Introduction

This Report relates to the formal MRCGP assessments conducted in the academic year 2014-15. It presents the statistics that summarise the outcomes of all the diets of the MRCGP examinations during that period – the Applied Knowledge Test (AKT) and the Clinical Skills Assessment (CSA) – three diets of each.

The Report first presents an updated summary of both of these assessments and their standard-setting procedures, to orient new readers. Full background information on the MRCGP, the AKT and the CSA (and also the largely formative Workplace-Based Assessment component) may be found on the College’s website.

There then follows a set of tables, first for the AKT and then for the CSA. These provide information on the candidature and the attempts at the test, for each of them:

- Candidate Demographics: Place/Year of Primary Medical Qualification, Sex, Ethnic Group, Training Deanery, UK Medical School
- Main Results: Overall and by Exam Diet and Attempt
- Results by Individual Demographics (candidates on first attempt)
- Overview of Results by LETB/Training Deanery – a more detailed version is provided confidentially to the LETBs/Deaneries

And in addition:

- AKT mean sub-component scores, by candidate year of training
- CSA feedback statements for all candidates: aggregate summaries by place of PMQ

Some additional tables conclude the report which is descriptive and non-discursive. Data are presented without psychometric comment other than that which follows and at the end of the report, reviewing test accuracy and reliability. Candidates self-report their demographic variables, but wherever possible these are checked against the GMC’s List of Registered Medical Practitioners. The 'attempt' is from the College’s records.

This Report has been developed following comments from members of the College’s Assessment and Curriculum Development Committee, including the Deanery/LETB representatives.

Please Note:

a) Confounding of variables: as in previous years, there are many significant differences between sub-groups on their performance on both the tests reported, for example by sex and country of primary medical training. But variables may well be confounded with others, to potential confusion of the unwary.

b) As increasing use is made by both overseas and UK candidates of medical schools in countries other than those of domicile, ‘country of primary medical qualification’ should not be equated with ‘country of origin/secondary education’. This applies particularly to medical qualifications from certain Caribbean and central- and eastern-European countries. Data from the GMC’s PLAB office show that, after Pakistani and Indian nationals, British nationals are the third commonest group (by nationality) to sit the PLAB assessments.

Acknowledgements:

I thank the two Clinical Assessment Leads (currently, Carol Blow, AKT and Nicki Williams CSA) for their support in preparing this report. They scanned the draft version – as did the Chief Examiner, Pauline Foreman, to whom I am also grateful.

Richard Wakeford
December 2015
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1: Summary of the Assessments and their Standard-Setting Procedures

The MRCGP and its Function

The MRCGP comprises three sets of assessment procedures whose combined summative function is to assure the Deaneries/LETBs, the College and the GMC of the competence of exiting trainee General Practitioners (GPs) across a broad and carefully-defined three year (occasionally, four) full-time training curriculum. Satisfactory completion of the three assessment components of the MRCGP renders a trainee (GP Specialist Registrar) eligible to apply both for a Certificate of Completion of Training (CCT) from the GMC (and thus to proceed with her or his career) and for Membership of the Royal College (which will inter alia support the doctor’s continuing professional development and probable re-validation).

The MRCGP’s three assessment components are the following, each of which must be separately passed:

a. **Applied Knowledge Test** (multi-choice computer-presented ‘paper’, available in test centres throughout the UK)
b. **Clinical Skills Assessment** (an integrated test of clinical and consulting skills, taken in a single assessment centre)
c. **Workplace-based Assessments** delivered throughout the three-year training programme by Clinical Supervisors, Educational Supervisors and others

The curriculum, the training and the assessments are based on medical practice in the UK National Health Service. Entry to the assessments is only available to doctors undergoing GP training within the UK state health care system (though GP ‘returners’ may take the AKT). Accordingly, no candidates based in other countries take these assessments, as happens in certain other Royal Colleges’ examinations. This has implications for the level of the assessments’ quality statistics (reliability and accuracy). The College has other arrangements to support GPs practising in other countries and who seek affiliation or Membership through the quite separate ‘MRCGP [International]’ assessment route, see the College website.

Note that the workplace-based assessments, being essentially formative, with candidate performance and development on them being reviewed towards a determination of progression annually by the Deaneries and not the College, are not covered by this report. Please also note that the report, for convenience of comprehension, reports on the ‘Stages’ of training as ‘Years’: for most trainees, the two are operationally synonymous, but for part-time trainees, of course, the ‘Stages’ will be longer.

The Applied Knowledge Test

The multi-choice **Applied Knowledge Test** is a 3-hr 10-minute 200-item computer-delivered and marked assessment which is available to trainees in the ST2, 3 and additional 4th years. Offered three times a year, the AKT is delivered by computer in professional testing centres around the UK run by Pearson VUE.

The test’s 200 items are in four formats: single best answer (including images and graphics), extended matching questions, completion of tables/algorithms, and a small number of free text answers. A test specification is used to ensure adequate sampling across the curriculum. 80% of the items are on clinical medicine, and research/evidence-based practice and legal/ethical/administration issues are each represented by 10% of the questions. Irrespective of the question format, candidates are awarded one mark for each item answered correctly. Marks are neither deducted for incorrect answers nor for failure to answer.

The standard for the AKT is set using a modification of the Angoff procedure, where a group of ‘judges’ periodically estimates the performance of a notional ‘just good enough to pass’ candidate on each test item. The standard takes account of the ‘guessing factor’ always present in multi-choice tests. In order to ensure that standards are set at appropriate and realistic levels, a patient representative, newly-qualified GPs, and representatives of bodies with a stake in the outcome of the examination (including the training community) are invited to act either as judges or observers, as appropriate, in the standard-setting process. This standard is maintained between ‘Angoffs’ by the use of test equating, using sets of items with known performance characteristics.

A ‘just passing score’ is accordingly determined for the test as a whole, and a statistical review may sometimes cause the removal of one or two poorly-performing test items on any diet. The measurement error of the resultant test is then calculated, and a passing standard (‘pass-mark’) set, taking account of this measurement error, as is usual in high stakes testing. The accuracy of the AKT is estimated by calculating Cronbach’s *alpha* (reliability), together with the measurement error. Candidates are then provided with their results, and their scores on the test as a whole and on its three sub-sections.

It should be noted that, as the pass-mark varies slightly between diets because of small changes in the overall difficulty of the paper, raw or percentage scores need to be adjusted to a common pass-mark (here, zero) to permit comparability.
The Clinical Skills Assessment

The Clinical Skills Assessment is an OSCE-style assessment using simulated patients or role players that may not be taken before the normal final year of training (Year 3 = ST3, or the fourth year of an extended training programme). The CSA comprises 13 cases or ‘stations’ and is delivered in a purpose-built assessment centre in the College’s headquarters building in Euston. Up to (and normally) three circuits run simultaneously.

A case is depicted by a role player, and candidate performance assessed by an examiner who accompanies the role player for the day. Each case lasts 10 minutes (plus two minutes marking/changeover time). Candidates have their own ‘consulting room’, and the role players move around the circuits’ consulting rooms like patients, accompanied by their examiner.

Cases, written by dedicated writers who are practising GPs, present typical clinical scenarios that a UK GP will encounter. Cases are written to represent the diversity of the whole UK population. Each case is mapped on to the curriculum with intended learning outcomes, and a blueprint is used to guide case selection—a complex procedure as the cases necessarily change each day for reasons of security and fairness, yet each day’s ‘palette’ must meet the blueprint’s specifications and be equivalently challenging.

The standard-setting method used is the borderline group method, as recommended to the College by the Regulator (the General Medical Council). Each case is graded on three domains: Data Gathering, Technical and Assessment Skills; Clinical Management Skills; and Interpersonal Skills. Each domain is graded as: Clear Fail – Fail – Pass – Clear Pass. For standard-setting purposes only, the examiners also provide a grade to indicate the certainty of their judgement on that case – in particular if they felt that overall the candidate may be on the borderline between pass and fail.

The domain grades awarded on a case are given a numerical equivalent (zero to three, respectively) and combined to provide a case score: these are summated over the 13 cases to give a final score (which will be between zero and 117). The “cut score” – the half-way point between pass and fail – is established by the normal borderline group method. The final pass score is an adjustment of that score to take account of measurement error, as in the AKT, with the level being confirmed by an adjudicating group which includes recently-qualified GPs, lay representatives, and key stakeholders from the training community.

The overall standard of the assessment is set by ensuring that both that the cases are at an appropriate level of difficulty and challenge and that the examiners are adjudging passing performance on any case at the same, agreed level – appropriate for independent and safe practice as a GP in the NHS. A variety of support mechanisms are in place: calibration exercises at the beginning of each day of the CSA; initial and on-going training of examiners; and an annual two-day examiners workshop to calibrate the whole panel regularly and maintain process validity.

The reliability of the CSA is estimated by calculating Cronbach’s alpha using the numerical scores and accuracy calculated by the Standard Error of Measurement (SEM). Because of daily case and examiner differences, these statistics require to be estimated separately each day, thus on a maximum of 78 candidates. And because of varying candidate numbers and daily variations in the range of candidate ability, the statistic varies, too.

Throughout this report, CSA outcomes used include the result (pass/fail) and scores adjusted to a common pass mark (zero).
2: General Notes on the Tables and Statistics

General Notes: Conventions in the Charts and Tables

Tables are accompanied where possible by charts, to assist those who prefer visual summaries of data.

With data protection issues in mind, tables containing personal data have generally been adjusted so as to report results only on 5+ individuals.

The colour convention adopted for the charts is as follows:
- BARS etc representing passing candidates: BLUE
- BARS etc representing failing candidates: RED
- Charts which do not distinguish between passing and failing candidates: GREY
- Charts unrelated to candidate performance – eg age -- GREEN

A DOTTED RED LINE on a histogram denotes the passing standard
A DOTTED GREEN LINE on a histogram denotes the mean score for the group whose performance is represented

Certain histograms show contrasting distributions of candidates where numbers in a single group are small. To permit visibility of these small groups, the Y-axes of the histograms have been presented in a log, as opposed to a linear, scale. The relevant charts have a small label to alert the reader, as shown here.

Certain tables contain data customarily also supplied to the GMC, and these are separated out into UK, EEA (plus Switzerland: i.e. those countries whose nationals have the right to work in the UK), and ‘rest of the world’ graduates (RoW). Elsewhere, the two last groups (EEA and RoW) are combined into a single group – ‘IMGs’; this is due to a general overall similarity in performance between the EEA and RoW groups, small numbers in the former, and increasing practical overlap of the two groups with both British and overseas (non–EEA) students taking EEA qualifications.

Note regarding the Interpretation of the AKT statistics

Some candidates appear twice (367) or three times (98) within this annual database on the AKT, because of retakes. Except in the Summary of Demographic Information, the statistics “for all candidates” aggregate all 3523 candidates’ 3928 attempts in this period. However, where the tables present comparisons between candidates on the basis of demographic variables (gender, ethnicity, the origin of candidates’ primary medical qualifications, training deanery), they mostly do so on the basis of ‘first attempts’ only: otherwise re-sitters will bias the results. The groups upon which each table is based are made clear in its heading. Readers may notice that figures in this report do not always concur precisely with those given in reports of AKT examinations on the College website. The latter normally show totals and pass rates for all AKT candidates, including some ‘GP returners’. The figures in this report refer only to candidates ‘in training’ and thus eligible for the MRCGP.

