

# Notes from the briefing presentation from Fiona Patterson & Richard Wakeford to the RCGP/NOSA Assessment Group on Wed July 11<sup>th</sup> 2007

## Assessment in the JAFM Residency Programme

Japanese Academy of Family Medicine  
Workshop: Tokyo - September 2<sup>nd</sup> 2007

JAFM  
Sept 07



Richard Wakeford MA CPsychol FRCGP (Hon)  
Cambridge Assessment and Quality Assurance Associates  
Fellow of Hughes Hall - Assessment Consultant



## Outline

- Examinations: what do you need (outline)?
- Content and Curriculum
- What testing methods might you use?
  - Principles
  - Types of assessment
- The JAFM Situation
  - Core Values to reflect in its Assessments
- Bringing test content to the method
  - Blueprinting
- Recommendations
  - To start with
  - Longer-term aims

JAFM  
Sept 07



Richard Wakeford MA CPsychol FRCGP (Hon)  
Cambridge Assessment and Quality Assurance Associates  
Fellow of Hughes Hall - Assessment Consultant



## Richard Wakeford MA CPsychol

- Educational Adviser, School of Clinical Medicine, Cambridge University
- Fellow of Hughes Hall (*a Cambridge University "College"*)
- Consultant in Assessment and Psychometrics, eg:
  - Royal Colleges of Surgeons - Dental Examinations
  - Royal College of General Practitioners
  - Royal College of Psychiatrists
  - Royal College of Pathologists
  - PMETB
- Course Organiser, Huntingdon GP VTS

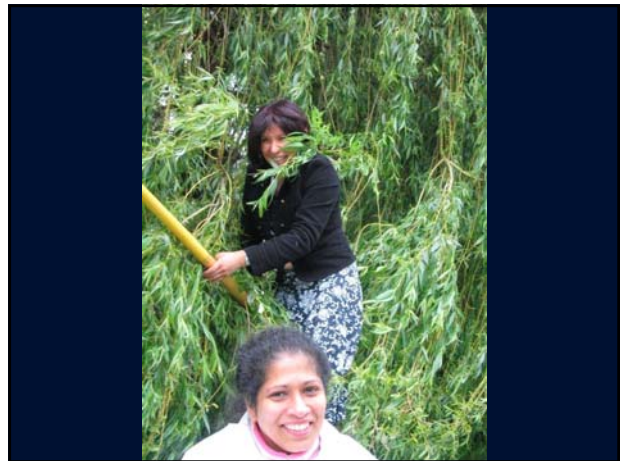
JAFM  
Sept 07



Richard Wakeford MA CPsychol FRCGP (Hon)  
Cambridge Assessment and Quality Assurance Associates  
Fellow of Hughes Hall - Assessment Consultant



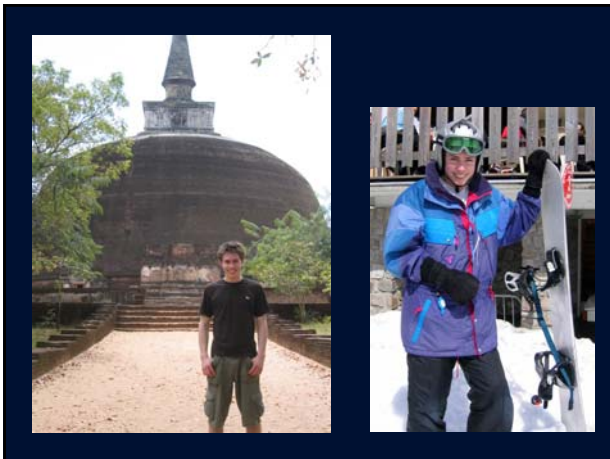
**Notes from the briefing presentation from Fiona Patterson & Richard Wakeford to the RCGP/NOSA Assessment Group on Wed July 11<sup>th</sup> 2007**



Notes from the briefing presentation from Fiona Patterson & Richard Wakeford to the RCGP/NOSA Assessment Group on Wed July 11<sup>th</sup> 2007



# Notes from the briefing presentation from Fiona Patterson & Richard Wakeford to the RCGP/NOSA Assessment Group on Wed July 11<sup>th</sup> 2007



