

MRCP(UK) PACES 2010

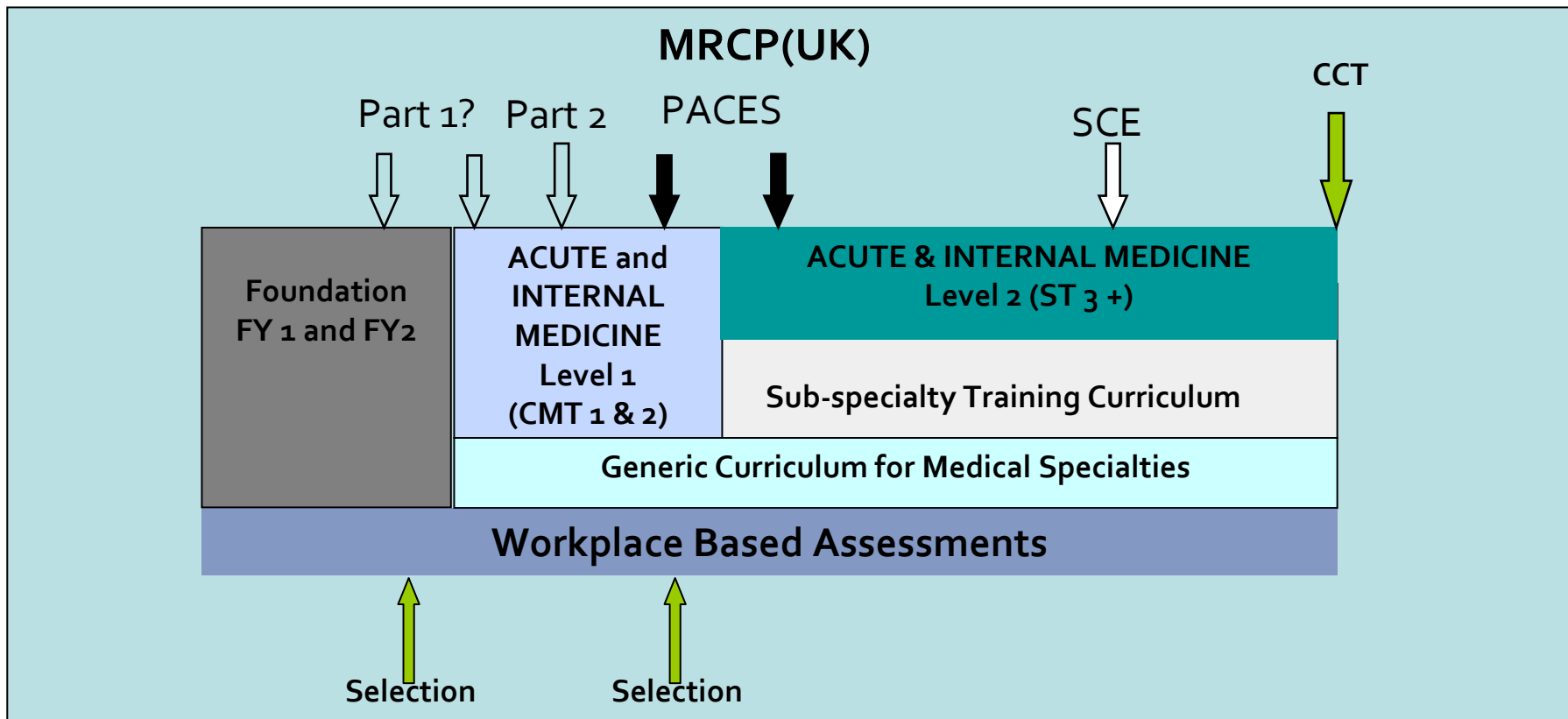
An update

Dr Andrew Elder

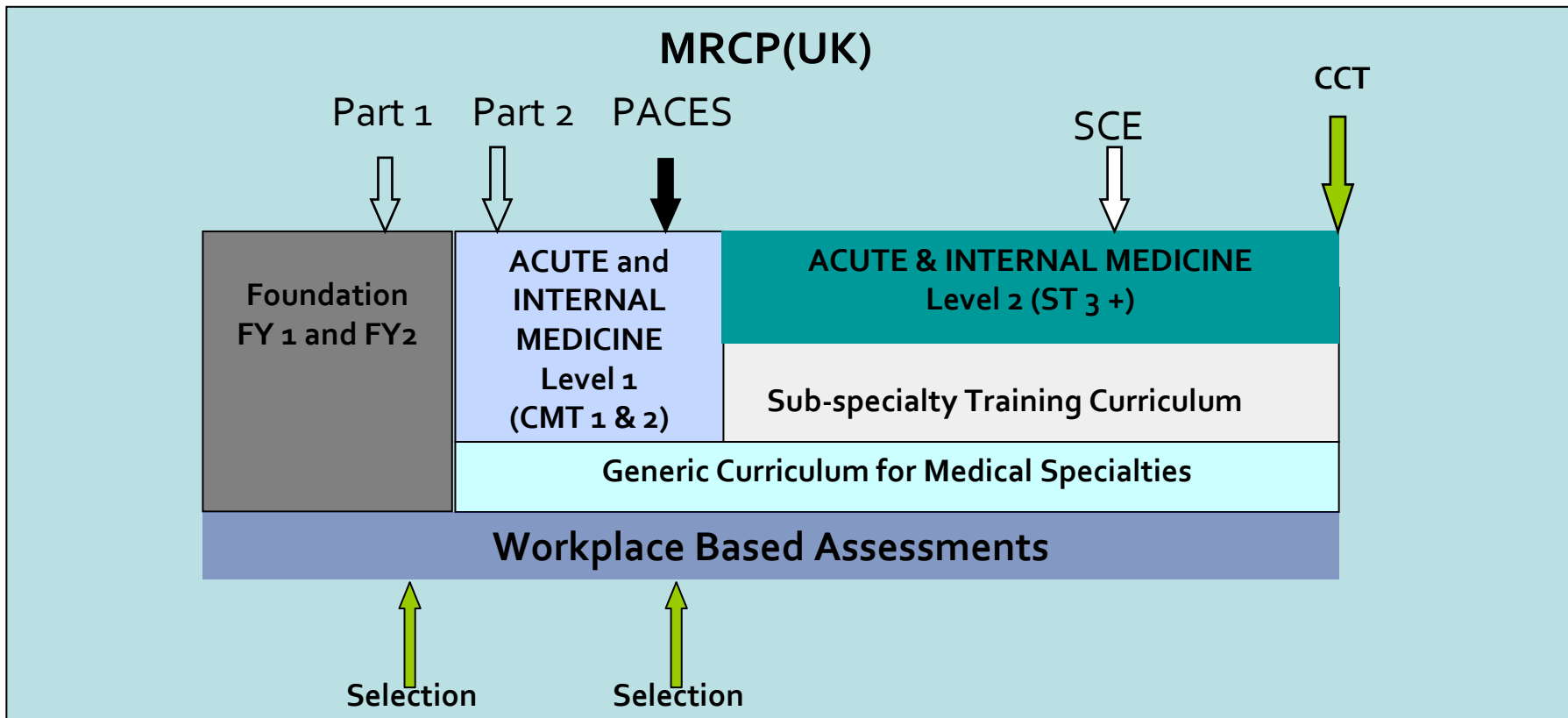
Parts 1 and 2

- No changes in format
- Pass rates stable
 - **Part 1:** UK 60% non UK 35%.
 - **Part 2:** UK 80% non UK 55%
- Content mapped to curricula
- Sampling methods developing
- “Test equating” permits comparison of performance across diets

Where does MRCP fit in?



Where MRCP fits in



MRCPUK(UK) progression

- FY2 pass rates in Part 1 are at least as good as the overall pass rate for UK graduates.
- Pass rates for candidates attempting PACES before they have passed Part 2 written are lower than those who have passed it.