Note regarding the Interpretation of the CSA statistics

Two databases were constructed for the annual examination period: one is candidate-based, including all information about a candidate-attempt at the examination, and is designed to provide generic reporting functionality towards requirements such as this report; the other is candidate-consultation based, and intended to provide QA and developmental information regarding the cases and the examiners: it has been used here to provide the information on ‘feedback statements’ in the final table of the report and summaries of overall case performance. Some candidates appear twice (470), three times (59) or four times (3) within this database on the CSA, because of retakes. Except in the demographic Information, the statistics “for all candidates” aggregate all 3167 candidates’ 3699 attempts in this period.

Data Inconsistencies: Caution

Minor data inconsistencies result from a variety of causes, inevitably in an undertaking of this complexity that combines ‘examination’ data with background information from a number of databases. For example:

- Most of the candidates’ personal background data is self-reported on registration for assessments. It is thus subject to entry error and omissions, though major data fields have been checked by reference to the GMC’s LRMP
- For the same reason, data are occasionally missing: most notably, 115 AKT candidate-attempts and 81 CSA candidate-attempts have no record for candidate ethnicity, which we are not able to check by reference to the LRMP
- Candidates’ circumstances change – for example, they may move from one training region to another, within the year, or between part-time and full-time training

However, the College would as always appreciate learning of any serious apparent errors or omissions in the data reported (for which the compiler apologises in advance). Please email him at rews5@cam.ac.uk
3: AKT Statistics

A: Summary of Candidate Demographics

3,523 candidates made a total of 3,928 attempts at the AKT during 2014-15. The tables below show the origin of the 3,523 candidates, by UK medical school or non-UK country of primary medical qualification—and the percentage from each out of the total of that part of the candidature.

Overleaf, the age distribution of the candidates is proxied by their year of primary qualification, and then the background demographic characteristics of the 3,523 are shown, by training LETB/Deanery. Subsequent tables report on attempts.

1. Source of Candidates’ Primary Medical Qualification; year of qualification

### All Graduates: from UK, EEA or Rest of the World

<table>
<thead>
<tr>
<th>Group</th>
<th>N</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>EEA Graduates</td>
<td>123</td>
<td>3.5</td>
</tr>
<tr>
<td>Graduates from Rest of World</td>
<td>588</td>
<td>16.7</td>
</tr>
<tr>
<td>UK Graduates</td>
<td>2,812</td>
<td>79.8</td>
</tr>
<tr>
<td>Total</td>
<td>3,523</td>
<td>100.0</td>
</tr>
</tbody>
</table>

### EEA Graduates

<table>
<thead>
<tr>
<th>Country of PMQ</th>
<th>N</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Bulgaria</td>
<td>5</td>
<td>4.1</td>
</tr>
<tr>
<td>Czech Republic</td>
<td>36</td>
<td>29.3</td>
</tr>
<tr>
<td>Germany</td>
<td>6</td>
<td>4.9</td>
</tr>
<tr>
<td>Ireland</td>
<td>15</td>
<td>12.2</td>
</tr>
<tr>
<td>Poland</td>
<td>21</td>
<td>17.1</td>
</tr>
<tr>
<td>Romania</td>
<td>10</td>
<td>8.1</td>
</tr>
<tr>
<td>Other EEA Countries (&lt; 5 each)</td>
<td>30</td>
<td>24.4</td>
</tr>
<tr>
<td>Total</td>
<td>123</td>
<td>100.0</td>
</tr>
</tbody>
</table>

### Graduates of UK Medical Schools

<table>
<thead>
<tr>
<th>Medical School</th>
<th>N</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Aberdeen</td>
<td>59</td>
<td>2.1</td>
</tr>
<tr>
<td>Belfast</td>
<td>56</td>
<td>2.0</td>
</tr>
<tr>
<td>Birmingham</td>
<td>167</td>
<td>5.9</td>
</tr>
<tr>
<td>Brighton and Sussex</td>
<td>48</td>
<td>1.7</td>
</tr>
<tr>
<td>Bristol</td>
<td>61</td>
<td>2.2</td>
</tr>
<tr>
<td>Cambridge</td>
<td>31</td>
<td>1.1</td>
</tr>
<tr>
<td>Dundee</td>
<td>47</td>
<td>1.7</td>
</tr>
<tr>
<td>Edinburgh</td>
<td>76</td>
<td>2.7</td>
</tr>
<tr>
<td>Glasgow</td>
<td>72</td>
<td>2.6</td>
</tr>
<tr>
<td>Hull York</td>
<td>54</td>
<td>1.9</td>
</tr>
<tr>
<td>Keele</td>
<td>20</td>
<td>0.7</td>
</tr>
<tr>
<td>Leeds</td>
<td>109</td>
<td>3.9</td>
</tr>
<tr>
<td>Leicester</td>
<td>108</td>
<td>3.8</td>
</tr>
<tr>
<td>Liverpool</td>
<td>140</td>
<td>5.0</td>
</tr>
<tr>
<td>London (School unknown)</td>
<td>5</td>
<td>0.2</td>
</tr>
<tr>
<td>London: Imperial College</td>
<td>112</td>
<td>4.0</td>
</tr>
<tr>
<td>London: King’s College</td>
<td>186</td>
<td>6.6</td>
</tr>
<tr>
<td>London: St George’s</td>
<td>125</td>
<td>4.4</td>
</tr>
<tr>
<td>London: University College</td>
<td>124</td>
<td>4.4</td>
</tr>
<tr>
<td>London: Barts &amp; the London</td>
<td>156</td>
<td>5.5</td>
</tr>
<tr>
<td>Manchester</td>
<td>214</td>
<td>7.6</td>
</tr>
<tr>
<td>Newcastle</td>
<td>131</td>
<td>4.7</td>
</tr>
<tr>
<td>Norwich (UEA)</td>
<td>61</td>
<td>2.2</td>
</tr>
<tr>
<td>Nottingham</td>
<td>112</td>
<td>4.0</td>
</tr>
<tr>
<td>Oxford</td>
<td>27</td>
<td>1.0</td>
</tr>
<tr>
<td>Peninsula</td>
<td>72</td>
<td>2.6</td>
</tr>
<tr>
<td>Sheffield</td>
<td>111</td>
<td>3.9</td>
</tr>
<tr>
<td>Southampton</td>
<td>106</td>
<td>3.8</td>
</tr>
<tr>
<td>Wales (incl Cardiff &amp; Swansea)</td>
<td>148</td>
<td>5.3</td>
</tr>
<tr>
<td>Warwick</td>
<td>74</td>
<td>2.6</td>
</tr>
<tr>
<td>Total</td>
<td>2,812</td>
<td>100.0</td>
</tr>
</tbody>
</table>

### Graduates from the Rest of the World

<table>
<thead>
<tr>
<th>Country of PMQ</th>
<th>N</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Afghanistan</td>
<td>5</td>
<td>0.9</td>
</tr>
<tr>
<td>Bangladesh</td>
<td>16</td>
<td>2.7</td>
</tr>
<tr>
<td>Belarus</td>
<td>5</td>
<td>0.9</td>
</tr>
<tr>
<td>Egypt</td>
<td>13</td>
<td>2.2</td>
</tr>
<tr>
<td>Ghana</td>
<td>5</td>
<td>0.9</td>
</tr>
<tr>
<td>India</td>
<td>126</td>
<td>21.4</td>
</tr>
<tr>
<td>Iraq</td>
<td>19</td>
<td>3.2</td>
</tr>
<tr>
<td>Nepal</td>
<td>6</td>
<td>1.0</td>
</tr>
<tr>
<td>Nigeria</td>
<td>92</td>
<td>15.6</td>
</tr>
<tr>
<td>Pakistan</td>
<td>179</td>
<td>30.4</td>
</tr>
<tr>
<td>Philippines</td>
<td>6</td>
<td>1.0</td>
</tr>
<tr>
<td>Russia</td>
<td>14</td>
<td>2.4</td>
</tr>
<tr>
<td>South Africa</td>
<td>9</td>
<td>1.5</td>
</tr>
<tr>
<td>Sri Lanka</td>
<td>10</td>
<td>1.7</td>
</tr>
<tr>
<td>Sudan</td>
<td>11</td>
<td>1.9</td>
</tr>
<tr>
<td>Syria</td>
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<td>1.2</td>
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<td>Ukraine</td>
<td>10</td>
<td>1.7</td>
</tr>
<tr>
<td>Other Countries (&lt; 5 each)</td>
<td>55</td>
<td>9.4</td>
</tr>
<tr>
<td>Total</td>
<td>588</td>
<td>100.0</td>
</tr>
</tbody>
</table>
2. AKT Candidates’ Place of PMQ, by Training LETB / Deanery

<table>
<thead>
<tr>
<th>Source of PMQ</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>UK</td>
</tr>
<tr>
<td>Armed Forces (Defence)</td>
<td>25</td>
</tr>
<tr>
<td>East Midlands</td>
<td>185</td>
</tr>
<tr>
<td>East of England</td>
<td>208</td>
</tr>
<tr>
<td>East Scotland</td>
<td>26</td>
</tr>
<tr>
<td>Kent, Surrey, Sussex</td>
<td>222</td>
</tr>
<tr>
<td>London</td>
<td>430</td>
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<tr>
<td>Mersey</td>
<td>123</td>
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<tr>
<td>North Scotland</td>
<td>42</td>
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<tr>
<td>North Western</td>
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<tr>
<td>Northern</td>
<td>94</td>
</tr>
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<td>Northern Ireland</td>
<td>57</td>
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<tr>
<td>Oxford</td>
<td>102</td>
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<tr>
<td>Severn</td>
<td>137</td>
</tr>
<tr>
<td>South East Scotland</td>
<td>57</td>
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<tr>
<td>South West Peninsula</td>
<td>104</td>
</tr>
<tr>
<td>Wales</td>
<td>115</td>
</tr>
<tr>
<td>Wessex</td>
<td>124</td>
</tr>
<tr>
<td>West Midlands</td>
<td>223</td>
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<tr>
<td>West Scotland</td>
<td>102</td>
</tr>
<tr>
<td>Yorkshire &amp; The Humber</td>
<td>229</td>
</tr>
<tr>
<td>Total</td>
<td>2811</td>
</tr>
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</table>

One candidate’s Deanery information was missing
1. AKT Result & Scores (scaled; pass mark = 0), overall and by exam diet (all candidates)