## Assessment in the JAFM Residency Programme

Japanese Academy of Family Medicine  
Workshop: Tokyo - September 2<sup>nd</sup> 2007

JAFM  
Sept 07



Richard Wakeford MA CPsychol FRCGP (Hon)  
Cambridge Assessment and Quality Assurance Associates  
Fellow of Hughes Hall - Assessment Consultant



## Assessment in the JAFM Residency Programme

### How should we prepare to conduct the JAFM's qualifying examinations in 2010 ?

Japanese Academy of Family Medicine  
Workshop: Tokyo - September 1<sup>st</sup> 2007

JAFM  
Sept 07



Richard Wakeford MA CPsychol FRCGP (Hon)  
Cambridge Assessment and Quality Assurance Associates  
Fellow of Hughes Hall - Assessment Consultant



## But first, what are your learning needs about assessment and examinations for the JAFM?

- In your groups, take 5 minutes to identify the most important question about examinations (and assessing senior FM residents) that you would like answering?

We will try to cover as many areas in the talk as possible!

JAFM  
Sept 07



Richard Wakeford MA CPsychol FRCGP (Hon)  
Cambridge Assessment and Quality Assurance Associates  
Fellow of Hughes Hall - Assessment Consultant



## Outline

- Examinations: what do you need (outline)?
- Content and Curriculum
- What testing methods might you use?
  - Principles
  - Types of assessment
- The JAFM Situation
  - Core Values to reflect in its Assessments
- Bringing test content to the method
  - Blueprinting
- Recommendations
  - To start with
  - Longer-term aims

JAFM  
Sept 07



Richard Wakeford MA CPsychol FRCGP (Hon)  
Cambridge Assessment and Quality Assurance Associates  
Fellow of Hughes Hall - Assessment Consultant



## Examinations - what do you need ?

- Teachers:
  - with commitment and a vision for FM
- A philosophy:
  - a set of values for FM and training
- A curriculum (= what will be learned)
  - a syllabus (= what will/may be tested)
- Testing approaches and methods
- Test content

JAFM  
Sept 07

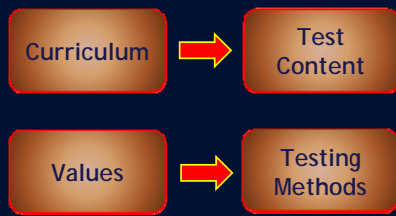


Richard Wakeford MA CPsychol FRCGP (Hon)  
Cambridge Assessment and Quality Assurance Associates  
Fellow of Hughes Hall - Assessment Consultant

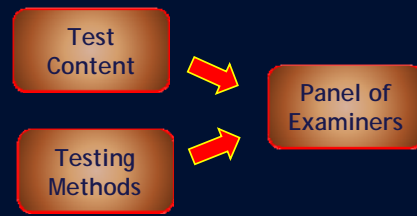


# Notes from the briefing presentation from Fiona Patterson & Richard Wakeford to the RCGP/NOSA Assessment Group on Wed July 11<sup>th</sup> 2007

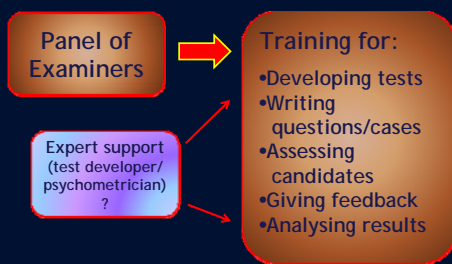
## Examinations - what do you need ?



## Examinations - what do you need ?



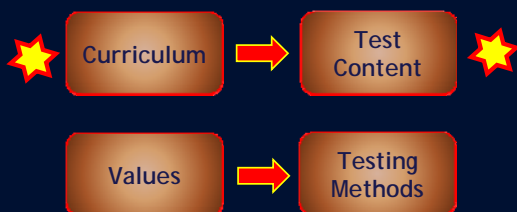
## Examinations - what do you need ?