MRCP(UK) progression

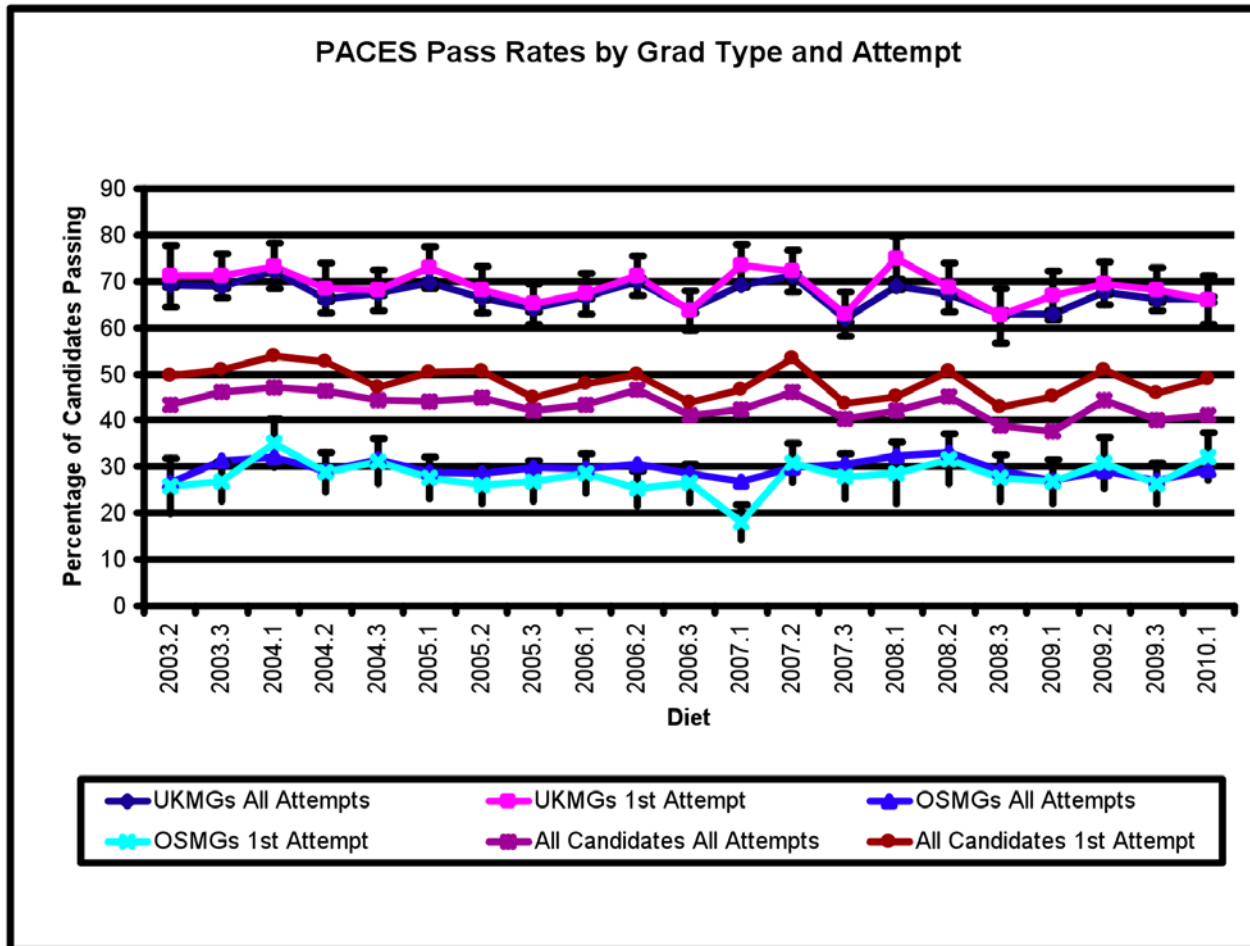
- Mean number of attempts for UK graduates in MRCP(UK) are
 - Part 1 1.7
 - Part 2 1.3
 - PACES 1.5
 - MRCP(UK) 4.5
- Current exam timetable allows a fail at each part (max. attempts 7) and candidate to be through the diploma before selection for specialty *provided they start early in FY2.*