<table>
<thead>
<tr>
<th>AKT Diet</th>
<th>Result</th>
<th>Total N</th>
<th>Scaled Mark</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Fail</td>
<td>Pass</td>
<td>Min.</td>
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<tr>
<td>AKT 022</td>
<td>306</td>
<td>947</td>
<td>1253</td>
</tr>
<tr>
<td>October 2014</td>
<td>24.4%</td>
<td>75.6%</td>
<td></td>
</tr>
<tr>
<td>AKT 023</td>
<td>290</td>
<td>899</td>
<td>1189</td>
</tr>
<tr>
<td>January 2015</td>
<td>24.4%</td>
<td>75.6%</td>
<td></td>
</tr>
<tr>
<td>AKT 024</td>
<td>380</td>
<td>1106</td>
<td>1486</td>
</tr>
<tr>
<td>April 2015</td>
<td>25.6%</td>
<td>74.4%</td>
<td></td>
</tr>
</tbody>
</table>
### 2. AKT Result and scores, by Stage (Year) of Training (all candidates)

<table>
<thead>
<tr>
<th>Training Year</th>
<th>Result</th>
<th>Total N</th>
<th>Scaled Mark</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Fail</td>
<td>Pass</td>
<td>Min.</td>
</tr>
<tr>
<td>ST 2</td>
<td>468</td>
<td>2070</td>
<td>2538</td>
</tr>
<tr>
<td></td>
<td>18.4%</td>
<td>81.6%</td>
<td>100.0%</td>
</tr>
<tr>
<td>ST 3</td>
<td>487</td>
<td>853</td>
<td>1340</td>
</tr>
<tr>
<td></td>
<td>36.3%</td>
<td>63.7%</td>
<td>100.0%</td>
</tr>
<tr>
<td>(Unknown)</td>
<td>21</td>
<td>29</td>
<td>50</td>
</tr>
<tr>
<td></td>
<td>42.0%</td>
<td>58.0%</td>
<td>100.0%</td>
</tr>
<tr>
<td>All Candidates</td>
<td>976</td>
<td>2952</td>
<td>3928</td>
</tr>
<tr>
<td></td>
<td>24.8%</td>
<td>75.2%</td>
<td>100.0%</td>
</tr>
</tbody>
</table>

**Diagram:**

- **Bar chart** showing the distribution of pass and fail results for ST 2 and ST 3.
- **Histograms** for Scaled Mark, with a vertical line indicating the mean for ST 2 and ST 3.
3. Result and scores, by attempt at the AKT: all graduates, and separated by source of primary medical qualification, UK/non-UK (all candidates)

<table>
<thead>
<tr>
<th>UK or non-UK Graduate</th>
<th>Attempt</th>
<th>Result</th>
<th>Total N</th>
<th>Fail</th>
<th>%</th>
<th>Pass</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>N</td>
<td></td>
<td>N</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Fail</td>
<td></td>
<td></td>
<td></td>
<td>Pass</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>UK Graduate</td>
<td>1</td>
<td>338</td>
<td>2244</td>
<td>2582</td>
<td>13.1%</td>
<td>86.9%</td>
<td></td>
</tr>
<tr>
<td></td>
<td>2</td>
<td>119</td>
<td>183</td>
<td>302</td>
<td>39.4%</td>
<td>60.6%</td>
<td></td>
</tr>
<tr>
<td></td>
<td>3</td>
<td>37</td>
<td>68</td>
<td>105</td>
<td>35.2%</td>
<td>64.8%</td>
<td></td>
</tr>
<tr>
<td></td>
<td>4</td>
<td>15</td>
<td>23</td>
<td>38</td>
<td>39.5%</td>
<td>60.5%</td>
<td></td>
</tr>
<tr>
<td></td>
<td>5</td>
<td>7</td>
<td>4</td>
<td>11</td>
<td>63.6%</td>
<td>36.4%</td>
<td></td>
</tr>
<tr>
<td></td>
<td>6</td>
<td>2</td>
<td>1</td>
<td>3</td>
<td>66.7%</td>
<td>33.3%</td>
<td></td>
</tr>
<tr>
<td></td>
<td>All</td>
<td>518</td>
<td>2523</td>
<td>3041</td>
<td>17.0%</td>
<td>83.0%</td>
<td></td>
</tr>
<tr>
<td>Non-UK Graduate</td>
<td>1</td>
<td>206</td>
<td>220</td>
<td>426</td>
<td>48.4%</td>
<td>51.6%</td>
<td></td>
</tr>
<tr>
<td></td>
<td>2</td>
<td>128</td>
<td>89</td>
<td>217</td>
<td>59.0%</td>
<td>41.0%</td>
<td></td>
</tr>
<tr>
<td></td>
<td>3</td>
<td>74</td>
<td>67</td>
<td>141</td>
<td>52.5%</td>
<td>47.5%</td>
<td></td>
</tr>
<tr>
<td></td>
<td>4</td>
<td>30</td>
<td>30</td>
<td>60</td>
<td>50.0%</td>
<td>50.0%</td>
<td></td>
</tr>
<tr>
<td></td>
<td>5</td>
<td>11</td>
<td>20</td>
<td>31</td>
<td>35.5%</td>
<td>64.5%</td>
<td></td>
</tr>
<tr>
<td></td>
<td>6</td>
<td>3</td>
<td>2</td>
<td>5</td>
<td>60.0%</td>
<td>40.0%</td>
<td></td>
</tr>
<tr>
<td></td>
<td>7</td>
<td>3</td>
<td>1</td>
<td>4</td>
<td>75.0%</td>
<td>25.0%</td>
<td></td>
</tr>
<tr>
<td></td>
<td>8</td>
<td>3</td>
<td>0</td>
<td>3</td>
<td>100.0%</td>
<td>0.0%</td>
<td></td>
</tr>
<tr>
<td></td>
<td>All</td>
<td>458</td>
<td>429</td>
<td>887</td>
<td>51.6%</td>
<td>48.4%</td>
<td></td>
</tr>
<tr>
<td>All</td>
<td>1</td>
<td>544</td>
<td>2464</td>
<td>3008</td>
<td>18.1%</td>
<td>81.9%</td>
<td></td>
</tr>
<tr>
<td></td>
<td>2</td>
<td>247</td>
<td>272</td>
<td>519</td>
<td>47.6%</td>
<td>52.4%</td>
<td></td>
</tr>
<tr>
<td></td>
<td>3</td>
<td>111</td>
<td>135</td>
<td>246</td>
<td>45.1%</td>
<td>54.9%</td>
<td></td>
</tr>
<tr>
<td></td>
<td>4</td>
<td>45</td>
<td>53</td>
<td>98</td>
<td>45.9%</td>
<td>54.1%</td>
<td></td>
</tr>
<tr>
<td></td>
<td>5</td>
<td>18</td>
<td>24</td>
<td>42</td>
<td>42.9%</td>
<td>57.1%</td>
<td></td>
</tr>
<tr>
<td></td>
<td>6</td>
<td>5</td>
<td>3</td>
<td>8</td>
<td>62.5%</td>
<td>37.5%</td>
<td></td>
</tr>
<tr>
<td></td>
<td>7</td>
<td>3</td>
<td>1</td>
<td>4</td>
<td>75.0%</td>
<td>25.0%</td>
<td></td>
</tr>
<tr>
<td></td>
<td>8</td>
<td>3</td>
<td>0</td>
<td>3</td>
<td>100.0%</td>
<td>0.0%</td>
<td></td>
</tr>
<tr>
<td></td>
<td>All</td>
<td>976</td>
<td>2952</td>
<td>3928</td>
<td>24.8%</td>
<td>75.2%</td>
<td></td>
</tr>
</tbody>
</table>

NB Log Scale!
<table>
<thead>
<tr>
<th>Attempt</th>
<th>UK or Non-UK Graduate</th>
<th>N</th>
<th>Min.</th>
<th>Max.</th>
<th>Mean</th>
<th>SD</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>UKG</td>
<td>2582</td>
<td>-37</td>
<td>54</td>
<td>17.57</td>
<td>15.41</td>
</tr>
<tr>
<td></td>
<td>Non-UK G</td>
<td>426</td>
<td>-71</td>
<td>39</td>
<td>-0.64</td>
<td>18.91</td>
</tr>
<tr>
<td>2</td>
<td>UKG</td>
<td>302</td>
<td>-35</td>
<td>31</td>
<td>2.57</td>
<td>11.21</td>
</tr>
<tr>
<td></td>
<td>Non-UK G</td>
<td>217</td>
<td>-45</td>
<td>18</td>
<td>-4.25</td>
<td>12.33</td>
</tr>
<tr>
<td>3</td>
<td>UKG</td>
<td>105</td>
<td>-25</td>
<td>36</td>
<td>3.48</td>
<td>10.62</td>
</tr>
<tr>
<td></td>
<td>Non-UK G</td>
<td>141</td>
<td>-40</td>
<td>29</td>
<td>-1.70</td>
<td>12.43</td>
</tr>
<tr>
<td>4</td>
<td>UKG</td>
<td>38</td>
<td>-24</td>
<td>24</td>
<td>1.16</td>
<td>12.32</td>
</tr>
<tr>
<td></td>
<td>Non-UK G</td>
<td>60</td>
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<td>17</td>
<td>-0.58</td>
<td>10.89</td>
</tr>
<tr>
<td>5+</td>
<td>UKG</td>
<td>14</td>
<td>-29</td>
<td>21</td>
<td>-2.00</td>
<td>12.67</td>
</tr>
<tr>
<td></td>
<td>Non-UK G</td>
<td>43</td>
<td>-37</td>
<td>21</td>
<td>-1.63</td>
<td>12.85</td>
</tr>
</tbody>
</table>
4. Score on AKT on a) first attempt (linear scale) and b) by ST Year on first attempt by source of PMQ, UK and non-UK Graduates compared
5. Numbers and result on AKT on first attempt by year of qualification for UK and non-UK Graduates

<table>
<thead>
<tr>
<th>Year of PMQ</th>
<th>UKG</th>
<th>Non-UKG</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>1991 or earlier</td>
<td>7</td>
<td>8</td>
<td>25</td>
</tr>
<tr>
<td>1992</td>
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<tr>
<td>1993</td>
<td>3</td>
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<td>7</td>
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<td>1994</td>
<td>-</td>
<td>8</td>
<td>8</td>
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<tr>
<td>1995</td>
<td>-</td>
<td>5</td>
<td>5</td>
</tr>
<tr>
<td>1996</td>
<td>-</td>
<td>12</td>
<td>12</td>
</tr>
<tr>
<td>1997</td>
<td>-</td>
<td>9</td>
<td>9</td>
</tr>
<tr>
<td>1998</td>
<td>5</td>
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<td>18</td>
<td>21</td>
</tr>
<tr>
<td>2000</td>
<td>5</td>
<td>23</td>
<td>28</td>
</tr>
<tr>
<td>2001</td>
<td>9</td>
<td>19</td>
<td>28</td>
</tr>
<tr>
<td>2002</td>
<td>8</td>
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<td>2003</td>
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<td>41</td>
<td>65</td>
</tr>
<tr>
<td>2005</td>
<td>31</td>
<td>35</td>
<td>66</td>
</tr>
<tr>
<td>2006</td>
<td>75</td>
<td>36</td>
<td>111</td>
</tr>
<tr>
<td>2007</td>
<td>120</td>
<td>32</td>
<td>152</td>
</tr>
<tr>
<td>2008</td>
<td>212</td>
<td>23</td>
<td>235</td>
</tr>
<tr>
<td>2009</td>
<td>390</td>
<td>16</td>
<td>406</td>
</tr>
<tr>
<td>2010</td>
<td>676</td>
<td>20</td>
<td>696</td>
</tr>
<tr>
<td>2011/12</td>
<td>1001</td>
<td>20</td>
<td>1020</td>
</tr>
<tr>
<td>Total</td>
<td>2582</td>
<td>426</td>
<td>3008</td>
</tr>
</tbody>
</table>
6. Candidates with Disabilities: prevalence by attempt and source of PMQ; outcomes

UK Equality Legislation supports examination candidates with disabilities in requesting ‘reasonable accommodations’ in regard to their disabilities, without affecting the standard of the examination. The tables below record the prevalence of such candidates in attempts at the AKT in 2014-15, together with the results of the assessments. Specific Learning Disability (SLD) is the disability most frequently reported. Disabilities other than SLD have been merged for reasons of small numbers and personal confidentiality, the commonest ones being a disabling medical condition and hearing impairment.