## Examinations - fundamental needs

- Test Content
- Test Methods
- Trained Examiners

## What will be the exam's content?



## What will the assessments cover?

- Curriculum for Family Medicine
- Assessment will inevitably cover:
  - Knowledge *and* application of knowledge
  - Skills - cognitive (eg problem-solving) and psychomotor
  - Attitudes and Values
- .. and it will have formative as well as summative intentions

# Notes from the briefing presentation from Fiona Patterson & Richard Wakeford to the RCGP/NOSA Assessment Group on Wed July 11<sup>th</sup> 2007

## Where do curricula come from?

- Ideally, job analyses of family physicians
- Hard if they don't exist or differ!
- From the heads of outside or inside experts?
- Probably:
  - Initially borrowed, argued about, adapted
  - Later devised from your own experts

## New MRCGP Curriculum

<http://www.rcgp-curriculum.org.uk/>

Royal College of General Practitioners - RCGP Curriculum Site

Where you are now: RCGP Curriculum Home > Curriculum Documents

RCGP Curriculum Documents RCGP - GP Curriculum Documents

Welcome to the GP Curriculum Documents section. From here you can access the GP Curriculum statements themselves as well as other useful documents produced by the RCGP to support the GP Curriculum.

RCGP Curriculum at a glance...

- 1. GP Curriculum Statements
- 2. PIRE10 Submission Statements
- 3. RCGP - GP Curriculum
- 4. RCGP - GP Curriculum
- 5. RCGP - GP Curriculum
- 6. RCGP - GP Curriculum
- 7. RCGP - GP Curriculum
- 8. RCGP - GP Curriculum
- 9. RCGP - GP Curriculum
- 10. RCGP - GP Curriculum

Useful Information

The RCGP Curriculum for General Practice: Learning and Teaching Guide. This guide will help you navigate the GP Curriculum.

PIRE10 Submission Documents

The original PIRE10 submission documents are available.



An RCGP Publication

### The Condensed Curriculum Guide for GP Training and the New MRCGP

Authors: Ben Riley, Jayne Haynes, Steve Field  
Price: £15.00 • ISBN: 9780850843163

The official guide to the new RCGP curriculum and the new MRCGP for all trainee GPs, trainers and educators

The Condensed Curriculum Guide is the official and essential companion to the new RCGP Curriculum for Specialty Training for General Practice, covering the knowledge, skills and attitudes that every GP specialty registrar must now master to become an effective doctor in general practice.

This invaluable book:

- makes the curriculum accessible by condensing it into its core educational material, providing practical guidance on how to learn and teach it
- explains how to successfully complete the new MRCGP providing essential information on how the 'new' assessments, work and practical advice on how candidates can best prepare
- summarises each of the 32 curriculum statements and identifies the key knowledge and skills required for each area of general practice
- provides a comprehensive checklist for those learning or teaching the GP Curriculum
- takes a pragmatic approach, pointing readers towards useful sources of information and giving useful tips on learning in everyday practice situations
- offers invaluable advice on learning all aspects of general practice, including:
  - the core competencies of being a GP
  - the consultation
  - professional and ethical standards
  - evidence-based medicine
  - patient safety
  - practice management
  - the diagnosis and treatment of everyday clinical problems in primary care.

This book is essential reading for:

- GP specialty registrars
- associates in training
- GP trainee tutors
- stroke programmes
- VTI programme directors
- GP educators

Only your copy today for as little as £13.99!

[www.rcgp.org.uk/acatalog](http://www.rcgp.org.uk/acatalog)

Promoting Excellence in Family Medicine

Contents:

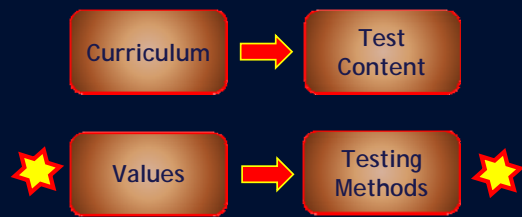
**Part 1 - The Curriculum Guide**

1. Introducing the curriculum
2. Understanding the curriculum
3. Learning the curriculum
4. Teaching the curriculum
5. Succeeding at the new MRCGP

**Part 2 - The Condensed Curriculum**

6. The core competencies
7. The essential knowledge
8. Appendix 1: curriculum domains grid for planning learning activities
9. Appendix 2: common GP topics mapped to the relevant curriculum statements