Changes to PACES 2009

PACES - Where we are now

- 2009/3 diet
 - New marking methodology introduced
 - New Station 5 introduced
- All analyses of first two diets to date suggest stability of marking.
- *Pass rate stable*

PACES – pass rates



***nPACES
UKMGs first
attempt 138/172
= 69%***

Station 5

- Station 5 has high face validity
 - Most examiners feel content is now better
- Station 5 is “busy”
 - Examiner familiarity increasing
- Station 5 “scenario dependent”
 - Bank of well performing, “doable” scenarios.
- Station 5 contributes a lot of marks
 - Should it be down-weighted?

Weighting

Encounter	% total time	% total marks oPACES	% total marks nPACES	Ideal %
Respiratory	8			
Abdominal	8			
History	16			
CVS	8			
CNS	8			
C and E	16			
BCC 1	8			
BCC 2	8			

Weighting

Encounter	% total time	% total marks oPACES	% total marks nPACES	Ideal %
Respiratory	8	14		
Abdominal	8	14		
History	16	14		
CVS	8	14		
CNS	8	14		
C and E	16	14		
BCC 1	8	14		
BCC 2	8			

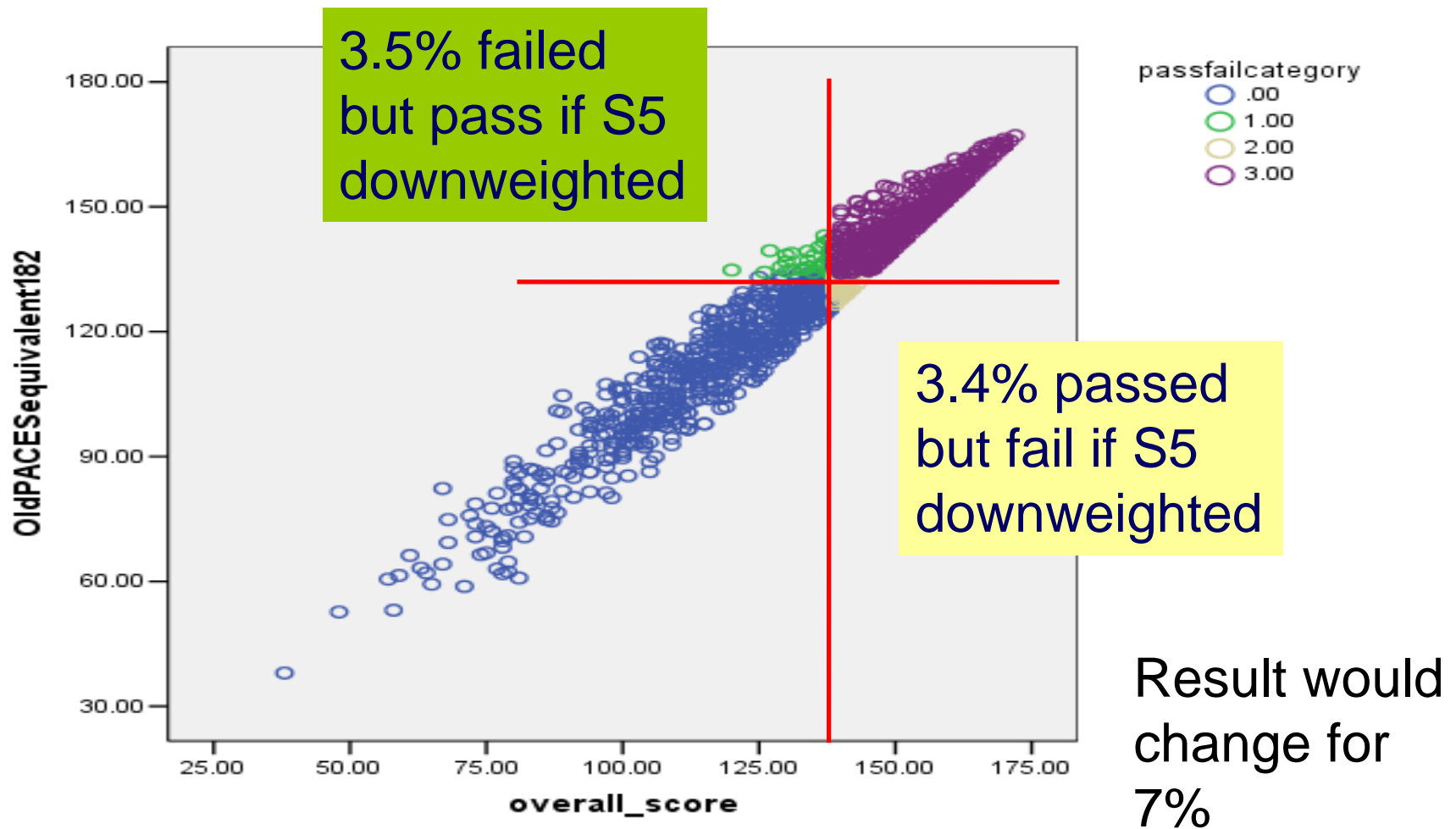
Weighting

Encounter	% total time	% total marks oPACES	% total marks nPACES	Ideal %
Respiratory	8	14	12	
Abdominal	8	14	12	
History	16	14	12	
CVS	8	14	12	
CNS	8	14	12	
C and E	16	14	9	
BCC 1	8	14	16	
BCC 2	8		16	

Weighting

Encounter	% total time	% total marks PACES	% total marks nPACES	Ideal %
Respiratory	8	14	12	?
Abdominal	8	14	12	?
History	16	14	12	?
CVS	8	14	12	?
CNS	8	14	12	?
C and E	16	14	9	?
BCC 1	8	14	16	?
BCC 2	8		16	?