Note, importantly, that SLD may not be diagnosed until a second or later attempt at the assessment.

There were 252 disabled candidate-attempts at the AKT (see first, blue, table below), representing 6.4% of attempts. The second, green table shows the outcomes for these candidates. Multivariate analysis suggests that the amount of variance in the scaled mark attributable to ‘disability / no disability’ is 0.4%.

The overall number of successful attempts by candidates with disabilities was 171, or 68%.

<table>
<thead>
<tr>
<th>Disability</th>
<th>AKT Attempt</th>
<th>PMQ</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>Specific learning difficulty</td>
<td>90</td>
<td>28</td>
<td>31</td>
</tr>
<tr>
<td>Other Disabilities</td>
<td>26</td>
<td>14</td>
<td>7</td>
</tr>
<tr>
<td>All Disabilities</td>
<td>116</td>
<td>42</td>
<td>38</td>
</tr>
<tr>
<td>No Disabilities</td>
<td>2892</td>
<td>477</td>
<td>208</td>
</tr>
<tr>
<td>All Candidates</td>
<td>3008</td>
<td>519</td>
<td>246</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Disability</th>
<th>AKT Attempt</th>
<th>PMQ</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>Specific learning difficulty</td>
<td>82.2</td>
<td>57.1</td>
<td>58.1</td>
</tr>
<tr>
<td>Other Disabilities</td>
<td>84.6</td>
<td>57.1</td>
<td>57.1</td>
</tr>
<tr>
<td>All Disabilities</td>
<td>82.8</td>
<td>57.1</td>
<td>57.9</td>
</tr>
<tr>
<td>No Disabilities</td>
<td>81.9</td>
<td>52.0</td>
<td>54.3</td>
</tr>
<tr>
<td>All Candidates</td>
<td>81.9</td>
<td>52.4</td>
<td>54.9</td>
</tr>
</tbody>
</table>
1. AKT Result and scores by candidate sex, and within source of PMQ (1\textsuperscript{st} attempt)

<table>
<thead>
<tr>
<th>Source of PMQ</th>
<th>Sex</th>
<th>Fail</th>
<th></th>
<th></th>
<th>Total</th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>N</td>
<td>%</td>
<td>N</td>
<td>%</td>
<td>N</td>
<td></td>
</tr>
<tr>
<td>UK Graduate</td>
<td>Male</td>
<td>134</td>
<td>15.3%</td>
<td>740</td>
<td>84.7%</td>
<td>874</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Female</td>
<td>204</td>
<td>11.9%</td>
<td>1504</td>
<td>88.1%</td>
<td>1708</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Total</td>
<td>338</td>
<td>13.1%</td>
<td>2244</td>
<td>86.9%</td>
<td>2582</td>
<td></td>
</tr>
<tr>
<td>Non-UK Graduate</td>
<td>Male</td>
<td>93</td>
<td>55.0%</td>
<td>76</td>
<td>45.0%</td>
<td>169</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Female</td>
<td>113</td>
<td>44.0%</td>
<td>144</td>
<td>56.0%</td>
<td>257</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Total</td>
<td>206</td>
<td>48.4%</td>
<td>220</td>
<td>51.6%</td>
<td>426</td>
<td></td>
</tr>
<tr>
<td>Total</td>
<td>Male</td>
<td>227</td>
<td>21.8%</td>
<td>816</td>
<td>78.2%</td>
<td>1043</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Female</td>
<td>317</td>
<td>16.1%</td>
<td>1648</td>
<td>83.9%</td>
<td>1965</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Total</td>
<td>544</td>
<td>18.1%</td>
<td>2464</td>
<td>81.9%</td>
<td>3008</td>
<td></td>
</tr>
</tbody>
</table>
2. AKT Result by classified candidate ethnicity, and separated by source of primary medical qualification (1st attempt)

<table>
<thead>
<tr>
<th>Ethnic Group</th>
<th>Result by Candidate Ethnicity</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Fail</td>
</tr>
<tr>
<td></td>
<td>N</td>
</tr>
<tr>
<td>UK Graduate</td>
<td></td>
</tr>
<tr>
<td>Black</td>
<td>20</td>
</tr>
<tr>
<td>Other / Mixed Ethnicity</td>
<td>12</td>
</tr>
<tr>
<td>White</td>
<td>149</td>
</tr>
<tr>
<td>Total</td>
<td>325</td>
</tr>
<tr>
<td>Non-UK Graduate</td>
<td></td>
</tr>
<tr>
<td>Black</td>
<td>44</td>
</tr>
<tr>
<td>Other / Mixed Ethnicity</td>
<td>26</td>
</tr>
<tr>
<td>White</td>
<td>109</td>
</tr>
<tr>
<td>Total</td>
<td>202</td>
</tr>
<tr>
<td>All Graduates</td>
<td></td>
</tr>
<tr>
<td>Black</td>
<td>64</td>
</tr>
<tr>
<td>Other / Mixed Ethnicity</td>
<td>57</td>
</tr>
<tr>
<td>White</td>
<td>233</td>
</tr>
<tr>
<td>Total</td>
<td>527</td>
</tr>
</tbody>
</table>
### 3. AKT Result and Scores by PMQ (medical school; country) on 1st attempt

#### UK Graduates

<table>
<thead>
<tr>
<th>Medical School</th>
<th>N Cands</th>
<th>Min</th>
<th>Max</th>
<th>Mean</th>
<th>SD</th>
<th>Fail</th>
<th>Pass</th>
</tr>
</thead>
<tbody>
<tr>
<td>Aberdeen</td>
<td>55</td>
<td>-31</td>
<td>40</td>
<td>13.85</td>
<td>15.15</td>
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<td>78.6%</td>
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<td>81.0%</td>
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<td>15.81</td>
<td>14.1%</td>
<td>85.9%</td>
</tr>
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<td>14.30</td>
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<td>91.6%</td>
</tr>
<tr>
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<td>-13</td>
<td>41</td>
<td>18.19</td>
<td>12.37</td>
<td>7.1%</td>
<td>92.9%</td>
</tr>
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</table>
Non-UK Graduates – Countries with 5+ Candidates, on First Attempt

<table>
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<th>N Cands</th>
<th>Scaled Mark</th>
<th>Result</th>
</tr>
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<td>Max</td>
</tr>
<tr>
<td>Bangladesh</td>
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<td>-45</td>
<td>11</td>
</tr>
<tr>
<td>Czech Republic</td>
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<td>38</td>
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<td>Egypt</td>
<td>9</td>
<td>-35</td>
<td>26</td>
</tr>
<tr>
<td>Germany</td>
<td>5</td>
<td>-14</td>
<td>32</td>
</tr>
<tr>
<td>India</td>
<td>82</td>
<td>-54</td>
<td>37</td>
</tr>
<tr>
<td>Iraq</td>
<td>8</td>
<td>-26</td>
<td>32</td>
</tr>
<tr>
<td>Ireland</td>
<td>12</td>
<td>-25</td>
<td>39</td>
</tr>
<tr>
<td>Nepal</td>
<td>5</td>
<td>-26</td>
<td>5</td>
</tr>
<tr>
<td>Nigeria</td>
<td>64</td>
<td>-60</td>
<td>29</td>
</tr>
<tr>
<td>Pakistan</td>
<td>91</td>
<td>-52</td>
<td>38</td>
</tr>
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<td>Poland</td>
<td>10</td>
<td>-10</td>
<td>23</td>
</tr>
<tr>
<td>Romania</td>
<td>5</td>
<td>-45</td>
<td>19</td>
</tr>
<tr>
<td>South Africa</td>
<td>8</td>
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<td>36</td>
</tr>
<tr>
<td>Sri Lanka</td>
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<td>-12</td>
<td>17</td>
</tr>
<tr>
<td>Sudan</td>
<td>10</td>
<td>-27</td>
<td>13</td>
</tr>
<tr>
<td>Syria</td>
<td>5</td>
<td>-13</td>
<td>17</td>
</tr>
<tr>
<td>Ukraine</td>
<td>5</td>
<td>-14</td>
<td>25</td>
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</table>
D: Results by Training Deanery

1. Error bar graphs of mean Candidate Scores by Deanery, by source of PMQ
(Markers indicate mean scores, bars indicate 95% C.I. Categories removed if 5 candidates or less.)

UK Graduates, First Attempt

Non-UK Graduates, First Attempt

All Graduates, All Attempts
E: Analyses of AKT sub-Scores

1. Overall pattern of scores, UK graduates and IMGs compared on first attempt; descriptive statistics of the three scores, place of PMQ and training year compared

2. Correlations between AKT section scores and total score: candidates on first attempt. UK graduates and IMGs compared

The size of the correlations between section scores and the total score shows the pattern of candidates’ performance within the AKT; separated by place of PMQ, possible differences in the pattern could be seen as between UKGs and IMGs (such differences are in fact small).

<table>
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<th>Candidate Group</th>
<th>Question Group</th>
<th>N Cands.</th>
<th>Descriptive Statistics</th>
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<td>Clinical_Medicine</td>
<td>2582</td>
<td>45.00</td>
</tr>
<tr>
<td></td>
<td>Evidence_Interpretation</td>
<td>2582</td>
<td>30.00</td>
</tr>
<tr>
<td></td>
<td>Organisational_Questions</td>
<td>2582</td>
<td>30.00</td>
</tr>
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<td>Non-UKG</td>
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<td></td>
<td>Evidence_Interpretation</td>
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<tr>
<td></td>
<td>Organisational_Questions</td>
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</tr>
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<td>ST 2</td>
<td>Clinical_Medicine</td>
<td>2538</td>
<td>30.00</td>
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<td></td>
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<td>Organisational_Questions</td>
<td>2538</td>
<td>20.00</td>
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<tr>
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<td>Organisational_Questions</td>
<td>1340</td>
<td>25.00</td>
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</table>

All correlations significant at the 0.001 level (1-tailed)
4: CSA Statistics

A: Summary of Candidate Demographics

3167 candidates made a total of 3699 attempts at the CSA during 2014-15. The tables below show the origin of the 3167 candidates, by UK medical school or non-UK country of primary medical qualification—and the percentage from each out of the total of that part of the candidature. Candidates' year of qualification (PMQ) is also shown, as a surrogate for age. On the following page, the background demographic characteristics of the 3167 are shown, by training Deanery. Other tables report on the 3699 attempts.

