

Medical Licensing Assessment (MLA) – clinical and professional skills assessment (CPSA) – GMC’s compliance decision

Bristol Medical School, University of Bristol

This document records the General Medical Council’s (GMC’s) decision* on whether an assessment provider† is compliant by meeting the clinical and professional skills assessment (CPSA) requirements annexed to the GMC’s MLA framework: [Assuring readiness for practice: a framework for the MLA](#).

Assessment provider	Bristol Medical School, University of Bristol
GMC’s decision	Complies with the CPSA requirements
Date of decision	2 November 2023

Legislation and guidance

The Medical Act 1983, as amended, gives the GMC the function of promoting high standards in, and co-ordinating all stages of, medical education. The Act requires‡ the GMC to:

- determine the extent of the knowledge and skill required to obtain a primary UK qualification (PMQ) and secure that the instruction given is sufficient to equip candidates with that knowledge and skill, and
- determine the standard of proficiency required from candidates during examinations leading to a UK PMQ and secure the maintenance of that standard.

Assuring readiness for practice: a framework for the MLA§ (the MLA framework) was first

* The decision is made by a GMC Assistant Registrar, under delegated authority from the Registrar to act as an MLA decision maker.

† Assessment provider: either a UK awarding body offering a primary medical qualification (PMQ) or the GMC as a provider of the MLA to international medical graduates.

‡ Sections 5(2)(a) and (b).

§ Issued by the Registrar under his powers set out in sections 5(2)(a) and (b) of the Act.

published in March 2021 and updated and reissued in November 2023. The MLA framework requires that, from the academic year 2024-25, a medical degree awarded by a UK university on the GMC's list of awarding bodies (the list) must include a pass in the MLA to be recognised as a PMQ.

The MLA framework stipulates that, from 1 May 2024, for a university to be able to be included in the list:

- medical degree programmes must include the MLA
- the MLA must have two parts – an applied knowledge test (AKT) and a clinical professional skills assessment (CPSA)
- each AKT must meet our AKT requirements
- each CPSA must meet our CPSA requirements
- the content of all AKTs and CPSAs must derive from the *MLA content map* and
- medical degree programmes must meet the GMC's published standards, requirements and outcomes relating to undergraduate medical education and training.

The AKT requirements, CPSA requirements and MLA content map are annexed to the MLA framework.

Compliance with the requirements must be maintained in order for an assessment provider's AKT and CPSA to count towards a candidate's MLA.

Compliance process

Assessment providers submitted a narrative and supporting evidence (the submission) to the GMC, seeking to show how their CPSA complies with and meets the requirements.

The GMC's CPSA reviewers* reviewed the submissions in teams of three and discussed them at meetings facilitated by the GMC MLA team.

The GMC MLA team sent requests for further information and clarifications to the assessment provider as required, based on the CPSA reviewers' initial review of the submission. These requests were to obtain the evidence necessary to finalise the CPSA reviewers' advice. They were not an indication of whether or not the assessment provider was considered to have met the CPSA requirements.

* GMC associates appointed following an open recruitment campaign for their expertise, experience and credibility in relation to assessment. All associates undertook bespoke Equality, Diversity and Inclusion (ED&I) training at the GMC before starting their role. Checks were completed for any conflicts of interest.

Moderation meetings* were held to ensure the CPSA reviewers had taken a consistent approach to considering the submissions.

The GMC MLA team prepared a compliance report containing the key features of the CPSA reviewers' advice, together with the reviewers' collective opinion on whether each requirement was, or was not, met. The compliance report also set out any changes to the assessment provider's CPSA that the reviewers advised the GMC should consider and any further information that should be provided in the next submission.

The compliance report was shared with the assessment provider to enable them to respond and to check for factual inaccuracies[†].

A copy of the compliance report containing advice to the GMC on the CPSA submission by Bristol Medical School, University of Bristol, including the assessment provider's response, is at Annex A.

