if any) and  
year .....

Name of Health Training Institute Trained .....

Address of Health Training Institution .....

.....

Training Dates from (Month and Year) .....

to (Month and Year).....

**Licensure Examination information**

Centre Applied for Licensure examination .....

.....

Date of Previous Licensure examination (if any) .....

.....

Examination Centre.....

Number of licensure examination Re Sit (if any) .....

Date of last Re-sit of licensure examination.....



**APPENDIX II:  
APPEALS FOR LICENSURE EXAMINATION  
RESULT FORM**

Personal Particulars (Full names as they appear in appellant's certificate of secondary education):

.....  
First Name                      Middle Name                      Surname

Mobile Phone Number:.....

Email Address:.....

Licensure Examination Number:.....

Centre of Examination:.....

Name of Health Training Institution .....

Nature of Licensure Examination (Tick Appropriate)

1st Attempt ..... date.....

2nd Attempt ..... date .....

3rd Attempt ..... date .....

4th Attempt ..... date .....

Reason for Appeal (Outline): .....

.....

.....

.....

Name .....

Signature.....

Date .....

### APPENDIX III:

#### Attendance Record Form No. 1

Name of Examination Centre:.....

Code of Examination Paper:.....

Nature of Examination:.....

Instructions: To be completed before student enters the Examination Room

S/N	CANDIDATE EXAMINATION NUMBER	HEALTH TRAINING INSTITUTION	YEAR OF COMPLETION	IDENTITY NUMBER**	SIGNATURE

\*\*Any of the following ID (National Identity, Driving License, National Passport)

## APPENDIX IV:

### Attendance Record Form No. 2

Name of Examination Centre .....

Code of Examination Paper .....

Nature of Examination (WRITTEN, OSCE, OSPE, ORAL,  
CLINICAL) .....

Instructions: To be completed before examinee leave the  
Examination Room

S/N	CANDIDATE EXAMINATION NUMBER	IDENTITY NUMBER**	BOOKLET SERIAL NUMBER USED	SIGNATURE

\*\*Any of the following ID (National Identity, Driving License,  
National Passport)

**APPENDIX V:  
EXAMINATION IRREGULARITIES NOTIFICATION  
FORMS**

**Please fill in capital Letter**

This examination Irregularity Form is made under.....  
Item No..... of the examination guideline of MCT

The occurrence of examination irregularity can seriously damage public confidence in validity, reliability and legitimacy of examination and the expected examinee. Events may occur at any time during the entire period of examination and potentially affect candidate's performance

**PART 1: Candidates information**

.....  
First Name                      Middle Name                      Surname

Nature of Examination: (WRITTEN, OSCE, OSPE, ORAL, CLINICAL) .....  
.....

Candidate Licensing Examination Number.....  
Examination Centre: .....  
State Nature of Irregularity: .....

Candidate Signature                      Finger (Thumb Print)

Date: .....                      Phone Number :.....

PART II: Witness Information:

Witness No 1 Examination Candidate Number .....

Name: ..... Phone.....

Witness Number 2 (Examination Candidate Number) .....

.....

Name:..... Signature .....

Date: ..... Phone Number: .....

Name of Invigilator 1: ..... Signature: .....

Date ..... Phone Number .....

Name of Invigilator 2 ..... Signature .....

Date ..... Phone Number .....

## APPENDIX VI: EXAMINATION DISPATCH FORM

.....

First Name                      Middle Name                      Surname



### EXAMINATION DISPATCH FORM

NAME OF RECEIVING CENTRE:.....

S/N	CADRE	NO. OF EXAM SCRIPTS	NO. OF ANSWER SHEETS	NO. OF ATTENDANCE REGISTERS	NO. OF WITNESS FORMS	TOTAL NO. OF PARCELS
1	MEDICAL DOCTOR					
2	PHYSIOTHERAPIST					
3	DENTAL SURGEON					
4	MENTAL HEALTH & REHABILITATION					
5	PROSTHETIST & ORTHOTIST					
6	OCCUPATIONAL THERAPIST					

MCT Submitting Officer..... Mobile No .....

Signature..... Date.....

Receiver's(Name & Rank) .....

Mobile No..... Signature:.....

Date.....

Escort 1 ..... Force No.....

Signature..... Date.....

Escort 2..... Force No.....  
Signature..... Date.....

Driver..... Vehicle No.....  
Mobile No..... Signature.....  
Date.....

**APPENDIX VII:  
EXAMINATION WITNESS FORM FOR OPENING OF  
PRE – INTERNSHIP PARCELS**



**WITNESS FORM FOR OPENING OF PRE - INTERNSHIP  
EXAMINATION PARCELS**

EXAMINATION CENTER:.....