1. Source of Primary Medical Qualification; year of qualification

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<tbody>
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<td>EEA Graduates</td>
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</tr>
<tr>
<td>Graduates from Rest of World</td>
<td>648</td>
<td>20.5</td>
</tr>
<tr>
<td>UK Graduates</td>
<td>2413</td>
<td>76.2</td>
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<td>Total</td>
<td>3167</td>
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<tr>
<td>Belfast</td>
<td>54</td>
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</tr>
<tr>
<td>Birmingham</td>
<td>172</td>
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</tr>
<tr>
<td>Brighton and Sussex</td>
<td>34</td>
<td>1.4</td>
</tr>
<tr>
<td>Bristol</td>
<td>64</td>
<td>2.7</td>
</tr>
<tr>
<td>Cambridge</td>
<td>26</td>
<td>1.1</td>
</tr>
<tr>
<td>Dundee</td>
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<td>2.5</td>
</tr>
<tr>
<td>Edinburgh</td>
<td>77</td>
<td>3.2</td>
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<tr>
<td>Glasgow</td>
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<td>Hull York</td>
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<tr>
<td>Keele</td>
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<td>0.5</td>
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<tr>
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<td>116</td>
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</tr>
<tr>
<td>Leicester</td>
<td>93</td>
<td>3.9</td>
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<tr>
<td>Liverpool</td>
<td>110</td>
<td>4.6</td>
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<tr>
<td>Total</td>
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</table>

<table>
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<td>Egypt</td>
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<td>1.5</td>
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<td>Iran</td>
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<td>Russia</td>
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<td>1.7</td>
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<td>Sri Lanka</td>
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<td>1.9</td>
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<td>Sudan</td>
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<td>1.1</td>
</tr>
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<td>Ukraine</td>
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<td>2.5</td>
</tr>
<tr>
<td>Other RoW Countries (&lt; 5 each)</td>
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<td>10.8</td>
</tr>
<tr>
<td>Total</td>
<td>648</td>
<td>100.0</td>
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</table>
Indication of Candidates’ Age by major recruited group, using year of primary medical qualification as a surrogate

NB Log Scale!
## 2. CSA Candidates’ Place of PMQ, by Training Deanery/LETB

<table>
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<tr>
<td></td>
<td>94.4%</td>
<td>2.1%</td>
</tr>
<tr>
<td>Mersey</td>
<td>96</td>
<td>7</td>
</tr>
<tr>
<td></td>
<td>67.1%</td>
<td>4.9%</td>
</tr>
<tr>
<td>North Scotland</td>
<td>37</td>
<td>1</td>
</tr>
<tr>
<td></td>
<td>71.2%</td>
<td>1.9%</td>
</tr>
<tr>
<td>North Western</td>
<td>166</td>
<td>3</td>
</tr>
<tr>
<td></td>
<td>67.2%</td>
<td>1.2%</td>
</tr>
<tr>
<td>Northern</td>
<td>94</td>
<td>7</td>
</tr>
<tr>
<td></td>
<td>62.3%</td>
<td>4.6%</td>
</tr>
<tr>
<td>Northern Ireland</td>
<td>62</td>
<td>3</td>
</tr>
<tr>
<td></td>
<td>93.9%</td>
<td>4.5%</td>
</tr>
<tr>
<td>Oxford</td>
<td>87</td>
<td>2</td>
</tr>
<tr>
<td></td>
<td>87.9%</td>
<td>2.0%</td>
</tr>
<tr>
<td>Severn</td>
<td>119</td>
<td>2</td>
</tr>
<tr>
<td></td>
<td>96.0%</td>
<td>1.6%</td>
</tr>
<tr>
<td>South East Scotland</td>
<td>62</td>
<td>2</td>
</tr>
<tr>
<td></td>
<td>92.5%</td>
<td>3.0%</td>
</tr>
<tr>
<td>South West Peninsula</td>
<td>67</td>
<td>1</td>
</tr>
<tr>
<td></td>
<td>95.7%</td>
<td>1.4%</td>
</tr>
<tr>
<td>Wales</td>
<td>87</td>
<td>2</td>
</tr>
<tr>
<td></td>
<td>82.1%</td>
<td>1.9%</td>
</tr>
<tr>
<td>Wessex</td>
<td>91</td>
<td>2</td>
</tr>
<tr>
<td></td>
<td>82.0%</td>
<td>1.8%</td>
</tr>
<tr>
<td>West Midlands</td>
<td>220</td>
<td>12</td>
</tr>
<tr>
<td></td>
<td>70.1%</td>
<td>3.8%</td>
</tr>
<tr>
<td>West Scotland</td>
<td>106</td>
<td>5</td>
</tr>
<tr>
<td></td>
<td>69.7%</td>
<td>3.3%</td>
</tr>
<tr>
<td>Yorkshire &amp; The Humber</td>
<td>222</td>
<td>5</td>
</tr>
<tr>
<td></td>
<td>82.5%</td>
<td>1.9%</td>
</tr>
<tr>
<td>Total</td>
<td>2413</td>
<td>106</td>
</tr>
<tr>
<td></td>
<td>76.2%</td>
<td>3.3%</td>
</tr>
</tbody>
</table>
B: Main Results: Overall, and by Exam Diet and Attempt (All Candidates)

1. CSA Result and scores, overall and by Diet (all candidates/attempts)

The pass-mark varies slightly day-on-day (see introduction): marks have been re-scaled in this report to a pass-mark of zero.

### Background: Candidate Attempts on Each CSA Diet

<table>
<thead>
<tr>
<th>CSA Diet</th>
<th>CSA Attempt</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>October 2014</td>
<td>76</td>
<td>31</td>
</tr>
<tr>
<td>November 2014</td>
<td>138</td>
<td>34</td>
</tr>
<tr>
<td>December 2014</td>
<td>267</td>
<td>23</td>
</tr>
<tr>
<td>January 2015</td>
<td>566</td>
<td>32</td>
</tr>
<tr>
<td>February 2015</td>
<td>425</td>
<td>19</td>
</tr>
<tr>
<td>March 2015</td>
<td>903</td>
<td>60</td>
</tr>
<tr>
<td>April 2015</td>
<td>258</td>
<td>48</td>
</tr>
<tr>
<td>May 2015</td>
<td>223</td>
<td>95</td>
</tr>
<tr>
<td>All Diets</td>
<td>2956</td>
<td>680</td>
</tr>
</tbody>
</table>

### Results Overall and by Diet

<table>
<thead>
<tr>
<th>CSA Diet</th>
<th>Fail</th>
<th>Pass</th>
<th>Total</th>
<th>Scaled Mark</th>
<th>Min.</th>
<th>Max.</th>
<th>Mean</th>
<th>SD</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>N</td>
<td>%</td>
<td>N</td>
<td>%</td>
<td>N</td>
<td>%</td>
<td>N</td>
<td>%</td>
</tr>
<tr>
<td>October 2014</td>
<td>58</td>
<td>0.128</td>
<td>119</td>
<td>0.24</td>
<td>177</td>
<td>35</td>
<td>5.96</td>
<td>12.10</td>
</tr>
<tr>
<td>November 2014</td>
<td>74</td>
<td>0.325</td>
<td>154</td>
<td>0.675</td>
<td>228</td>
<td>25</td>
<td>5.73</td>
<td>11.29</td>
</tr>
<tr>
<td>December 2014</td>
<td>81</td>
<td>0.248</td>
<td>245</td>
<td>0.752</td>
<td>326</td>
<td>36</td>
<td>7.42</td>
<td>12.32</td>
</tr>
<tr>
<td>January 2015</td>
<td>128</td>
<td>0.198</td>
<td>517</td>
<td>0.802</td>
<td>645</td>
<td>37</td>
<td>9.53</td>
<td>11.57</td>
</tr>
<tr>
<td>February 2015</td>
<td>50</td>
<td>0.11</td>
<td>404</td>
<td>0.89</td>
<td>454</td>
<td>24</td>
<td>11.55</td>
<td>9.78</td>
</tr>
<tr>
<td>March 2015</td>
<td>233</td>
<td>0.234</td>
<td>762</td>
<td>0.766</td>
<td>995</td>
<td>34</td>
<td>7.16</td>
<td>10.80</td>
</tr>
<tr>
<td>April 2015</td>
<td>81</td>
<td>0.25</td>
<td>243</td>
<td>75.0%</td>
<td>324</td>
<td>29</td>
<td>6.10</td>
<td>11.36</td>
</tr>
<tr>
<td>May 2015</td>
<td>192</td>
<td>34.9%</td>
<td>358</td>
<td>65.1%</td>
<td>550</td>
<td>31</td>
<td>3.46</td>
<td>11.03</td>
</tr>
<tr>
<td>All Diets</td>
<td>897</td>
<td>24.2%</td>
<td>2802</td>
<td>75.8%</td>
<td>3699</td>
<td>37</td>
<td>7.35</td>
<td>11.38</td>
</tr>
</tbody>
</table>
2. Result and scores, by attempt at the CSA: all graduates, and separated by source of primary medical qualification, UK/non-UK (all candidates)

### Result

<table>
<thead>
<tr>
<th>UK or non-UK Graduate</th>
<th>Attempt</th>
<th>Result</th>
<th>Total N</th>
<th>Fail</th>
<th>Pass</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>Fail</td>
<td>Pass</td>
<td>N</td>
<td>%</td>
</tr>
<tr>
<td>UK Graduate</td>
<td>1</td>
<td>214</td>
<td>9.1%</td>
<td>2145</td>
<td>90.9%</td>
</tr>
<tr>
<td></td>
<td>2</td>
<td>45</td>
<td>22.2%</td>
<td>158</td>
<td>77.8%</td>
</tr>
<tr>
<td></td>
<td>3+</td>
<td>14</td>
<td>29.2%</td>
<td>34</td>
<td>70.8%</td>
</tr>
<tr>
<td>Non-UK Graduate</td>
<td>1</td>
<td>260</td>
<td>52.3%</td>
<td>237</td>
<td>47.7%</td>
</tr>
<tr>
<td></td>
<td>2</td>
<td>154</td>
<td>55.6%</td>
<td>123</td>
<td>44.4%</td>
</tr>
<tr>
<td></td>
<td>3</td>
<td>115</td>
<td>65.3%</td>
<td>61</td>
<td>34.7%</td>
</tr>
<tr>
<td></td>
<td>4</td>
<td>66</td>
<td>66.0%</td>
<td>34</td>
<td>34.0%</td>
</tr>
<tr>
<td></td>
<td>5+</td>
<td>29</td>
<td>74.4%</td>
<td>10</td>
<td>25.6%</td>
</tr>
<tr>
<td>All</td>
<td>1</td>
<td>474</td>
<td>16.6%</td>
<td>2382</td>
<td>83.4%</td>
</tr>
<tr>
<td></td>
<td>2</td>
<td>199</td>
<td>41.5%</td>
<td>281</td>
<td>58.5%</td>
</tr>
<tr>
<td></td>
<td>3</td>
<td>123</td>
<td>56.7%</td>
<td>94</td>
<td>43.3%</td>
</tr>
<tr>
<td></td>
<td>4</td>
<td>70</td>
<td>67.3%</td>
<td>34</td>
<td>32.7%</td>
</tr>
<tr>
<td></td>
<td>5+</td>
<td>31</td>
<td>73.8%</td>
<td>11</td>
<td>26.2%</td>
</tr>
</tbody>
</table>

### Candidates’ Score, by Attempt and source of PMQ
3. Candidates with Disabilities: prevalence by PMQ and by attempt; outcomes

UK Equality Legislation permits examination candidates with disabilities to request reasonable accommodations in regard to their disabilities, without affecting the difficulty of the examination. The tables below record the prevalence of such candidates in attempts at the CSA in 2014-15, together with the results of the assessments. SLD is the most prevalent reported disability. Disabilities other than SLD have been merged for reasons of small numbers and personal confidentiality, the commonest being physical disability and hearing impairment.