## What testing methods are there?



## Best Practice Assessment Procedures

- Multiple Choice and similar Questions (MCQ)
- Short Essay Written Questions (SAQ)
- Assessment based in the Workplace (WBA)
- Log diaries of experiences and reflections (Logs)
- Review of Videos of Trainees' Consultations
- Case-based Discussions (CBD)
- "OSCE"-type assessments of consultation skills
- Not, probably, long traditional oral exams

## Some assessment principles

- Exercise for the Whole Group, working as individual "Examiners"
- Please get a small piece of paper and get ready to write a mark on it
- When given the task, please do it in silence and privately from those around you - no cheating!
- Then fold your mark paper and await further instructions

# Notes from the briefing presentation from Fiona Patterson & Richard Wakeford to the RCGP/NOSA Assessment Group on Wed July 11<sup>th</sup> 2007

Working individually as examiners,  
give this student a mark out of 10

Question:

"Multiply 269 by 63"

Answer:

$$\begin{array}{r} 269 \\ \times 63 \\ \hline 807 \\ 16040 \\ \hline 16847 \end{array}$$

JAFM  
Sept 07



Richard Wakeford MA CPsychol FRCGP (Hon)  
Cambridge Assessment and Quality Assurance Associates  
Fellow of Hughes Hall - Assessment Consultant



## Multiplication marks

- What issues are raised by this exercise?

5 minutes in groups

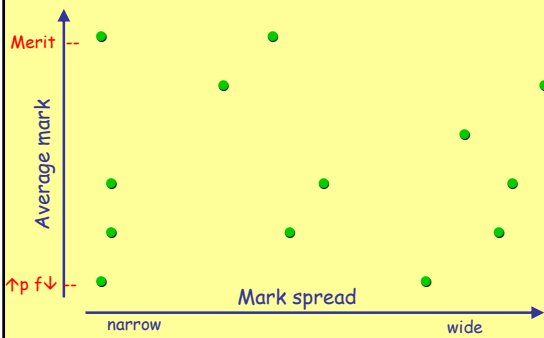
JAFM  
Sept 07



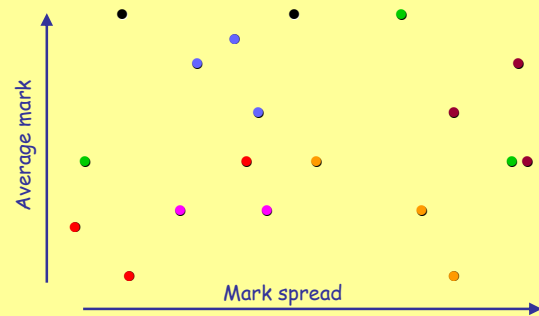
Richard Wakeford MA CPsychol FRCGP (Hon)  
Cambridge Assessment and Quality Assurance Associates  
Fellow of Hughes Hall - Assessment Consultant



## Different examiners marking the same short-answer exam scripts



## Examiners marking different papers from different students on different occasions



Hawks  
Doves  
Outliers

JAFM  
Sept 07



Richard Wakeford MA CPsychol FRCGP (Hon)  
Cambridge Assessment and Quality Assurance Associates  
Fellow of Hughes Hall - Assessment Consultant



# Notes from the briefing presentation from Fiona Patterson & Richard Wakeford to the RCGP/NOSA Assessment Group on Wed July 11<sup>th</sup> 2007



## Two key issues for an assessment procedure

- Clear and agreed function for the assessment method
- Make the grading as independent as possible of individual examiner effect

JAFM  
Sept 07



Richard Wakeford MA CPsychol FRCGP (Hon)  
Cambridge Assessment and Quality Assurance Associates  
Fellow of Hughes Hall – Assessment Consultant



## Useful Types of Questions

## Best Practice Assessment Procedures

- Multiple Choice and similar Questions (MCQ)
- Short Essay Written Questions (SAQ)
- Assessment based in the Workplace (WBA)
- Log diaries of experiences and reflections (Logs)
- Review of Videos of Trainees' Consultations
- Case-based Discussions (CBD)
- "OSCE"-type assessments of consultation skills
- Not, probably, long traditional oral exams

JAFM  
Sept 07



Richard Wakeford MA CPsychol FRCGP (Hon)  
Cambridge Assessment and Quality Assurance Associates  
Fellow of Hughes Hall – Assessment Consultant