Decision

GMC MLA decision maker's decision and reasons for decision

Documents considered in reaching decision

Please list the documents considered in reaching your decision – such as the compliance report, any response/s from the assessment provider, any further information or evidence you've requested, any guidance considered.

In reaching my decision I have considered the following documents:

- Bristol Medical School's ('the assessment provider') initial submission for their MLA CPSA (February 2022), and two supplementary submissions (July 2022 and September 2022 respectively)
- Compliance report containing CPSA reviewers' advice on CPSA for the assessment provider
- The assessment provider's response to CPSA reviewers' advice
- [Assuring readiness for practice: a framework for the MLA \(including annex C: Requirements for the Medical Licensing Assessment Clinical and Professional Skills Assessment\)](#)
- MLA decision maker guidance
- The GMC's conflict of interest policy

* Moderation meetings involved CPSA review team leaders and a lay associate, also appointed through open campaign and who had undertaken bespoke ED&I training at the GMC, providing the patient and public perspective.

[†] Any factual inaccuracies identified by the assessment provider were addressed and rectified prior to referral to the decision maker.

- CPSA Team Leaders moderation meeting notes (November 2022)
- Medical Act 1983 (as amended)

Decision

I considered the compliance report and need further information or advice to be able to make a decision. I have specified below the further information or advice and the reasons why I need it before a decision can be made.

I have considered the compliance report and I am satisfied that Bristol Medical School, University of Bristol (the assessment provider) complies with and meets the CPSA requirements annexed to the GMC's MLA framework: [Assuring readiness for practice: a framework for the MLA](#).

I have noted the compliance report advises the GMC considers a number of recommendations.

I make recommendations to the assessment provider, set out in the recommendation section below.

I am NOT making any recommendations to the assessment provider for the reasons specified below.

I noted that the compliance report advises the GMC requires the assessment provider to make [add number] mandatory changes in order to be compliant with and meet the CPSA requirements. I am satisfied that Bristol Medical School, University of Bristol (the assessment provider) will be compliant with and meet the CPSA requirements annexed to the GMC's MLA framework: [Assuring readiness for practice: a framework for the MLA](#) subject to implementing the mandatory changes listed below by 1 May 2024. If it is not possible to implement the changes then this should be escalated to the Registrar.

Based on the advice set out in the compliance report, I have formed a provisional opinion that Bristol Medical School, University of Bristol (the assessment provider) is not compliant and does not meet the CPSA requirements annexed to the GMC's MLA framework: [Assuring readiness for practice: a framework for the MLA](#). I am escalating this to the Registrar for further consideration.

Mandatory changes

Please detail here the mandatory changes the assessment provider must make.

No mandatory changes are required of the assessment provider.

Recommendations

1. The assessment provider should consider how they ensure that their approach of rounding the raw station and aggregate scores to the nearest integer does not adversely affect the borderline threshold or permit candidates who have not demonstrated that they meet this threshold to pass.
2. The assessment provider should review the amount of station level feedback given to

candidates with the aim of protecting the validity and security of stations. In addition, the assessment provider should consider how written feedback from examiners and SPs could be improved.

3. The assessment provider should develop and implement a clear process for how they identify and remediate substandard SP performance.
4. The assessment provider should develop a SOP covering the running of the CPSA on the day
5. The assessment provider should ensure that a minimum of two external examiners contribute to each quality improvement cycle of the CPSA.

Reasons for the decision

I have reviewed the documentation set out above in full. I have referred to the factors set out in the MLA Decision Makers Guidance to evaluate compliance with the CPSA requirements, and my conclusions are set out below. I have also borne in mind the GMC's objectives as set out at section 1(1)(b) of the Medical Act.

The compliance process for CPSA elements of an MLA are set out in full at page 4 of the MLA Decision Makers Guidance. Based on the evidence provided I satisfied that this process has been followed. Independent expert advice on the assessment provider's submissions is set out in detail within the compliance report. I have also reviewed the comprehensive supplementary submissions provided. These evidence rigorous queries posed to the assessment provider about the detail of the ways their CPSA meets the requirements, matched by thorough responses and supplementary documentation from the provider itself. The responses to the provisional recommendations demonstrate the provider has been given an opportunity to check the draft report for factual inaccuracies. I also considered whether the moderation element of the compliance process had been completed, and am satisfied, based on the notes of the November 2022 meeting, that this is the case.