There were 221 disabled candidate-attempts at the CSA, representing 6.0% of all attempts, a continuing proportionate increase year-on-year. The small green table shows the outcomes for these candidates by SLD and other disability; the multi-coloured one shows the results for all disabled candidates, by attempt. The overall number of successful attempts by candidates with disabilities was 118, or 53%. Multivariate analysis suggests that the amount of variance in the scaled mark attributable to ‘disability / no disability’ is 0.5%.

A summary of the recent history of prevalence of candidates with disabilities presenting in the CSA 2010-15, follows.

<table>
<thead>
<tr>
<th>Disability</th>
<th>N UKG</th>
<th>N IMG</th>
<th>N Total</th>
<th>Pass Rate</th>
</tr>
</thead>
<tbody>
<tr>
<td>Specific learning difficulty</td>
<td>78</td>
<td>62</td>
<td>140</td>
<td>55.0%</td>
</tr>
<tr>
<td>All other disabilities</td>
<td>44</td>
<td>37</td>
<td>81</td>
<td>50.6%</td>
</tr>
<tr>
<td>Total</td>
<td>122</td>
<td>99</td>
<td>221</td>
<td>53.4%</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>CSA Attempt</th>
<th>Result: Candidates without Disabilities</th>
<th>Result: Candidates with Disabilities</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Fall</td>
<td>Pass</td>
</tr>
<tr>
<td>1</td>
<td>424</td>
<td>2300</td>
</tr>
<tr>
<td></td>
<td>15.9%</td>
<td>84.1%</td>
</tr>
<tr>
<td>2</td>
<td>170</td>
<td>262</td>
</tr>
<tr>
<td></td>
<td>39.4%</td>
<td>60.6%</td>
</tr>
<tr>
<td>3</td>
<td>106</td>
<td>84</td>
</tr>
<tr>
<td></td>
<td>55.8%</td>
<td>44.2%</td>
</tr>
<tr>
<td>4</td>
<td>59</td>
<td>31</td>
</tr>
<tr>
<td></td>
<td>65.6%</td>
<td>34.4%</td>
</tr>
<tr>
<td>5+</td>
<td>25</td>
<td>7</td>
</tr>
<tr>
<td></td>
<td>78.1%</td>
<td>21.9%</td>
</tr>
<tr>
<td>All Attempts</td>
<td>794</td>
<td>2684</td>
</tr>
<tr>
<td></td>
<td>22.8%</td>
<td>77.2%</td>
</tr>
</tbody>
</table>
C: Results by Individual Demographics (Candidates on first attempt, only)

1. Result on CSA on first attempt by year of qualification for UK and non-UK Graduates

<table>
<thead>
<tr>
<th>Year of Qualification</th>
<th>IMG</th>
<th>UKG</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>N</td>
<td>Pass %</td>
</tr>
<tr>
<td>1997 or earlier</td>
<td>69</td>
<td>33</td>
</tr>
<tr>
<td>1998</td>
<td>16</td>
<td>38</td>
</tr>
<tr>
<td>1999</td>
<td>29</td>
<td>34</td>
</tr>
<tr>
<td>2000</td>
<td>33</td>
<td>30</td>
</tr>
<tr>
<td>2001</td>
<td>41</td>
<td>54</td>
</tr>
<tr>
<td>2002</td>
<td>33</td>
<td>42</td>
</tr>
<tr>
<td>2003</td>
<td>44</td>
<td>43</td>
</tr>
<tr>
<td>2004</td>
<td>46</td>
<td>46</td>
</tr>
<tr>
<td>2005</td>
<td>44</td>
<td>61</td>
</tr>
<tr>
<td>2006</td>
<td>42</td>
<td>62</td>
</tr>
<tr>
<td>2007</td>
<td>39</td>
<td>54</td>
</tr>
<tr>
<td>2008</td>
<td>20</td>
<td>70</td>
</tr>
<tr>
<td>2009</td>
<td>19</td>
<td>53</td>
</tr>
<tr>
<td>2010/11</td>
<td>22</td>
<td>64</td>
</tr>
</tbody>
</table>

2. Result and scores by candidate sex, within source of PMQ, and within UK Medical School

<table>
<thead>
<tr>
<th>UK or non-UK Graduate</th>
<th>Sex</th>
<th>Result by Candidate Sex</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>Fail</td>
</tr>
<tr>
<td></td>
<td>N</td>
<td>%</td>
</tr>
<tr>
<td>UK Graduate</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Female</td>
<td>97</td>
<td>6.3%</td>
</tr>
<tr>
<td>Male</td>
<td>117</td>
<td>14.1%</td>
</tr>
<tr>
<td>Total</td>
<td>214</td>
<td>9.1%</td>
</tr>
<tr>
<td>Non-UK Graduate</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Female</td>
<td>120</td>
<td>41.0%</td>
</tr>
<tr>
<td>Male</td>
<td>140</td>
<td>68.6%</td>
</tr>
<tr>
<td>Total</td>
<td>260</td>
<td>52.3%</td>
</tr>
<tr>
<td>Total</td>
<td>474</td>
<td>16.6%</td>
</tr>
</tbody>
</table>

Note: Candidates from Keele and an unknown London school have been excluded from this table because of small numbers.
2. Result by classified candidate ethnicity, and separated by source of primary medical qualification, UK/non-UK graduates (1st attempt)

<table>
<thead>
<tr>
<th>UK or non-UK Graduate</th>
<th>Ethnic Group</th>
<th>Fail</th>
<th>%</th>
<th>Pass</th>
<th>%</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>UK Graduate</td>
<td>Black</td>
<td>20</td>
<td>27.8%</td>
<td>52</td>
<td>72.2%</td>
<td>72</td>
</tr>
<tr>
<td></td>
<td>Chinese / SE Asian</td>
<td>17</td>
<td>30.9%</td>
<td>38</td>
<td>69.1%</td>
<td>55</td>
</tr>
<tr>
<td></td>
<td>Mixed / Other Ethnicity</td>
<td>22</td>
<td>16.7%</td>
<td>110</td>
<td>83.3%</td>
<td>132</td>
</tr>
<tr>
<td></td>
<td>S Asian</td>
<td>63</td>
<td>13.1%</td>
<td>418</td>
<td>86.9%</td>
<td>481</td>
</tr>
<tr>
<td></td>
<td>White</td>
<td>83</td>
<td>5.3%</td>
<td>1472</td>
<td>94.7%</td>
<td>1555</td>
</tr>
<tr>
<td></td>
<td>Total</td>
<td>205</td>
<td>8.9%</td>
<td>2090</td>
<td>91.1%</td>
<td>2295</td>
</tr>
<tr>
<td>Non-UK Graduate</td>
<td>Black</td>
<td>62</td>
<td>60.8%</td>
<td>40</td>
<td>39.2%</td>
<td>102</td>
</tr>
<tr>
<td></td>
<td>Mixed / Other Ethnicity</td>
<td>21</td>
<td>48.8%</td>
<td>22</td>
<td>51.2%</td>
<td>43</td>
</tr>
<tr>
<td></td>
<td>S Asian</td>
<td>149</td>
<td>55.2%</td>
<td>121</td>
<td>44.8%</td>
<td>270</td>
</tr>
<tr>
<td></td>
<td>White</td>
<td>22</td>
<td>30.6%</td>
<td>50</td>
<td>69.4%</td>
<td>72</td>
</tr>
<tr>
<td></td>
<td>Total</td>
<td>254</td>
<td>52.2%</td>
<td>233</td>
<td>47.8%</td>
<td>487</td>
</tr>
<tr>
<td>All Graduates</td>
<td>Black</td>
<td>82</td>
<td>47.1%</td>
<td>92</td>
<td>52.9%</td>
<td>174</td>
</tr>
<tr>
<td></td>
<td>Chinese / SE Asian</td>
<td>18</td>
<td>31.6%</td>
<td>39</td>
<td>68.4%</td>
<td>57</td>
</tr>
<tr>
<td></td>
<td>Mixed / Other Ethnicity</td>
<td>42</td>
<td>24.3%</td>
<td>131</td>
<td>75.7%</td>
<td>173</td>
</tr>
<tr>
<td></td>
<td>S Asian</td>
<td>212</td>
<td>28.2%</td>
<td>539</td>
<td>71.8%</td>
<td>751</td>
</tr>
<tr>
<td></td>
<td>White</td>
<td>105</td>
<td>6.5%</td>
<td>1522</td>
<td>93.5%</td>
<td>1627</td>
</tr>
<tr>
<td></td>
<td>Total</td>
<td>459</td>
<td>16.5%</td>
<td>2323</td>
<td>83.5%</td>
<td>2782</td>
</tr>
</tbody>
</table>

Note: 74 candidates on first attempt did not disclose their ethnicity
### 3. CSA Result and Scores by PMQ, subdivided (1st attempt)