JAFM  
Sept 07



Richard Wakeford MA CPsychol FRCGP (Hon)  
Cambridge Assessment and Quality Assurance Associates  
Fellow of Hughes Hall – Assessment Consultant



## Multiple Choice Questions - MCQs

- Single best answer (best of five)  
A statement followed by a number of items, only ONE of which is correct

## Example of Single Best Answer

The way to a man's heart is-

- A. Through his aorta
- B. Down the Expressway and off at junction 4
- C. Through his pulmonary arteries
- D. Through his pulmonary veins
- E. Through his stomach *via* his bento box

JAFM  
Sept 07



Richard Wakeford MA CPsychol FRCGP (Hon)  
Cambridge Assessment and Quality Assurance Associates  
Fellow of Hughes Hall – Assessment Consultant



JAFM  
Sept 07



Richard Wakeford MA CPsychol FRCGP (Hon)  
Cambridge Assessment and Quality Assurance Associates  
Fellow of Hughes Hall – Assessment Consultant





# Notes from the briefing presentation from Fiona Patterson & Richard Wakeford to the RCGP/NOSA Assessment Group on Wed July 11<sup>th</sup> 2007

## Short Answer Questions SAQs

GPs' responsibilities to partners, other health professionals and society

- "Reports from your patients have given you serious concerns about nursing standards in the local hospital. How might you respond?"  
[Question 6, October 2000] Group work

JAFM  
Sept 07



Richard Wakeford MA CPsychol FRCGP (Hon)  
Cambridge Assessment and Quality Assurance Associates  
Fellow of Hughes Hall – Assessment Consultant



## SAQ Example of marking schedule

- Danny aged 7 years is brought by his mother. The school says that he is badly behaved and she is concerned about his educational attainment. His teacher has suggested a hearing test.

Discuss your management.

Qn 11. Oct 2004

JAFM  
Sept 07



Richard Wakeford MA CPsychol FRCGP (Hon)  
Cambridge Assessment and Quality Assurance Associates  
Fellow of Hughes Hall – Assessment Consultant



## Marking constructs for Danny

- A-Information Gathering
- B- Relationships
- C-Examination, diagnosis ,differential diagnosis
- D-Management of this consultation
- E-Future management

JAFM  
Sept 07



Richard Wakeford MA CPsychol FRCGP (Hon)  
Cambridge Assessment and Quality Assurance Associates  
Fellow of Hughes Hall – Assessment Consultant



## Case Based Discussions

## CBD

currently used in a formative way in the UK

## Assessing Videos of Consultations

Making diagnoses/decisions

Insufficient evidence Needs further development Competent Excellent

Curriculum entry for Making diagnoses/decisions (Click to display)

# Notes from the briefing presentation from Fiona Patterson & Richard Wakeford to the RCGP/NOSA Assessment Group on Wed July 11<sup>th</sup> 2007

## Example of Video Criteria

Encourages the patient's contribution  
 Explore' patient's understanding about their health/condition  
 Places the complaint in psychosocial context

Needs further development  
 Competent  
 Excellent

JAFM  
 Sept 07



Richard Wakeford MA CPsychol FRCGP (Hon)  
 Cambridge Assessment and Quality Assurance Associates  
 Fellow of Hughes Hall – Assessment Consultant



## OSCE

Objective  
 Structured  
 Clinical  
 Examination

All candidates  
 do the same  
 tasks in rotation



## Clinical Skills Assessment - CSA

- State-of-the-art UK assessment of clinical competence
- High level "OSCE" format with 12+ cases
- Using simulated patients for every case
- Overall test length is approx 3 hrs
- Tests consultation and clinical skills

JAFM  
 Sept 07



Richard Wakeford MA CPsychol FRCGP (Hon)  
 Cambridge Assessment and Quality Assurance Associates  
 Fellow of Hughes Hall – Assessment Consultant



## CSA

Purpose :

"An assessment of a doctor's ability to integrate and apply clinical, professional, communication and practical skills appropriate for general practice."