I have considered the advice provided by the CPSA reviewers on the assessment provider's compliance with the requirements of annex C of the GMC's MLA framework. This is set out within the compliance report. I am satisfied that the reviewers comprehensively addressed how the assessment provider meets each of the 20 requirements, and have reached clear and reasoned conclusions referring to the specifics of these requirements. For example, under the 'Production of results' requirements (19), the reviewers have considered how the assessment providers meets each of three limbs of the requirement to analyse data. The evaluation makes reference to specific actions taken by the assessment provider to support this conclusion, as well as setting out what they would expect to see in the next submission, and identifying areas of good practice. A similar level of rigour has been applied to assessment of other requirements, with all relevant aspects addressed in appropriate detail and clear determinations made.

In reaching this conclusion, I have also considered whether the evaluation within the compliance report evaluation is based on objective evidence. I have read three submissions from the assessment provider. Based on this, I am satisfied that the reviewer's evaluation is based on objective and verifiable evidence. For example, under standard 17, the evaluation refers to the introduction of a new EMS which will reduce the risk of missing data. I have read the initial

submission, and subsequent feedback and supplementary responses between the GMC and assessment provider. The first submission makes reference to the pending introduction of a new EMS in summer 2022, replacing paper based marking system. In the September 2022 submission, the assessment provider details the initial usage of the system for year 3 and 4 OSCEs. The requirements for the new system during the procurement phase were also provided as well as information directly from the system's supplier. It is therefore clear that there was sufficient evidence for the reviewers to make a conclusion about the introduction of a new EMS before making reference to it in their report. A similar precision exists throughout the document; all conclusions can be justified by reference to the submissions and documentation from the assessment provider.

I also went on to consider whether reasonable steps have been taken to ensure that any conflicts of interest on the part of those involved in the recruitment process were identified and mitigated. I have reviewed the GMC's conflict of interest policy, which applies to associates. My view is that it is sufficiently robust.

No concerns regarding compliance with equality or human rights legislation have been brought to my attention. I note that the assessment provider has a policy in place for supporting disabled students and students with health conditions, set out in their February 2022 submission, and has given examples of how this might be applied. The compliance assessment identifies an area of good practice in ED&I training for the assessment provider's examiners.

Whilst I am content that the assessment provider complies with the requirements for the CPSA, I endorse and adopt here the five recommendations identified in the compliance report; these are clear, reasoned and there is appropriate rationale about how they will assist the assessment provider in improving practice and continuing to comply with the requirements. I note that the assessment provider has already confirmed, in its response to the compliance report, that it will comply with all of these recommendations – it appears that it has already addressed the second recommendation, around feedback to candidates (requirement 10).

Signed



Ellen Cox

Date

2 November 2023

Annex A

Medical Licensing Assessment (MLA) – clinical and professional skills assessment (CPSA) – compliance report containing CPSA reviewers’ advice

Bristol Medical school, University of Bristol

Medical Licensing Assessment (MLA) – clinical and professional skills assessment (CPSA) – compliance report containing CPSA reviewers' advice

Bristol Medical School, University of Bristol

This compliance report contains the advice from the independent CPSA reviewers* to the GMC. The advice is based on their review of the information and evidence submitted by Bristol Medical School, University of Bristol (the assessment provider†) to show how their CPSA complies with the CPSA requirements annexed to the GMC's MLA framework: [Assuring readiness for practice: a framework for the MLA](#).

By meeting these requirements, an assessment provider is demonstrating the quality, consistency and fairness of their CPSA to a standard that the GMC requires for the CPSA to count towards a candidate's MLA.