#### UK Graduates (by medical school)

**Performance by UK Medical School**

<table>
<thead>
<tr>
<th>Medical School</th>
<th>N Cands</th>
<th>Scaled Mark</th>
<th>Pass Rate (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Min</td>
<td>Max</td>
<td>SD</td>
</tr>
<tr>
<td>Aberdeen</td>
<td>56</td>
<td>-7</td>
<td>27</td>
</tr>
<tr>
<td>Belfast</td>
<td>54</td>
<td>0</td>
<td>33</td>
</tr>
<tr>
<td>Birmingham</td>
<td>168</td>
<td>-17</td>
<td>33</td>
</tr>
<tr>
<td>Brighton and Sussex</td>
<td>33</td>
<td>-16</td>
<td>31</td>
</tr>
<tr>
<td>Bristol</td>
<td>63</td>
<td>-18</td>
<td>31</td>
</tr>
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<td>-8</td>
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<tr>
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<td>76</td>
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<td>30</td>
</tr>
<tr>
<td>Glasgow</td>
<td>69</td>
<td>-4</td>
<td>32</td>
</tr>
<tr>
<td>Hull York</td>
<td>36</td>
<td>-7</td>
<td>29</td>
</tr>
<tr>
<td>Keele</td>
<td>12</td>
<td>-5</td>
<td>27</td>
</tr>
<tr>
<td>Leeds</td>
<td>114</td>
<td>-14</td>
<td>34</td>
</tr>
<tr>
<td>Leicester</td>
<td>89</td>
<td>-14</td>
<td>27</td>
</tr>
<tr>
<td>Liverpool</td>
<td>108</td>
<td>-11</td>
<td>28</td>
</tr>
<tr>
<td>London: Barts &amp; the London</td>
<td>119</td>
<td>-21</td>
<td>31</td>
</tr>
<tr>
<td>London: Imperial College</td>
<td>78</td>
<td>-19</td>
<td>27</td>
</tr>
<tr>
<td>London: King’s College</td>
<td>141</td>
<td>-30</td>
<td>36</td>
</tr>
<tr>
<td>London: St George’s</td>
<td>95</td>
<td>-13</td>
<td>27</td>
</tr>
<tr>
<td>London: University College</td>
<td>90</td>
<td>-13</td>
<td>32</td>
</tr>
<tr>
<td>Manchester</td>
<td>174</td>
<td>-12</td>
<td>32</td>
</tr>
<tr>
<td>Newcastle</td>
<td>125</td>
<td>-12</td>
<td>36</td>
</tr>
<tr>
<td>Norwich (UEA)</td>
<td>47</td>
<td>-9</td>
<td>27</td>
</tr>
<tr>
<td>Nottingham</td>
<td>100</td>
<td>-7</td>
<td>38</td>
</tr>
<tr>
<td>Oxford</td>
<td>23</td>
<td>-4</td>
<td>27</td>
</tr>
<tr>
<td>Peninsula</td>
<td>55</td>
<td>-14</td>
<td>28</td>
</tr>
<tr>
<td>Sheffield</td>
<td>103</td>
<td>-11</td>
<td>30</td>
</tr>
<tr>
<td>Southampton</td>
<td>77</td>
<td>-37</td>
<td>33</td>
</tr>
<tr>
<td>Wales (incl Cardiff &amp; Swansea)</td>
<td>110</td>
<td>-12</td>
<td>35</td>
</tr>
<tr>
<td>Warwick</td>
<td>57</td>
<td>-11</td>
<td>31</td>
</tr>
</tbody>
</table>

(NDone candidate qualified LMSSA)

The summary of the one-way ANOVA below shows the true extent of differentiation in performance between the graduates of the various UK schools—putting the differences apparent in the table and error bar graph into statistical context. Only three homogeneous subsets can be identified.

#### One-Way ANOVA Analysis of Scaled Mark

**Post-hoc Identification of Subsets by Ryan-Einot-Gabriel-Welsch Range**

<table>
<thead>
<tr>
<th>Medical School</th>
<th>N Cands</th>
<th>Homogeneous Subsets alpha = 0.05</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>London: Imperial College</td>
<td>78</td>
<td>1</td>
</tr>
<tr>
<td>London: Barts &amp; the London</td>
<td>119</td>
<td>1</td>
</tr>
<tr>
<td>London: St George’s</td>
<td>95</td>
<td>1</td>
</tr>
<tr>
<td>Warwick</td>
<td>57</td>
<td>1</td>
</tr>
<tr>
<td>Hull York</td>
<td>141</td>
<td>2</td>
</tr>
<tr>
<td>Aberdeen</td>
<td>95</td>
<td>2</td>
</tr>
<tr>
<td>Liverpool</td>
<td>108</td>
<td>2</td>
</tr>
<tr>
<td>Manchester</td>
<td>124</td>
<td>2</td>
</tr>
<tr>
<td>London: University College</td>
<td>90</td>
<td>2</td>
</tr>
<tr>
<td>Brighton and Sussex</td>
<td>33</td>
<td>2</td>
</tr>
<tr>
<td>Sheffield</td>
<td>103</td>
<td>2</td>
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<tr>
<td>Dundee</td>
<td>89</td>
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<tr>
<td>Leeds</td>
<td>114</td>
<td>2</td>
</tr>
<tr>
<td>Peninsula</td>
<td>55</td>
<td>2</td>
</tr>
<tr>
<td>Leicester</td>
<td>89</td>
<td>2</td>
</tr>
<tr>
<td>Norwich (UEA)</td>
<td>47</td>
<td>2</td>
</tr>
<tr>
<td>Keele</td>
<td>12</td>
<td>2</td>
</tr>
<tr>
<td>Southampton</td>
<td>77</td>
<td>2</td>
</tr>
<tr>
<td>Belfast</td>
<td>54</td>
<td>2</td>
</tr>
<tr>
<td>Newcastle</td>
<td>125</td>
<td>2</td>
</tr>
<tr>
<td>Cambridge</td>
<td>60</td>
<td>2</td>
</tr>
<tr>
<td>Glasgow</td>
<td>119</td>
<td>2</td>
</tr>
<tr>
<td>Birmingham</td>
<td>168</td>
<td>2</td>
</tr>
<tr>
<td>Wales (incl Cardiff &amp; Swansea)</td>
<td>110</td>
<td>2</td>
</tr>
<tr>
<td>Bristol</td>
<td>63</td>
<td>2</td>
</tr>
<tr>
<td>Edinburgh</td>
<td>76</td>
<td>2</td>
</tr>
<tr>
<td>Nottingham</td>
<td>100</td>
<td>2</td>
</tr>
<tr>
<td>Oxford</td>
<td>23</td>
<td>2</td>
</tr>
</tbody>
</table>

Sig. 0.12 0.23 0.28
Non-UK Graduates (by country; data only shown for countries with ≥5 candidates: 1st attempt)

<table>
<thead>
<tr>
<th>Country</th>
<th>N</th>
<th>Min</th>
<th>Max</th>
<th>Mean</th>
<th>SD</th>
<th>Pass Rate</th>
</tr>
</thead>
<tbody>
<tr>
<td>Bangladesh</td>
<td>12</td>
<td>-24</td>
<td>10</td>
<td>-13.08</td>
<td>9.30</td>
<td>8.3%</td>
</tr>
<tr>
<td>Czech Republic</td>
<td>24</td>
<td>-16</td>
<td>16</td>
<td>3.54</td>
<td>8.79</td>
<td>66.7%</td>
</tr>
<tr>
<td>Egypt</td>
<td>5</td>
<td>-10</td>
<td>11</td>
<td>1.60</td>
<td>8.91</td>
<td>60.0%</td>
</tr>
<tr>
<td>Germany</td>
<td>10</td>
<td>-4</td>
<td>20</td>
<td>6.40</td>
<td>8.42</td>
<td>70.0%</td>
</tr>
<tr>
<td>India</td>
<td>105</td>
<td>-36</td>
<td>29</td>
<td>-1.10</td>
<td>11.87</td>
<td>50.5%</td>
</tr>
<tr>
<td>Iraq</td>
<td>18</td>
<td>-16</td>
<td>11</td>
<td>0.44</td>
<td>7.49</td>
<td>55.6%</td>
</tr>
<tr>
<td>Ireland</td>
<td>14</td>
<td>-2</td>
<td>22</td>
<td>10.00</td>
<td>7.87</td>
<td>85.7%</td>
</tr>
<tr>
<td>Nigeria</td>
<td>78</td>
<td>-24</td>
<td>21</td>
<td>-3.72</td>
<td>9.58</td>
<td>33.3%</td>
</tr>
<tr>
<td>Pakistan</td>
<td>105</td>
<td>-31</td>
<td>20</td>
<td>-2.41</td>
<td>9.35</td>
<td>45.7%</td>
</tr>
<tr>
<td>Poland</td>
<td>14</td>
<td>-23</td>
<td>20</td>
<td>-2.00</td>
<td>10.46</td>
<td>42.9%</td>
</tr>
<tr>
<td>Romania</td>
<td>8</td>
<td>-20</td>
<td>12</td>
<td>-1.25</td>
<td>10.89</td>
<td>37.5%</td>
</tr>
<tr>
<td>Russia</td>
<td>8</td>
<td>-27</td>
<td>10</td>
<td>-7.50</td>
<td>12.38</td>
<td>37.5%</td>
</tr>
<tr>
<td>Sri Lanka</td>
<td>7</td>
<td>-7</td>
<td>16</td>
<td>0.57</td>
<td>7.74</td>
<td>57.1%</td>
</tr>
<tr>
<td>Sudan</td>
<td>7</td>
<td>-10</td>
<td>7</td>
<td>-0.43</td>
<td>5.83</td>
<td>57.1%</td>
</tr>
</tbody>
</table>
D: Results by Training Deanery/LETB

1. Error bar graphs of Candidate Scores by Deanery, overall, and for first attempts by source of PMQ

- **All Graduates, All Attempts**
- **UK Graduates, First Attempt**
- **Non-UK Graduates, First Attempt**
**E: Summary of Feedback Statements**

The table gives the prevalence of the numbered feedback statements given by examiners to individual candidates’ case performances, by the main two candidate PMQ groups. Figures represent the percentage of the total of all cases which attracted that feedback comment.