Downweighting Station 5



Weighting

- Should any specific Encounter attract specific weighting?
- Should any specific Skill attract specific weighting?
 - Is the 2 marks for “Managing Patients Concerns” at Station 5 really equal to the 2 marks for the same skill at Station 4?

Previous PACES marksheet domains and scoring

		Skill Assessed ¹								
		Physical Exam	Identification and Interpretation of Physical Signs	Data Gathering in the interview	Interpretation and use of information gathered	Conduct of interview	Exploration and problem negotiation	Ethics and Law	Discussion related to the case	Overall judgement mark ³
1	RS	Assess	Assess						Assess	2-8
1	Abdo.	Assess	Assess						Assess	2-8
2	History			Assess	Assess				Assess	2-8
3	CVS	Assess	Assess						Assess	2-8
3	NS	Assess	Assess						Assess	2-8
4	Comm. Skills					Assess	Assess	Assess	Assess	2-8
5	Short Cases ²	-	-						-	2-8
	Total Mark ⁴									14-56

Which candidate really passed PACES?

	CLEAR FAIL	FAIL	PASS	CLEAR PASS	COMBINED MARK
1.Respiratory			X X		6 P
2.Abdomen			X X		6 P
3.History			X X		6 P
4.Cardiovascular		X	X		5 ?
5.Nervous system		X	X		5 ?
6.Communication			X X		6 P
7. Short cases			X X		6 P
Totals	0	2	12	0	40 F

	CLEAR FAIL	FAIL	PASS	CLEAR PASS	COMBINED MARK
1.Respiratory				X X	8 P
2.Abdomen		X	X		5 ?
3.History		X X			4 F
4.Cardiovascular		X X			4 F
5.Nervous system				X X	8 P
6.Communication		X X			4 F
7. Short cases				X X	8 P
Totals	0	7	1	6	41 P