In preparing their advice, the CPSA reviewers used their expert judgement to consider whether each requirement had been met overall. They recognised that there may be both areas of strength and areas for development within a CPSA.

Their advice begins with an overview. The table of individual requirements that follows contains the CPSA reviewers' advice to the GMC on whether Bristol Medical School, University of Bristol has demonstrated that the individual CPSA requirements have been met.

The table also sets out any changes that the CPSA reviewers advise the GMC should consider.

- Any mandatory changes‡ that the GMC requires must be implemented by the date specified in the MLA framework§ in order for the assessment provider to meet and be

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† Assessment provider: either a UK awarding body offering a primary medical qualification (PMQ), or the GMC as a provider of the MLA to international medical graduates.

‡ The GMC will agree implementation plans for any mandatory changes the GMC requires assessment providers to make. Compliance must be maintained for the CPSA to count towards a candidate's MLA.

§ The MLA framework was published in March 2021. This requires that, from the academic year 2024-25, a medical degree awarded by a UK university on the GMC's list of awarding bodies must include a pass in the MLA to be recognised as a UK primary medical qualification (PMQ).

compliant with the CPSA requirements.

- The findings include the CPSA reviewers' recommendations* for changes, or areas for improvement, related to the CPSA requirements that the assessment provider should address, in line with effective practice, to improve the quality of their CPSA, and any updates or further information they advise that the assessment provider should provide in the next submission.

The findings also include the CPSA reviewers' advice on the areas of excellence, innovation and effective practice they identified.

A summary of the key elements of the reviewers' collective findings is included to outline the reasons for their advice. When preparing their advice, the reviewers concentrated on reaching an overall assessment of whether an individual requirement was met. In addition, they identified where a suggested change or a future update was needed, or an area of excellence, innovation and effective practice was demonstrated. With the reviewers forming an overall view and flagging areas to highlight for change or to commend, the report may not necessarily comment on each separate, detailed aspect of each requirement.

The report also includes the response from the assessment provider to the advice and recommendations.

The full report will be considered by the GMC when making their compliance decision and will be published on the GMC website, along with the compliance record of decision.

* The GMC will agree implementation plans with assessment providers for any recommendations. Compliance must be maintained for the CPSA to count towards a candidate's MLA. Non-engagement or lack of satisfactory progress with a recommended change may result in it becoming mandatory.

Bristol Medical School, University of Bristol

Overview of CPSA reviewers' advice

Overall advice statement from CPSA reviewers

We, the CPSA reviewers, advise the GMC that Bristol Medical School, University of Bristol (the assessment provider) meets the CPSA requirements annexed to the GMC's MLA framework: [Assuring readiness for practice: a framework for the MLA](#).

While not impacting on our overall conclusion that Bristol Medical School, University of Bristol meets the CPSA requirements, we suggest that the GMC considers a number of recommendations. These include five recommended changes and six updates, or further information, we consider are needed for the next submission.

In reviewing the CPSA submission we also identified four examples of effective practice.

Our advice is based solely on a review of the written information and evidence submitted by the Bristol Medical School, University of Bristol, including any clarifications or further information requested as part of that process, from the original submission in Q1 2022.