### UK Graduates

**N = 33,995 candidate-cases**

<table>
<thead>
<tr>
<th>Feedback Statement</th>
<th>Percentage of all cases seen</th>
</tr>
</thead>
<tbody>
<tr>
<td>7: Does not develop a management plan reflecting knowledge of current best practice</td>
<td>12.4%</td>
</tr>
<tr>
<td>2: Does not recognise the issues or priorities in the consultation</td>
<td>9.6%</td>
</tr>
<tr>
<td>10: Does not demonstrate an awareness of management of risk or make the patient aware of relative risks of different options</td>
<td>8.1%</td>
</tr>
<tr>
<td>8: Does not show appropriate use of resources, including aspects of budgetary governance</td>
<td>7.1%</td>
</tr>
<tr>
<td>3: Shows poor time management</td>
<td>7.0%</td>
</tr>
<tr>
<td>4: Does not identify abnormal findings or results or fails to recognise their implications</td>
<td>6.8%</td>
</tr>
<tr>
<td>6: Does not make the correct working diagnosis or identify an appropriate range of differential possibilities</td>
<td>6.6%</td>
</tr>
<tr>
<td>15: Does not develop a shared management plan, demonstrating an ability to work in partnership with the patient</td>
<td>6.4%</td>
</tr>
<tr>
<td>14: Does not identify or use appropriate psychological or social information to place the problem in context</td>
<td>5.2%</td>
</tr>
<tr>
<td>5: Does not undertake physical examination competently, or use instruments proficiently</td>
<td>4.5%</td>
</tr>
<tr>
<td>9: Does not make adequate arrangements for follow-up and safety-netting</td>
<td>4.4%</td>
</tr>
<tr>
<td>16: Does not use language and/or explanations that are relevant and understandable to the patient</td>
<td>4.3%</td>
</tr>
<tr>
<td>1: Disorganised / unstructured consultation</td>
<td>4.2%</td>
</tr>
<tr>
<td>13: Poor active listening skills and use of cues. Consulting may appear formulaic, and lacks fluency</td>
<td>4.2%</td>
</tr>
<tr>
<td>12: Does not appear to develop rapport or show awareness of patient's agenda, health beliefs and preferences</td>
<td>3.6%</td>
</tr>
<tr>
<td>11: Does not attempt to promote good health at opportune times in the consultation</td>
<td>1.8%</td>
</tr>
</tbody>
</table>

### Non-UK Graduates

**N = 14,092 candidate-cases**

<table>
<thead>
<tr>
<th>Feedback Statement</th>
<th>Percentage of all cases seen</th>
</tr>
</thead>
<tbody>
<tr>
<td>7: Does not develop a management plan reflecting knowledge of current best practice</td>
<td>19.8%</td>
</tr>
<tr>
<td>2: Does not recognise the issues or priorities in the consultation</td>
<td>16.1%</td>
</tr>
<tr>
<td>15: Does not develop a shared management plan, demonstrating an ability to work in partnership with the patient</td>
<td>13.8%</td>
</tr>
<tr>
<td>13: Poor active listening skills and use of cues. Consulting may appear formulaic, and lacks fluency</td>
<td>13.5%</td>
</tr>
<tr>
<td>16: Does not use language and/or explanations that are relevant and understandable to the patient</td>
<td>12.9%</td>
</tr>
<tr>
<td>10: Does not demonstrate an awareness of management of risk or make the patient aware of relative risks of different options</td>
<td>11.4%</td>
</tr>
<tr>
<td>3: Shows poor time management</td>
<td>10.9%</td>
</tr>
<tr>
<td>8: Does not show appropriate use of resources, including aspects of budgetary governance</td>
<td>10.4%</td>
</tr>
<tr>
<td>1: Disorganised / unstructured consultation</td>
<td>10.1%</td>
</tr>
<tr>
<td>4: Does not identify abnormal findings or results or fails to recognise their implications</td>
<td>9.8%</td>
</tr>
<tr>
<td>6: Does not make the correct working diagnosis or identify an appropriate range of differential possibilities</td>
<td>9.4%</td>
</tr>
<tr>
<td>12: Does not appear to develop rapport or show awareness of patient's agenda, health beliefs and preferences</td>
<td>9.4%</td>
</tr>
<tr>
<td>14: Does not identify or use appropriate psychological or social information to place the problem in context</td>
<td>8.5%</td>
</tr>
<tr>
<td>9: Does not make adequate arrangements for follow-up and safety-netting</td>
<td>7.6%</td>
</tr>
<tr>
<td>5: Does not undertake physical examination competently, or use instruments proficiently</td>
<td>6.8%</td>
</tr>
<tr>
<td>11: Does not attempt to promote good health at opportune times in the consultation</td>
<td>2.5%</td>
</tr>
</tbody>
</table>
5: Overview, Inter-component Statistics and Analytical Statistics of Test Quality

Overview of pass-rates in AKT and CSA by Protected Characteristics and source of PMQ

The following table summarises data from elsewhere in this report, bringing together crude pass rates of AKT and CSA candidates on their first attempt by ‘protected characteristics’ (as defined by the Equality Act (2010) and as then collected by the RCGP), also by source of their primary medical qualification. Please recall an earlier warning that many of these variables are confounded.

<table>
<thead>
<tr>
<th>Protected Characteristic &amp; Source</th>
<th>Sub-Group</th>
<th>Applied Knowledge Test</th>
<th>Clinical Skills Assessment</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>N sitting</td>
<td>N passing</td>
</tr>
<tr>
<td>Sex</td>
<td>Male</td>
<td>1043</td>
<td>816</td>
</tr>
<tr>
<td></td>
<td>Female</td>
<td>1965</td>
<td>1648</td>
</tr>
<tr>
<td>Race*</td>
<td>BME</td>
<td>1175</td>
<td>821</td>
</tr>
<tr>
<td></td>
<td>White</td>
<td>1735</td>
<td>1562</td>
</tr>
<tr>
<td>PMQ Source</td>
<td>UK Graduate</td>
<td>2582</td>
<td>2344</td>
</tr>
<tr>
<td></td>
<td>IMG</td>
<td>426</td>
<td>220</td>
</tr>
<tr>
<td>Disability</td>
<td>Reported</td>
<td>116</td>
<td>96</td>
</tr>
<tr>
<td></td>
<td>None reported</td>
<td>2889</td>
<td>2358</td>
</tr>
<tr>
<td>All Candidates</td>
<td></td>
<td>3008</td>
<td>2464</td>
</tr>
</tbody>
</table>

* plus 98 unstated for AKT and 74 unstated for CSA

Inter-component Statistics

Currently it is only possible to make comparisons between the performance of candidates between the AKT and the CSA, as the Workplace-Based Assessment data are not readily accessible for comparative analysis. Most candidates make their first attempt at the AKT in ST2 and at the CSA in the middle of ST3.

The accompanying scatterplot is the most recent analysis from these datasets showing the relationship between the AKT and CSA scores of 2050 candidates taking each component for the first time, the AKT in 2013-14 and the CSA in 2014-2015. Overall, the correlation between the two is 0.52 (cf last year 0.53), suggesting shared variance of 27%. The chart contrasts UK and non-UK graduates’ performance: the relationship between the two scores is similar for the two groups: UKG r = 0.40, r² = 0.16; IMG r = .44, r² = 0.19.
Test Quality Information: AKT

For the diets of the AKT, the reliability, as evidenced by the alpha coefficient, and the accuracy, indicated by the measurement error estimate, or SEM, is straightforwardly calculated. Occasionally, underperforming items need to be removed from the calculated scores, but this has not taken place in 2014-15 (or at all, recently). Current and recent quality statistics are shown in the accompanying table.

These psychometric quality indicators continue to describe a multi-choice assessment which is performing to an excellent standard.

<table>
<thead>
<tr>
<th>AKT Diet</th>
<th>No of Items removed</th>
<th>Alpha Coefficient</th>
<th>SEM</th>
</tr>
</thead>
<tbody>
<tr>
<td>2011: October</td>
<td>0</td>
<td>0.91</td>
<td>2.8 %</td>
</tr>
<tr>
<td>2012: February</td>
<td>0</td>
<td>0.89</td>
<td>2.8 %</td>
</tr>
<tr>
<td>2012: April</td>
<td>1</td>
<td>0.92</td>
<td>2.9 %</td>
</tr>
<tr>
<td>2012: October</td>
<td>1</td>
<td>0.89</td>
<td>2.8 %</td>
</tr>
<tr>
<td>2013: January</td>
<td>0</td>
<td>0.92</td>
<td>2.9 %</td>
</tr>
<tr>
<td>2013: May</td>
<td>0</td>
<td>0.90</td>
<td>2.9 %</td>
</tr>
<tr>
<td>2013: October</td>
<td>0</td>
<td>0.90</td>
<td>2.8 %</td>
</tr>
<tr>
<td>2014: January</td>
<td>0</td>
<td>0.90</td>
<td>2.7 %</td>
</tr>
<tr>
<td>2014: April</td>
<td>0</td>
<td>0.90</td>
<td>2.9 %</td>
</tr>
<tr>
<td>2014: October</td>
<td>0</td>
<td>0.90</td>
<td>2.8 %</td>
</tr>
<tr>
<td>2015: January</td>
<td>0</td>
<td>0.90</td>
<td>2.7 %</td>
</tr>
<tr>
<td>2015: April</td>
<td>0</td>
<td>0.90</td>
<td>2.8 %</td>
</tr>
</tbody>
</table>

Test Quality Information: CSA

Estimating and representing the reliability of a clinical test of the form of the CSA is more difficult using classical psychometric test theory. In a multi-choice test such as the AKT, all the candidates have to respond to all the test items, which are exactly the same for everyone (1200+ candidates/diet). The ‘items’ (stations or cases) in the CSA are only the same for a day at a time (max 78 candidates), and indeed there are different sets of examiners on each of the three circuits—so there is only exact comparability for 26 candidates.

This is of course not at all unusual in a high stakes clinical test, where a variety of imperatives conflict—eg item consistency vs test security and fairness. The number taking the CSA moreover varies considerably between diets.

Thus the quality of the CSA is monitored qualitatively as well as quantitatively, the latter at a number of levels of detail with different objectives—but with reliability and fairness always foremost in mind. Qualitative monitoring involves 1½-hour-long examiner, role-player and case standardization sessions at the beginning of each day, live monitoring of examiners and role-players, and explicit ongoing examiner monitoring and training.

Reliability (eg an alpha coefficient) is explored with reference to both days and circuits, towards case, palette and examiner monitoring and development. Daily alpha coefficients—probably something which it is fair to assess, combining circuits across examiners—give a reasonable indication of reliability, but they are also very dependent on the variance in candidate ability. And analyses show that the range and variance in ability of candidate groups can vary greatly day on day, despite administrative measures towards harmonisation: here, ability can be estimated not just from a rather self-fulfilling analysis of CSA performance, but by looking at predictive surrogates (eg degree origin) and correlates (eg AKT performance). Finally, the alpha coefficient is estimated on the basis of scores which have relatively limited variance (0-9 on a case, currently), tending to minimise the values.
As a result, the test measurement error, indicated by the standard error of measurement, may be a more appropriate overall indicator of quality.

That said, current and recent quality statistics – alpha and the SEm – appear in the table below.

<table>
<thead>
<tr>
<th>Academical Year</th>
<th>No of Cases (stations) in CSA</th>
<th>Alpha: range across days</th>
<th>Average alpha across days</th>
<th>SEm: range across days</th>
<th>Average SEm across days</th>
</tr>
</thead>
<tbody>
<tr>
<td>2010-2011</td>
<td>13</td>
<td>0.64 – 0.86</td>
<td>0.77</td>
<td>5.2% - 5.4%</td>
<td>5.2%</td>
</tr>
<tr>
<td>2011-2012</td>
<td>13</td>
<td>0.64 – 0.86</td>
<td>0.77</td>
<td>4.5% - 5.6%</td>
<td>5.1%</td>
</tr>
<tr>
<td>2012-2013</td>
<td>13</td>
<td>0.64 – 0.87</td>
<td>0.78</td>
<td>4.3% - 5.4%</td>
<td>5.0%</td>
</tr>
<tr>
<td>2013-2014</td>
<td>13</td>
<td>0.56 – 0.85</td>
<td>0.74</td>
<td>4.4% - 5.6%</td>
<td>4.9%</td>
</tr>
<tr>
<td>2014-2015</td>
<td>13</td>
<td>0.55 – 0.85</td>
<td>0.72</td>
<td>4.4% - 5.2%</td>
<td>4.8%</td>
</tr>
</tbody>
</table>

* * *