TYPE OF EXAMINATION: .....

CADRE: .....

DATE OF EXAMINATION: .....

Number of papers recorded on parcel .....

Actual count on opening parcel .....

Number of papers adequate for registered candidates?

**Yes/No**

Exam parcel(s) opened in the examination room under observation of all candidates, witnessed by 2 candidate representatives, invigilators and supervisors and found to be Intact / Not Intact

Opened by:

**Chief Invigilator**

**NAME:** ..... **SIGNATURE**.....

In the presence of:

**MCT Secretariat**

**NAME:** ..... **SIGNATURE**.....

Witnessed by:

1ST CANDIDATE	2ND CANDIDATE
NAME.....	NAME.....
ID NO: .....	ID NO: .....



**APPENDIX VIII:  
PRE – INTERNSHIP POST – EXAMINATION  
PACKAGING CHECKLIST**



**PRE-INTERNSHIP POST-EXAMINATION PACKAGING CHECKLIST**

EXAMINATION CENTER: .....

TYPE OF EXAMINATION:.....

CADRE: .....

DATE OF EXAMINATION: .....

NUMBER OF CANDIDATES REGISTERED FOR EXAMINATION:.....

NUMBER OF CANDIDATES REPORTED FOR EXAMINATION.....

NUMBER OF SCRIPTS RECEIVED .....

NUMBER OF SCRIPTS PACKED: .....

NUMBER OF ANSWER SHEETS RECEIVED: .....

NUMBER OF ANSWER SHEETS PACKED: .....

Please tick (✓) to indicate whether the listed document has been packed or not

S/N	DOCUMENT	PACKED	NOT PACKED
1	Answer Sheets		
2	Examination Scripts		
3	Candidates' Attendance Sheet		
4	Candidates' document hand-in sheet		
5	Seating plan		
6	Invigilators' and MCT Secretariat Attendance Registers		
7	Invigilators' and MCT Secretariat Commitment/ Declaration of Inter-est Forms		
8	EXAMINATION IRREGULARITIES NOTIFICATION FORMS		
9	Supportive document/evidence for unusual Events occurred and reported during examination		

The above examination documents were packed and sealed in the presence of:

Candidate 1 ..... Reg No.....  
Signature.....

Candidate 2 ..... Reg No .....  
Signature.....

Chief invigilator:..... Signature.....  
MCT Secretariat ..... Signatur .....

**APPENDIX IX:  
WITNESS FORM FOR OPENING OF LICENSURE  
EXAMINATION PARCELS**



**WITNESS FORM FOR OPENING OF LICENSURE  
EXAMINATION PARCELS**

EXAMINATION CENTER:.....  
 TYPE OF EXAMINATION: .....  
 CADRE: .....  
 DATE OF EXAMINATION: .....  
 Number of papers recorded on parcel .....  
 Actual count on opening parcel .....  
 Number of papers adequate for registered candidates?  
**Yes/No**

Exam parcel(s) opened in the examination room under observation of all candidates, witnessed by 2 candidate representatives, invigilators and supervisors and found to be Intact / Not Intact

Opened by:  
**CHIEF INVIGILATOR**  
**NAME:** ..... **SIGNATURE**.....

In the presence of:  
**MCT SECRETARIAT**  
**NAME:** ..... **SIGNATURE**.....

Witnessed by:

1ST CANDIDATE	2ND CANDIDATE
NAME.....	NAME.....
REG NO: .....	REG NO: .....
Signature: .....	Signature: .....

**APPENDIX X:  
POST – LICENSURE EXAMINATION  
PACKAGING CHECKLIST**



**POST-LICENSURE EXAMINATION PACKAGING  
CHECKLIST**

EXAMINATION CENTER:.....

TYPE OF EXAMINATION:.....

CADRE: .....

DATE OF EXAMINATION:.....

NUMBER OF CANDIDATES REGISTERED FOR  
EXAMINATION.....

NUMBER OF CANDIDATES REPORTED FOR  
EXAMINATION.....

NUMBER OF SCRIPTS RECEIVED.....

NUMBER OF SCRIPTS PACKED:.....

NUMBER OF ANSWER SHEETS RECEIVED:.....

NUMBER OF ANSWER SHEETS PACKED: .....

Please tick (√) to indicate whether the listed document has been packed or not

S/N	DOCUMENT	PACKED	NOT PACKED
1	Answer Sheets		
2	Examination Scripts		
3	Candidates' Attendance Sheet		
4	Candidates' document hand-in sheet		
5	Seating plan		
6	Invigilators' and Facilitators' Attendance Registers		
7	Invigilators' and Facilitators' Commitment/ Declaration of Interest Forms		
8	EXAMINATION IRREGULARITIES NOTIFICATION FORMS		
9	Supportive document/evidence for unusual Events occurred and reported during examination		

The above examination documents were packed and sealed in the presence of:

Candidate 1 ..... Reg No .....  
Signature.....