CPSA reviewers' advice on the individual CPSA requirements

	Requirement	Met	Findings
1	<p>Assessment strategy</p> <p>Describe and demonstrate how the CPSA sits within the overall assessment strategy for the final and penultimate years, eg workplace-based assessments (WPBA) and clinical procedural skills.</p>	Yes	<p>The assessment provider has appropriately described and demonstrated how the CPSA sits within the overall assessment strategy for the final and penultimate years, including WPBA and clinical procedural skills, showing the progression points and eligibility criteria for the CPSA. The assessment provider's CPSA is sat in the penultimate year of the programme.</p> <p>Students must pass the CPSA in the penultimate year in order to move on to their 'assistantships' in the final year. Students must then also complete their Consultation and Procedural Skills Logbook by the end of the final year before they can graduate from the MBChB programme.</p> <p>Practical procedures are assessed by a combination of WPBAs, e-Portfolio and completion of the Consultation and Procedural Skills Logbook. Procedural skills are summatively examined in the CPSA to assess students' ability to integrate skills within a patient consultation. The assessment of professionalism is integrated within the CPSA station content.</p> <p>We advise that the assessment provider has shown how the CPSA fits with the suite of assessments used for graduation, with clear information on progression requirements.</p>
2	<p>CPSA design</p> <p>Describe the rationale for the design of the CPSA. This should include:</p> <p>a. format</p> <p>b. station type</p>	Yes	<p>The assessment provider has clearly described the rationale and design features of their CPSA, including the format, total testing time, number and duration of stations, number of sites and circuits, and involvement of real and simulated patients (SPs).</p> <p>The assessment provider uses an OSCE for their CPSA, consisting of two circuits of eight stations over two consecutive days. Stations are ten minutes long, with two minutes reading time. The CPSA is run at several sites simultaneously over two days. On each day there are two or three sittings of the OSCE, with up to three parallel</p>

	c. testing time, including number and duration of stations.		<p>circuits¹. In each station candidates are observed consulting with an SP, a real patient, or performing a practical procedure on a manikin. The CPSA is set at the level of Foundation Programme year one (F1).</p> <p>The resit follows the same format as the main examination but on a single site, with up to two circuits per day.</p> <p>We advise that the assessment provider has clearly described the rationale and modelling for the CPSA design and described what each candidate needs to do on the day to complete the CPSA.</p>
3	<p>Scoring</p> <p>Describe the rationale for the approach to scoring candidate performance:</p> <p>a. within station (eg domain/checklist/overall global judgement)</p> <p>b. how results are aggregated at the level of the overall assessment</p> <p>c. any marks or judgements given by the simulated or real patient, and how they contribute to the overall score.</p>	Yes	<p>The assessment provider has appropriately described how each station is scored and how the CPSA is scored overall. They have provided example marksheets and examiner scoring guidance, including descriptors for borderline candidate performance, and they have also described how SPs contribute to the scoring.</p> <p>The assessment provider uses a domain-based scoring approach. In addition to allocating marks against the domains, examiners make an overall global judgement about the candidate's performance using a global rating scale. SPs contribute up to two marks overall.</p> <p>We advise that the assessment provider has clearly described the rationale and approach to scoring candidate performance.</p>
4	<p>Standard setting</p> <p>Describe and demonstrate how standards are set for the first take and resit, as applicable, and the</p>	Yes	<p>The assessment provider has described their rationale and method for standard setting the CPSA, demonstrating how standard setting is applied at station level and for the overall assessment, including their use of additional standard setting criteria, to arrive at a final pass mark and pass/fail outcome decision for each candidate. They have also</p>

	<p>underlying rationale for the chosen method(s), including:</p> <p>a. standard setting method at station and overall assessment level</p> <p>b. any additional passing criteria (eg minimum number of stations passed).</p>		<p>described the rationale and method for standard setting the resit.</p> <p>The assessment provider sets the standard for the first take using the borderline regression method, with a conjunctive standard that candidates must pass 11 out of 16 stations.</p> <p>For the resit, as the number of candidates is small, the assessment provider either uses stations that have been used before, and the pass marks for those stations set previously using the borderline regression method, or uses new stations and calculates the pass mark for each station using the Angoff method.</p> <p>Although this is appropriate for the assessment provider’s CPSA, we’re concerned that the policy of rounding the raw station and aggregate scores to the nearest integer may adversely affect the borderline threshold and produce falsely positive results. While this does not alter our advice that the requirement has been met overall, this is an area for improvement.</p> <p>We advise that the assessment provider sets and maintains the standard appropriately, with the following suggested recommendation:</p> <p>Recommendation: The assessment provider should consider how they ensure that their approach of rounding the raw station and aggregate scores to the nearest integer does not adversely affect the borderline threshold or permit candidates who have not demonstrated that they meet this threshold to pass.</p> <p>Next submission: The assessment provider described plans to increase their conjunctive standard (the number of stations required to pass in addition to meeting the aggregate pass score). The assessment provider should provide an update on this work and its impact in the next submission.</p>
5	Assessing professionalism	Yes	The assessment provider has appropriately described and demonstrated how professionalism is assessed during the CPSA and how wider elements of

