Chief Examiner's introduction to the MRCGP Annual Report 2017-2018

Introduction
The time period covered by the 2017-2018 Annual Report has been a busy one, with much time and energy devoted to the MRCGP review. A considerable amount of development work has also taken place in Work-place Based Assessment, with the creation of new resources for educators and AiTs on the website. The College continues to prioritise work related to equality and diversity issues, work collaboratively on differential attainment, and relevant MRCGP-related research and development.

MRCGP review
An external and comprehensive review of the MRCGP took place in 2017. The review was undertaken by the Health Professional Assessment Consultancy (HPAC) and took place over several months, and included in-depth analysis of the college’s two summative exams, the AKT and of the CSA through direct observation, scrutiny of the statistical data, and a series of interviews with key personnel. It was reassuring to hear that the opinion of the experts was that overall the CSA and AKT met or exceeded the standards for procedures used for high stakes examinations in the medical profession and were fit for purpose and fair for both candidates and patients. HPAC was also of the opinion that the College is working appropriately to integrate the new GMC’s Generic Professional Competency (GPC) Framework and reach the new standards determined by the GMC Standards for Curricula and Assessments Review (SCAR). The review team were asked to make any recommendations that the College might like to consider as part of the process of continuous quality improvement of the assessments, and these were looked at by a stakeholder group brought together for this purpose. Over the first part of 2018, this short life working group has reviewed each recommendation in detail in terms of its priority, utility, feasibility and acceptability to determine whether further pilots or additional analyses are needed. The report on the work of this stakeholder group was drawn up to be submitted to the College’s Trustee Board and College Council in late 2018. The plan will be for the report to be made publicly available and the MRCGP leads will begin work on the recommendations from 2019 onwards.

Separate to the review of the CSA and the AKT but in parallel to it, HPAC conducted a review of MRCGP workplace based assessment (WPBA). This review looked at

- the extent to which the proposed RCGP WPBA tools collectively provide an accurate longitudinal picture of a GP trainee’s performance, reflect best practice in assessment and meet the standards of GMC Standards for Curricula and Assessments Review
- the impact that any proposed changes might have on candidates with protected characteristics, and
- whether the proposed changes for the workplace based assessments supported the early identification of a trainee failing to progress, as well as preparing a trainee for a career in UK General Practice.

Overall, the team of reviewers considered that the design of the programme and selection of tools in the WPBA component of the MRCGP was planned with considerable attention to the various aspects required to provide a continuous assessment of trainees’ professional practice in the workplace, and conforms to the GMC’s SCAR and subsequent guidance documents.

The reviewers also considered that the RCGP had made extensive efforts to implement best practice to achieve the aims stated in relation to the WPBA component of training and education and did not consider that the proposed changes would have any significant detrimental impact on candidates with protected characteristics. They suggested further evaluation and research to explore the effectiveness of the WPBA programme, in supporting
the development of high quality, competent GPs and in the identification of poorly performing trainees who might need extra support, guidance and counselling. The College will be looking at this over the forthcoming year, taking further advice from the MRCGP R&D Lead, and experts from the psychometric team.

Work on differential attainment and equality and diversity in the MRCGP

Over the past year, the RCGP has been working with COGPED to bring together examples of good practice to reduce differential attainment in IMGs GP Speciality Training Registrars across the UK in the differential attainment seminar in London in November 2018. Learning from this will be used to inform training and provide further support to IMG trainees and information to their supervisors.

The College continues to meet with key stakeholders including BAPIO and BIDA, to discuss how to better understand and address differential attainment in the MRCGP. The RCGP has provided input into the GMC’s Differential Attainment project on an ongoing basis, contributing to the joint learning across medical specialties in this area. The Chief Examiner is also working with the Academy of Medical Royal Colleges to produce relevant guidance for trainers and assessors on unconscious bias.

The College has also been working with Health Education England (HEE) and NHS Education for Scotland (NES) on the Targeted GP Training Scheme, an initiative set up to enable doctors who were progressing satisfactorily in their training programme, but failed one of the AKT or CSA final assessments, to re-enter the programme. This 18-month scheme allows these doctors in the category who did not have access to the longer extension to training allowance which came into force in January 2018 to access this extra training time with the benefit of additional targeted support.

A new Topic Guide on Equality, Diversity and Inclusion has been created to support the curriculum. Examiners continue to be trained on this on an annual basis, with specific reference to MRCGP assessments.

Research and Development

Professor Niro Siriwardena, the MRCGP Research and Development Lead, has been working with all three modules of the MRCGP to focus on research investigating validity, reliability and fairness of the MRCGP and increase our understanding of the determinants of these. The MRCGP team has submitted/published the following research papers on the theme of fairness in assessment in the last year:

Recent Publications


This study of almost 15000 candidates taking the AKT between 2010 and 2015, found no difference in AKT performance candidates disclosing dyslexia with accommodations taken into account. IMGs were significantly more likely to declare dyslexia once they had failed the AKT, which may have been due to a lower rate of diagnosis early in their educational career or reluctance to disclose a specific learning difficulty due to stigma.
Neden CA, Parkin C, Blow C, Siriwardena AN (2018). Has there been a change in the knowledge of GP registrars between 2011 and 2016 as measured by performance on common items in the Applied Knowledge Test? Education for Primary Care 2018 (online first).

This study found no evidence of a change in performance in the AKT as a whole between 2011 and 2016.

Recent conference presentations


This is the first study to explore variations in performance by ethnicity in the AKT using cognitive interviews, and identified three related themes. ‘Cultural barriers’ included language barriers and unfamiliarity with UK practice. ‘Theoretical versus real-life clinical experience’: represented the difficulty recalling information from theoretical (classroom, textbook, statistical) learning compared with clinical practice; IMGs lacked practical experience but were aided in some instances by rote learning. ‘Recency, opportunity and relevance’ referred to the difficulty participants reported answering AKT questions on topics not recently studied, or encountered clinically or felt to be less relevant, and this was particularly the case for IMG participants who had not experienced the typical range of problems seen in the UK during their undergraduate training.


This questionnaire study explored factors thought to be linked to performance which has led to a more detailed investigation of the causes of differential attainment.

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