Passing PACES

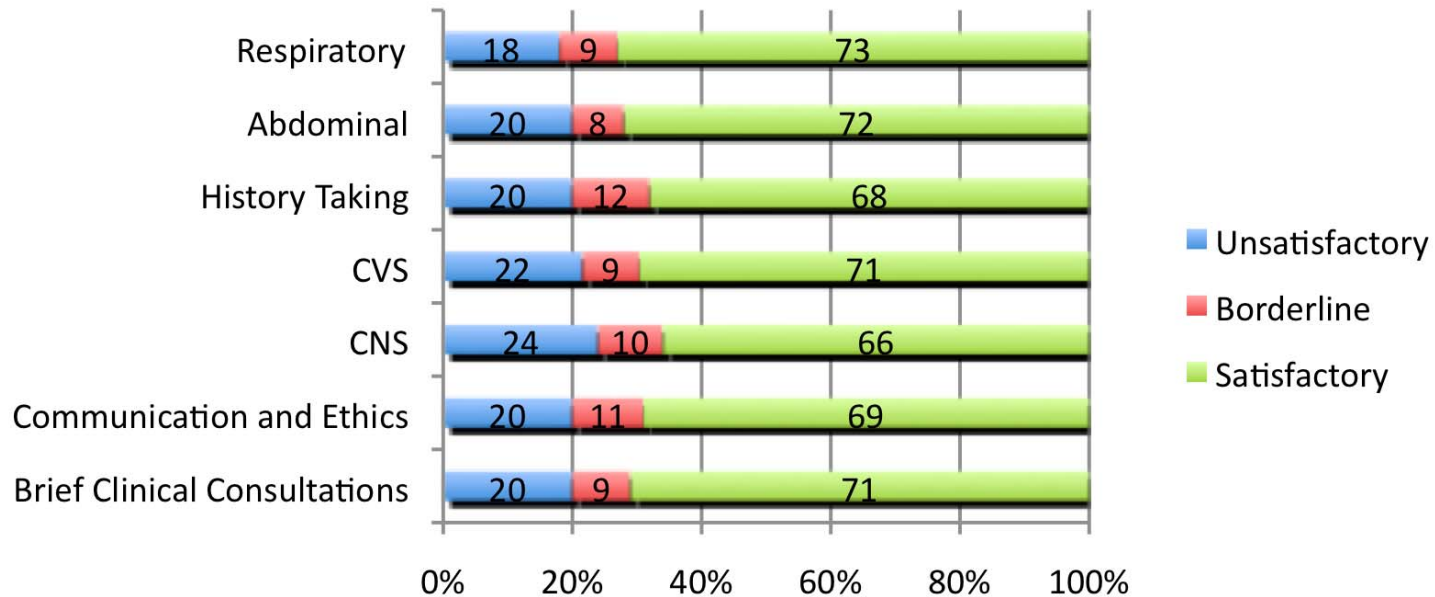
		Core Clinical Skill							
		A Physical Examination	B Identifying Physical signs	C Clinical Communication skills	D Differential Diagnosis	E Clinical Judgement	F Managing patients' concerns	G Maintaining Patient Welfare	Total Mark ²
1	Respiratory	Assessed	Assessed		Assessed	Assessed		Assessed	
1	Abdominal	Assessed	Assessed		Assessed	Assessed		Assessed	
2	History			Assessed	Assessed	Assessed	Assessed	Assessed	
3	Cardiovascular	Assessed	Assessed		Assessed	Assessed		Assessed	
3	Nervous System	Assessed	Assessed		Assessed	Assessed		Assessed	
4	Communication			Assessed		Assessed	Assessed	Assessed	
5	Brief Clinical Consultation 1	Assessed	Assessed	Assessed	Assessed	Assessed	Assessed	Assessed	
5	Brief Clinical Consultation 2	Assessed	Assessed	Assessed	Assessed	Assessed	Assessed	Assessed	
	Mark for each skill	0-24 ¹	0-24	0-16	0-28	0-32	0-16	0-32	0-172

Attain minimum required standard in each skill
 Current phase based on total test mark is transitional
 Aim to introduce seven skills system October 2010
 Pass marks for A-F in 55-60% range