	Describe and demonstrate how professionalism is assessed during the CPSA and unprofessional behaviours are captured and followed up.		<p>professionalism are covered elsewhere in their assessment strategy. They have also shown how unprofessional behaviours are captured and followed up.</p> <p>In addition to incorporating assessment of professionalism in stations, where each station is mapped to at least one of the <i>MLA content map</i> clinical and professional capabilities, the assessment provider has set out how examiners can record any concerns on the mark sheet. There are effective mechanisms to identify and follow up on the behaviours of individual students, with remediation opportunities. All concerns are reported to, and discussed at, the exam board.</p> <p>We advise that the assessment provider assesses professionalism appropriately, and that there are suitable processes for capturing and addressing concerns relating to unprofessional behaviours.</p>
6	<p>Content sampling</p> <p>Describe how the CPSA content relates to the <i>MLA content map</i>:</p> <p>a. Demonstrate that the CPSA maps to the three overarching themes:</p> <ul style="list-style-type: none"> i. Readiness for safe practice ii. Managing uncertainty iii. Delivering person-centred care <p>b. Demonstrate how the CPSA maps to the individual domains:</p> <ul style="list-style-type: none"> i. Areas of clinical practice ii. Areas of professional knowledge iii. Clinical and professional 	Yes	<p>The assessment provider has appropriately explained their sampling approach and described and demonstrated how the CPSA content relates to the themes and domains of the <i>MLA content map</i>.</p> <p>The assessment provider has described and demonstrated thorough processes for content sampling at a station level and across the whole CPSA. There is sampling across a range of domains and areas of clinical practice, with clear mapping to the content map and a requirement for candidates to demonstrate that they can identify and interpret clinical findings.</p> <p>We reviewed several blueprinting documents, including a ‘masterplan’ and example blueprints. In addition, the assessment provider has shown how they sample content in an appropriate way to maximise coverage and reduce duplication.</p> <p>We advise that there is a suitable approach to selecting content for the CPSA and that it is appropriately mapped to the <i>MLA content map</i>.</p>

	<p>capabilities</p> <p>iv. Practical skills and procedures</p> <p>v. Patient presentations</p> <p>vi. Conditions</p> <p>c. Demonstrate that candidates can identify and interpret clinical findings.</p>		
7	<p>Quality of CPSA content</p> <p>Describe and demonstrate how stations are created and approved, and quality is maintained. This should include:</p> <p>a. how station writers are trained</p> <p>b. the process for creating, reviewing and approving new stations, and reusing existing stations</p> <p>c. how a range of appropriate stakeholders is involved in the creation and development of stations to assure their authenticity and level of challenge</p> <p>d. how feedback collected on the day of the CPSA and post-exam station metrics are fed into the</p>	Yes	<p>The assessment provider has comprehensively described and demonstrated their processes to create, approve, evaluate and maintain quality stations testing MLA content, ensuring stations are authentic and at the appropriate level of challenge.</p> <p>We reviewed a range of supporting evidence such as station writer training materials and examples of examiner feedback, in addition to a clear summary of how the assessment provider uses psychometric data to improve station performance. The assessment provider involves a range of appropriate stakeholders in the creation and development of stations, such as academic leads with specialist topic knowledge, assessment staff, examiners and a psychometrician to assure their authenticity and level of challenge.</p> <p>We advise that the assessment provider has appropriate processes to produce quality assessment materials that correctly reflect what new doctors might encounter in clinical practice.</p> <p>Effective practice: The assessment provider proactively collects and uses examiner comments and psychometric data to feed into exam development as part of the quality improvement cycle.</p>

