MRCGP Annual Report 2014-15

The RCGP is committed to delivering a fair and robust licensing assessment system for independent practice as a GP in the UK, the MRCGP. Part of this commitment includes transparency regarding examination outcomes. As Chief Examiner I am pleased to introduce the 2014-15 MRCGP reports, which look at outcomes in the summative components of the MRCGP, the Applied Knowledge Test (AKT) and Clinical Skills Assessment (CSA), and provide an update on developments in the formative component of the MRCGP, Workplace Based Assessment (WPBA).*

Trends

The overall pass rates and pass rates for first time takers have increased in both the AKT and CSA during the 2014-15 academic year, compared to 2013-14. This is matched by an increase in the number of trainees receiving a satisfactory outcome at their ARCP panel in 2014-15.

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<tr>
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<th>2013-14</th>
<th>2014-15</th>
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<tbody>
<tr>
<td>Overall AKT pass rate</td>
<td>74.4%</td>
<td>75.2%</td>
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<tr>
<td>First attempt AKT pass rate</td>
<td>81.6%</td>
<td>81.9%</td>
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<tr>
<td>Overall CSA pass rate</td>
<td>74.5%</td>
<td>75.8%</td>
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<tr>
<td>First attempt CSA pass rate</td>
<td>82.3%</td>
<td>83.4%</td>
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The standards of the AKT and CSA remain unchanged so this improvement in pass rates represents a cohort effect, and potentially could reflect improved GP selection, or better candidate exam preparation.

The overall number of candidate attempts at the AKT and CSA reduced in 2014-15, partly reflecting higher first time pass rates but also a reduction in the number of candidates in the system. This is likely to be related to current recruitment difficulties. The number of UK graduates (UKGs) as a percentage of the total number of AKT and CSA candidates continues to increase.

Differential Attainment

During the past year the GMC has published a report, which documents the pass rates for all UK Postgraduate exams for the 2013/14 academic year. This report demonstrates that in general: UKGs outperform international medical graduates (IMGs), white UKGs outperform black and minority ethnic (BME) UKGs and women outperform men. These patterns of differential attainment are identical to those seen in the summative components of the MRCGP.

Levels of differential attainment in the AKT and CSA in 2014-15 remain stable and roughly comparable between the two modules. We would not expect to see significant changes to differential performance between UKGs and IMGs, white and BME UKGs or between women and men until the reasons for
underperformance are fully understood, and any subsequent training interventions designed to address these issues have been fully evaluated.

The RCGP continues to work with key stakeholders including the GMC, Academy of Medical Royal Colleges, COGPED, BAPIO, BIDA, BMA and trainee representatives to address differential attainment. Recent initiatives include:

- Providing MRCGP data for the GMC research project ‘Exploring the Relationship between General Practice Selection Scores and MRCGP Examination’, in order to help develop an effective tool for the early identification of trainees who might struggle to progress with their training.

- Taking part in the BMA symposia on differential attainment and contributing to the subsequent document ‘Ensuring fairness in clinical training and assessment: Principles and examples of good practice’:

- Running joint educational events with BAPIO and BIDA including a session with COGPED and BAPIO on cultural sensitivities in GP education at the RCGP Conference, and a joint session with the GMC on differential attainment at the BIDA conference.

Collaborative work now needs to focus on evaluating current training interventions to establish what works best in terms of identifying and supporting trainees who might struggle with the MRCGP.

**New Developments**

The main focus of our work this year has been on supporting the training community and individual trainees with their exam preparation. We recognise the crucial role that trainers and training programme directors (TPDs) play in helping candidates to prepare for the MRCGP, and have developed a number of resources to support them in this work including:

**CSA preparation resources.** For example, an e-learning course based on sociolinguistic research carried out on the CSA, that specifically aims to improve performance in the interpersonal skills domain. This is available to all members at http://www.rcgp.org.uk/training-exams/mrcgp-exams-overview/mrcgp-clinical-skills-assessment-csa.aspx

**AKT preparation resources.** For example, ‘Preparing to take the MRCGP AKT’ a concise guide for trainees, and an Innovait AKT Podcast produced jointly with the AiT Committee. These resources are available at http://www.rcgp.org.uk/training-exams/mrcgp-exams-overview/mrcgp-applied-knowledge-test-akt.aspx

The RCGP has also provided educational sessions for trainers and TPDs on MRCGP preparation. For example, there was a recent session on CSA preparation for GP educators at the RCGP Medical Educators Conference.
The RCGP has conducted a comprehensive review of MRCGP quality assurance during the last year. As part of this review a new examiner recruitment process has been developed that will enable us to encourage applications from currently under represented groups on the panel, to further enhance diversity. Details of this process are available at http://www.rcgp.org.uk/training-exams/mrcgp-exams-overview/panel-of-examiners.aspx.

A new process for the quality assurance of examiner performance has also been developed and is now underway.

Research

As part of our commitment to transparency we have published a summary of AKT and CSA research and development ‘Making assessment fair in the MRCGP’, which is available at http://www.rcgp.org.uk/training-exams/mrcgp-exams-overview/~media/Files/GP-training-and-exams/Annual-reports/MRCGP-Fairness-Report-v010215.ashx

The RCGP continues to actively contribute to research into fairness in assessment. Papers published in the last year include;


Denney, M. and Wakeford, R., 2015. Do role-players affect the outcome of a high-stakes postgraduate OSCE, in terms of candidate sex or ethnicity? Results from an analysis of the 52,702 anonymised case scores from one year of the MRCGP clinical skills assessment. Education for Primary Care, pp.1-5.

Future Plans

The MRCGP Leads group is currently looking at ways of enhancing the assessment of prescribing across all three components.

The RCGP recently hosted a cross specialty seminar on ‘Assessing Interpersonal Skills in the MRCGP’. A wide range of stakeholders were consulted including trainees and patients, and future assessment developments in this area will be informed by the final recommendations of this meeting.

The RCGP will continue to work on supporting the training community with MRCGP preparation and the focus this year will be on providing more benchmarking resources for WPBA assessment

Pauline Foreman
Chief Examiner