JAFM  
 Sept 07



Richard Wakeford MA CPsychol FRCGP (Hon)  
 Cambridge Assessment and Quality Assurance Associates  
 Fellow of Hughes Hall – Assessment Consultant



## The CSA Circuit

- Each Candidate is allocated to a consulting room

Eg:



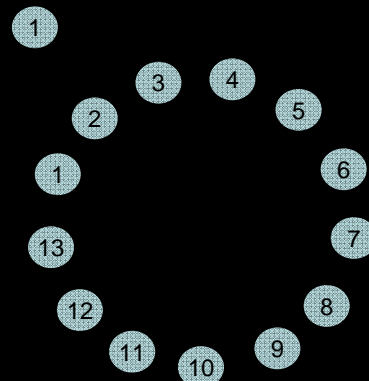
JAFM  
 Sept 07



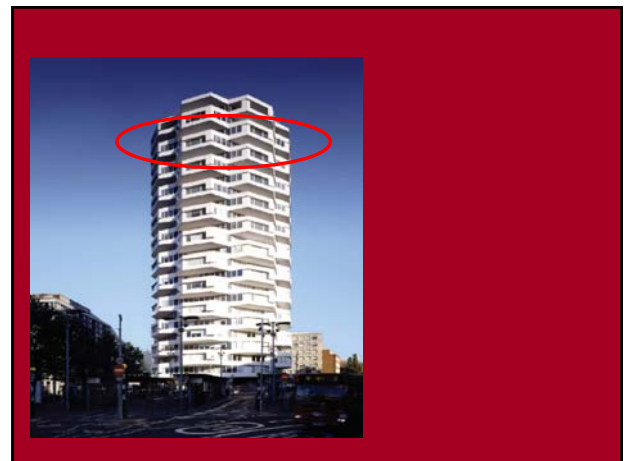
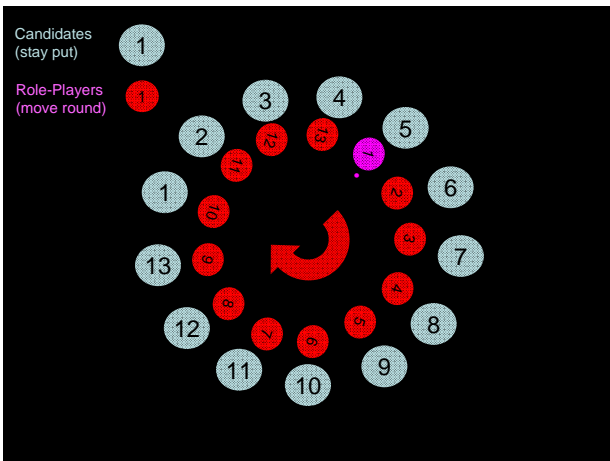
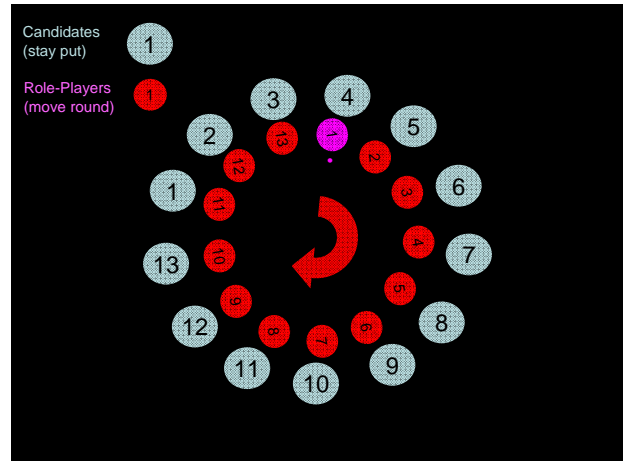
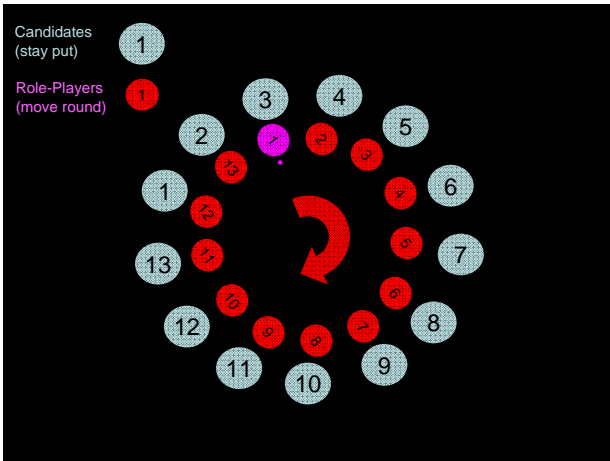
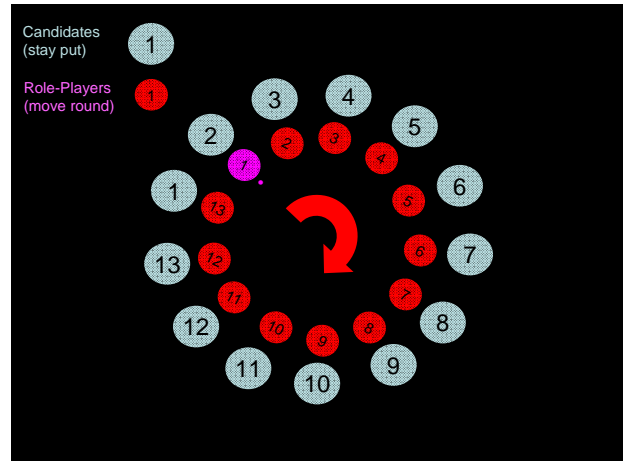
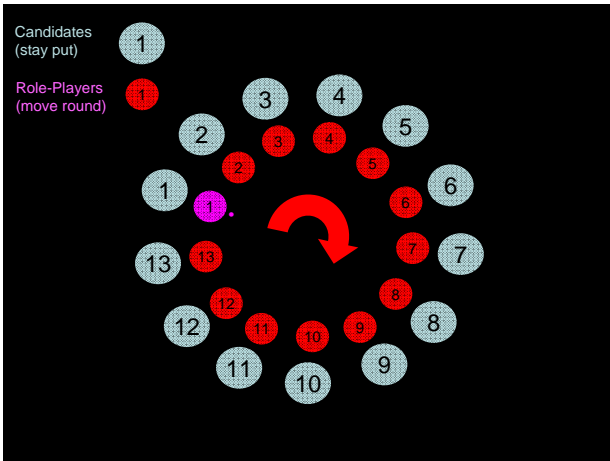
Richard Wakeford MA CPsychol FRCGP (Hon)  
 Cambridge Assessment and Quality Assurance Associates  
 Fellow of Hughes Hall – Assessment Consultant