	writing and review process.		
8	<p>Security of CPSA content</p> <p>Describe and demonstrate how the security of the assessment content is maintained.</p>	Yes	<p>The assessment provider has appropriately described and demonstrated how they maintain the security of assessment materials, including how station content is stored and shared with all those involved in the CPSA. For example, all exam materials are stored in a secure central university server with restricted access.</p> <p>We noted that the assessment provider has now moved to using an electronic marking system, which will further promote the secure management of CPSA content.</p> <p>We advise that the assessment provider appropriately ensures the security of CPSA materials.</p>
9	<p>Familiarisation with the assessment process for candidates</p> <p>Describe and demonstrate how candidates have been given information about the CPSA in advance, and briefed on the day, covering:</p> <p>a. assessment format, including the criteria for achieving a pass</p> <p>b. expected standards of performance</p> <p>c. how the CPSA will be run on the day.</p>	Yes	<p>The assessment provider has appropriately described and demonstrated the information and briefing they provide to candidates in advance and on the day, to ensure candidates are familiar with the format and expected standards of performance.</p> <p>We reviewed a range of suitable guidance documents and briefings which cover aspects such as the assessment standard, reasonable adjustments and what to expect on the day. Candidates also receive an on-the-day briefing which covers station timings and the exam process.</p> <p>We advise that the assessment provider has appropriately shown how they prepare candidates to take the CPSA and inform them what to expect.</p>
10	<p>Results and feedback to candidates</p> <p>Describe and demonstrate what</p>	Yes	<p>The assessment provider has clearly described the information they give to candidates about their results and performance and what support is given to unsuccessful</p>

	<p>results and feedback are given to candidates and how the quality of any feedback is assured, as well as what support is given to unsuccessful candidates.</p>		<p>candidates.</p> <p>The assessment provider has described and demonstrated detailed and comprehensive feedback given to candidates, including information on how they can use and interpret the feedback to assist their reflection and strengthen their future learning.</p> <p>However, we're concerned that the level of feedback given to candidates risks the perceived validity and security of the assessment. For example, all candidates receive information on what leads to the award of marks in each station, alongside detailed learning points. Given that stations are reused, we believe that this practice increases the likelihood of station leakage or misguided candidate revision. The assessment provider also acknowledged that the quality of written feedback from examiners and SPs may vary. While this does not alter our advice that the requirement has been met overall, this is an area for improvement.</p> <p>We advise that the assessment provider has appropriately described the information and support they give to candidates about their results and performance, with the following suggested recommendation:</p> <p>Recommendation: The assessment provider should review the amount of station level feedback given to candidates with the aim of protecting the validity and security of stations. In addition, the assessment provider should consider how written feedback from examiners and SPs could be improved.</p>
11	<p>Examiners</p> <p>Describe how examiners are recruited, trained, briefed and calibrated, and demonstrate:</p> <p>a. criteria for becoming an examiner</p>	Yes	<p>The assessment provider has appropriately described and demonstrated how examiners are recruited, trained, briefed and calibrated, including comprehensive criteria for appointment, ED&I training, and how examiners are standardised to ensure they have a common approach to scoring, identifying different levels of performance, especially borderline candidates, and giving feedback to candidates.</p> <p>The assessment provider has described and demonstrated stringent and robust processes for appointing, training and briefing examiners, which includes training on</p>