A few results from the first diet

Grades by Encounter

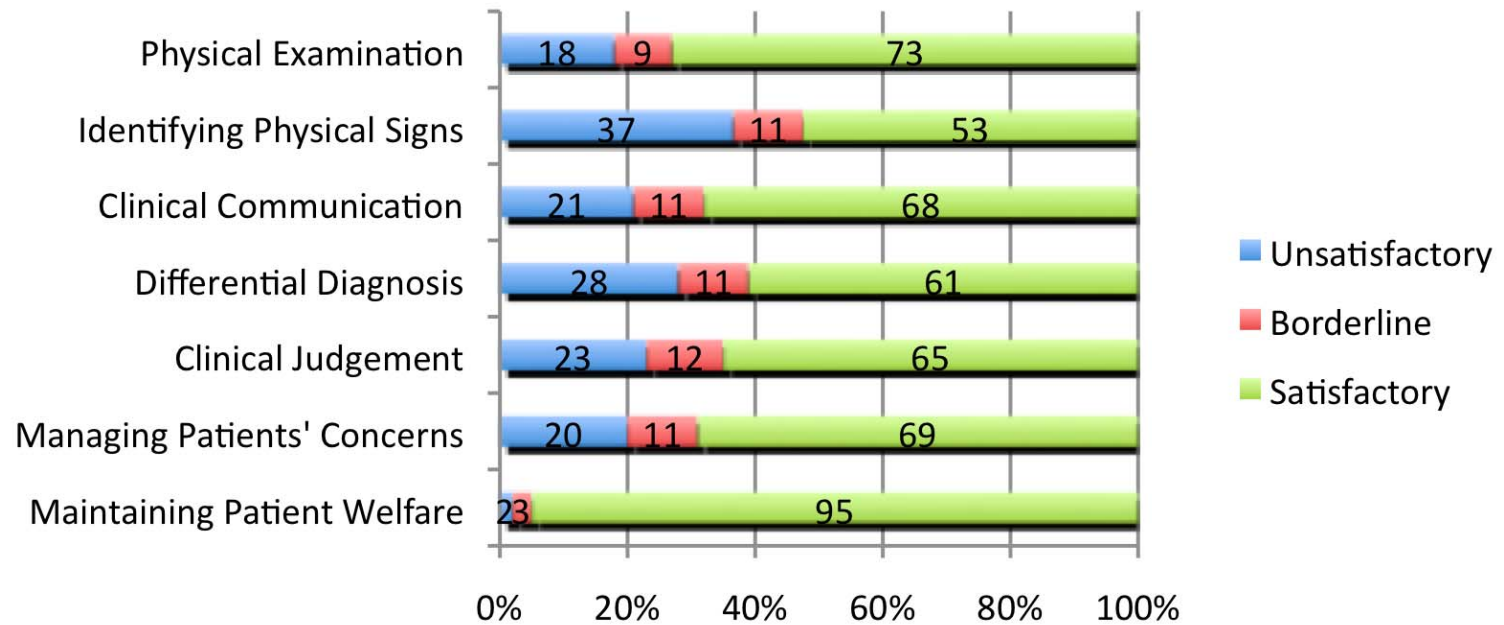
Figure 8 Grades by encounter All



N=1740

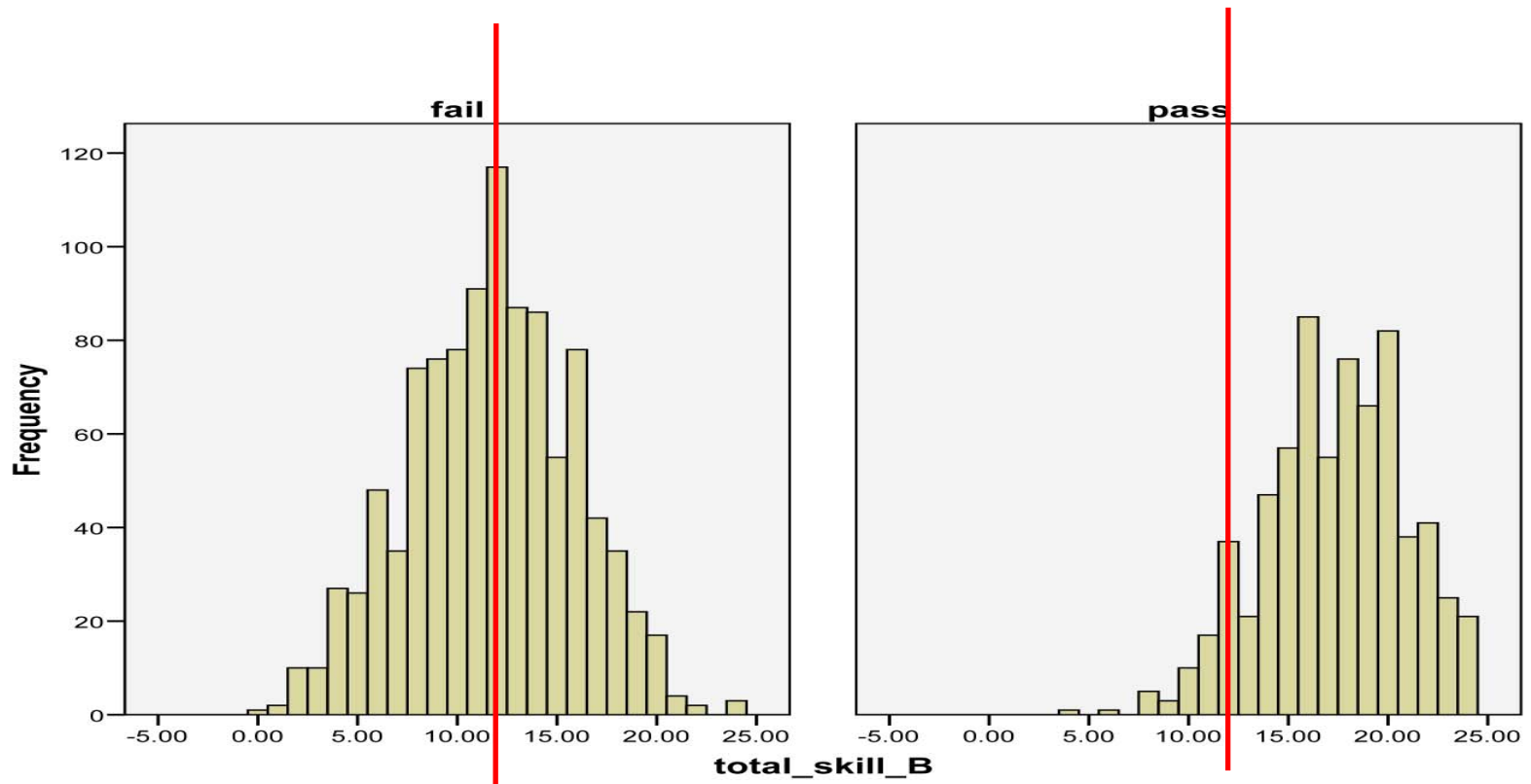
Grades by Skill

Figure 5 Grades by skill- All



N=1740

Mark Distribution – Passers and Failers - Skill B



Examiner Concordance (%)

Encounter	Agreement	1 mark Variation	2 mark variation
Respiratory	80	13	7
Abdominal	80	13	7
History Taking	77	16	7
Cardiovascular	80	13	7
Nervous System	79	13	8
Communication Skills	77	16	7
Brief Clinical Consultation 1	75	14	10
Brief Clinical Consultation 2	75	14	10

Skill	Agreement	1 mark Variation	2 mark variation
A Physical Examination	76	14	10
B Identifying Physical signs	75	16	9
C Clinical Communication	73	17	10
D Differential Diagnosis	74	17	9
E Clinical Judgement	72	18	10
F Managing Patients' Concerns	73	16	11
G Maintaining Patient Welfare	94	5	1

Other PACES work

- Feedback to trainees who fail
 - Skill based
- Feedback to proposers (supervisors) of those who fail.
- Examiner appointment, training, performance and accreditation
- Standardisation of delivery