Candidates  
 (stay put)

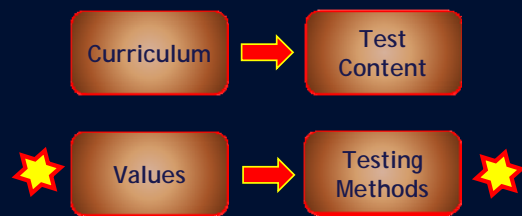


# Notes from the briefing presentation from Fiona Patterson & Richard Wakeford to the RCGP/NOSA Assessment Group on Wed July 11<sup>th</sup> 2007



# Notes from the briefing presentation from Fiona Patterson & Richard Wakeford to the RCGP/NOSA Assessment Group on Wed July 11<sup>th</sup> 2007

## Finding the right testing methods



## The JAFM Programme's Values

- Consultation Skills
- Holistic Approach - "the whole patient"
- Family and Community
- Preventive Medicine
- Solving undifferentiated patient presentations
- Use of Evidence-Based Medicine (EBM)

## Particular issues for the JAFM

- The Japanese specialty assessment context:
  - Emphasis on knowledge; respect for the know-ers
  - Traditions of testing - eg oral examination by prof.
- New specialty, needs to show high quality of successful trainees
- Need to concentrate assessment on core values
- Temper ambition with realism: need for trainees to qualify !
- Use current international best testing practice

## Bringing Content to the Method

- Blueprinting:
  - Ensuring that what you want to test is tested
  - Producing a representative test (not one based on the Professor's interests!)
  - Helps produce a **valid** assessment
- **Valid** assessments test appropriate things using appropriate methods
- **Reliable** assessments test consistently and produce results with predictive value