Candidate 2 ..... Reg No.....  
Signature.....

Chief invigilator:..... Signature .....  
MCT Secretariat..... Signature:.....

## APPENDIX XI: EXAMINATION RECEIVING FORM



**The Medical Council of Tanganyika**  
*Guiding the Professional, Protecting the Public*



### EXAMINATION RECEIVING FORM

NAME OF RECEIVING CENTRE: .....

S/N	CADRE	NO. OF EXAM SCRIPTS	NO. OF ANSWER SHEETS	NO. OF ATTENDANCE REGISTERS	NO. OF WITNESS FORMS	TOTAL NO. OF PARCELS
1	MEDICAL DOCTOR					
2	PHYSIOTHERAPIST					
3	DENTAL SURGEON					
4	MENTAL HEALTH & REHABILITATION					
5	PROSTHETIST & ORTHOTIST					
6	OCCUPATIONAL THERAPIST					

MCT Submitting Officer..... Mobile No .....

Signature..... Date.....

Receiver's(Name & Rank) .....

Mobile No..... Signature:.....

Date.....

Escort 1 ..... Force No.....

Signature..... Date.....

Escort 2..... Force No.....

Signature..... Date.....

Driver..... Vehicle No.....

Mobile No..... Signature.....

Date.....

## APPENDIX:XII EXAMINATION REPORT FORM



### MCT Pre/Post Internship Examination Report

#### Examination Center Report

Examination center	
Date of Orientation	
Date of Examination	

#### Preliminary preparation

Date of Orientation	
Examination venue	
Center examination Candidates #	
<b>Brief details on Orientation Day</b> (Give details on process of orientation day e.g., number of rooms, venue size, sitting plan, examination regulations, answer sheet orientation)	
Any other details to report	

Examination process		
Examination date	MD	
Number of Candidates sitting for the examination per specialty	Dentistry	
	Physiotherapy	
	Orthotics & Prosthetics	
	Occupational therapy	
	Mental health & Rehabilitation	
	Speech therapy	
Examination start time		
Examination end time		
<b>Brief details on the examination day</b>		
<p>(Give details on examination process including but not limited to candidates issues e.g. examination irregularities (describe the incident, name and registration of the candidate(s), logistic issues, students with no ID cards e.t.c)</p>		



Suggested areas for improvements	
Any other issues to report	

**APPENDIX XIII:  
INVIGILATORS REPORT FORM**

Invigilators name: .....  
Affiliating Institution: .....  
Examination Center: .....  
Examined Cadre: .....  
Venue: .....  
Invigilation Process: .....  
Packaging: .....  
Security:.....  
Any irregularity: .....  
Clarity of Examination: .....  
Punctuality of starting the examination:.....

**Areas of improvement:**

.....  
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.....

**Recommendations:**

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.....

Signature: ..... Date: .....

**APPENDIX XIV:  
MODERATORS REPORT FORM**

Examined Cadre: .....  
Adequacy of Time: .....  
Clarity of Examination: .....  
Punctuality of starting the examination: .....  
Appropriateness: .....  
Relevance: .....

**Areas of improvement:**

.....  
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**Recommendations:**

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.....  
.....  
.....

SN	Name	Affiliation	Signature

**APPENDIX XV:  
MARKERS REPORT FORM**

Examined Cadre: .....  
Adequacy of Time: .....  
Clarity of Examination: .....  
Appropriateness: .....  
Relevance: .....  
Weighting of the Examination questions: .....

**Areas of improvement:**

.....  
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.....  
.....

**Recommendations:**

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.....

SN	Name	Affiliation	Signature



**APPENDIX XVII:  
MONTHLY MENTORSHIP REPORT FORM**

Name of the Student: .....  
Mentor name: .....  
Mentorship Center (Health facility): .....  
Name of the Attached Institution and Specialty: .....  
.....

**Areas of Strength**

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**Areas of improvement**

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**Recommendations:**

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.....

Signature: ..... Date: .....

**APPENDIX XVIII:  
LOGBOOK FOR CLINICAL ATTACHMENT**

THE CANDIDATE WILL USE THE LOG BOOK IN THE  
INTERNSHIP LOG BOOK

The image features a solid green background. On the left side, there are two large, curved, overlapping shapes: a white one in front of a blue one. On the right side, there are two smaller, curved shapes: a blue one in front of a white one. The text is centered at the bottom of the page.

*MoHCDGEC-HPS-PRINTING PRESS DSM*