**MRCGP CSA BLUEPRINT FOR CASE SELECTION**  
(rev. by CSA Dyn Group 17<sup>th</sup> May 2007)

MAIN SYSTEM OR AREA OF DISEASE (1 target case of work)	PRIMARY NATURE OF PRESENTATION					
	Acute illness	Chronic illness	Undifferentiated illness	Psychological and Social	Preventive / Lifestyle	Other
Cancer & Palliative Care	4 or 5	3	1	2	1	0 or 1
Cardiovascular						
Drug Alcohol/Psychiatric						
Endocrine						
Eye/ ENT/ Skin						
Gastro-intestinal						
Genetic/Immunological						
Haematological						
Renal/urological						
Respiratory						
Women's/Man's health						
Other						

**CASE SELECTION CRITERIA BEYOND THE ABOVE: none**

- Gender mix: min 3 cases of each gender
- Diversity (in culture, disability, ethnicity, and sexual orientation): 1 case
- Age mix: 2 paediatric cases, 2 junior aged > 70
- Case frequency: maximum of 3 cases
- "Marker" Cases from previous day: 2 cases

## Examiners and their Training

- If possible, selection against task-related criteria (eg ability to mark essays consistently!)
- Train to perform the task/s
- Train to mark to the appropriate standard
- Ongoing monitoring of performance (eg video)
- Statistical analyses of "hawks" and "doves"
- Incompetent examiners will ruin your exam's reliability and reputation!

# Notes from the briefing presentation from Fiona Patterson & Richard Wakeford to the RCGP/NOSA Assessment Group on Wed July 11<sup>th</sup> 2007

MRCGP Panel of Examiners 2001 Saunton Sands



## Assessing which Values with which Method? Knowledge Skills Attitudes

Testing Methods	Core Values of JAFM for Assessment					
	Cons ult. Skills	Whole patient	Family & C'unity	Prevent. Med.	Undiff'd probs.	EBM
Multi-choice MCQ & EMQ						
Short essay Qs						
Workplace-based Assessments						
Logs						
Assessment of Trainees' Videos						
Case-based discussions						
OSCE Clinical Skills Exams						

## Assessing which Values with which Method? Knowledge Skills Attitudes

Testing Methods	Core Values of JAFM for Assessment					
	Cons ult. Skills	Whole patient	Family & C'unity	Prevent. Med.	Undiff'd probs.	EBM
Multi-choice MCQ & EMQ						
Short essay Qs						
Workplace-based Assessments						
Logs						
Assessment of Trainees' Videos						
Case-based discussions						
OSCE Clinical Skills Exams						

## Your task:

- Look at the list of “values” in the handout
- Think about how you might assess the first residents at the end of their FM programme
- How will each of your values be assessed?
- Where will knowledge, skills (cognitive and psychomotor) be assessed?
- What will your assessment system comprise?

JAFM  
Sept 07



Richard Wakeford MA CPsychol FRCGP (Hon)  
Cambridge Assessment and Quality Assurance Associates  
Fellow of Hughes Hall – Assessment Consultant



## Recommendations

- MCQ
- SEQ
- Log
- Formative videos
- ??
- Later .... a CSA

JAFM  
Sept 07



Richard Wakeford MA CPsychol FRCGP (Hon)  
Cambridge Assessment and Quality Assurance Associates  
Fellow of Hughes Hall – Assessment Consultant



## Reading that you may find helpful

### Annual Report on the MRCGP Examination

[http://www.rcgp.org.uk/the\\_gp\\_journey/mrcgp/annual\\_report\\_2006.aspx](http://www.rcgp.org.uk/the_gp_journey/mrcgp/annual_report_2006.aspx)

### ASME Booklet on Assessment

How to design a useful test: the principles of assessment

Lambert WT Schuwirth and Cees PM van der Vleuten

Association for the Study of Medical Education

[www.asme.org.uk](http://www.asme.org.uk)

### Paper on the Training of Examiners

How should paediatric examiners be trained?

N Khera, H Davies, T Lissauer, D Skuse, R Wakeford, J Stroobant

Archives of Diseases in Childhood 2005; 90: 43–47

Any paper on PMETB website: explore - [www.pmetb.org.uk](http://www.pmetb.org.uk)

JAFM  
Sept 07



Richard Wakeford MA CPsychol FRCGP (Hon)  
Cambridge Assessment and Quality Assurance Associates  
Fellow of Hughes Hall – Assessment Consultant