	<p>b. training to support examiners' preparedness</p> <p>c. details of marking calibration d details of equality, diversity and inclusion (ED&I) training.</p>		<p>giving high quality candidate feedback. We reviewed several documents which evidenced a good range of training tools including an online training session and written guidance. The assessment provider also provided evidence of robust calibration processes, both during the training sessions and in on-the-day discussions.</p> <p>We advise that the assessment provider has described how examiners are recruited, trained, briefed and calibrated.</p> <p>Effective practice: The assessment provider's examiner training has a strong ED&I element, including a section on unconscious bias. The assessment provider also uses examiner feedback to tailor and improve the training materials.</p>
12	<p>Simulated/ real patients</p> <p>Describe how simulated/ real patients are involved in the CPSA, and demonstrate how they are recruited, trained, briefed and calibrated.</p>	Yes	<p>The assessment provider has appropriately described how SPs are involved in the CPSA and demonstrated how they are recruited, trained, briefed and calibrated on their role. This includes appropriate training on their contribution to the station score. All SPs are professional actors recruited by a dedicated administrator at the university.</p> <p>The assessment provider has also clearly described the involvement and preparation of real patients in the CPSA. Real patients were used in some stations up to the Covid-19 pandemic when this was temporarily stopped. The assessment provider has advised that they plan to reintroduce real patients from academic year 2022-23 onwards.</p> <p>The assessment provider identified the challenge of recruiting a diverse range of SPs across multiple venues and noted the work actively underway to address this.</p> <p>We advise that the assessment provider has clearly described how it involves SPs in the CPSA and has provided evidence of appropriate training and calibration.</p> <p>Next submission: The assessment provider plans to reintroduce a real patient station in the 2022-23 academic year. We also reviewed plans for a new SP training programme, which will cover topics such as fairness. The assessment provider should provide an update on these work streams and their impact in the next submission.</p> <p>Effective practice: The assessment provider is actively taking steps to ensure that its SP</p>

			bank is reflective of society, and includes individuals of different ages, from different ethnic backgrounds, and those with disabilities. Furthermore, the assessment provider has developed stations with a more diverse focus.
13	<p>Collaboration between examiners and patients</p> <p>Describe and demonstrate how the examiner and simulated/ real patient for each station are given the opportunity to meet and familiarise themselves with the station content.</p>	Yes	<p>The assessment provider has appropriately described and demonstrated how the examiner and SP for each station are given the opportunity to meet and familiarise themselves with the station content on the day.</p> <p>Examiners are asked to arrive before the start of the exam so that they can attend the general briefing, read their instructions and, together with the SP, familiarise themselves with the station. At each venue, all the examiners and SPs for each station are asked to convene in one of the station rooms to run through the scenario together. At some venues there may be as many as five circuits in operation simultaneously which means that five examiners and five SPs must meet to discuss each station.</p> <p>The assessment provider has also shown the steps they take to ensure that the station is being run in the same way across different circuits/sites, including the use of a dedicated communication channel between the five CPSA sites to effectively identify any issues and ensure changes are communicated and implemented across all sites.</p> <p>We advise that the assessment provider has clearly described how examiners and SPs prepare on the day of the exam to ensure that they understand how the station should be presented and any issues are clarified.</p>
14	<p>Feedback to examiners and simulated patients</p> <p>Describe and demonstrate what feedback is given to examiners and simulated patients, and how the impact of this feedback is monitored.</p>	Yes	<p>The assessment provider has appropriately described and demonstrated how they monitor examiners and SPs during and after the CPSA and what feedback is given to examiners. They have also shown how they monitor the impact of examiner feedback on future marking behaviours and how they deal with underperformance. This includes analysing psychometric reports and having follow up meetings with examiners if there are any concerns.</p> <p>We noted that the assessment provider does not routinely give SPs feedback on their</p>

			<p>performance and that potential poor performance is only investigated if a candidate or examiner makes a complaint. While this does not alter our advice that the requirement has been met overall, this is an area for improvement.</p> <p>We advise that the assessment provider has appropriately described how examiner and SP performance is monitored during the exam and how feedback is given and evaluated, with the following suggested recommendation:</p> <p>Recommendation: The assessment provider should develop and implement a clear process for how they identify and remediate substandard SP performance.</p> <p>Next submission: The assessment provider has started to record examiner trends so that they can monitor performance over time. The assessment provider should provide an update on this work and its impact in the next submission.</p>
15	<p>Policies and procedures</p> <p>Demonstrate that there are policies and procedures in place to deal with all aspects of the CPSA.</p>	Yes	<p>The assessment provider has clearly demonstrated there are policies and procedures in place to deal with most aspects of the CPSA. For example, we reviewed evidence of policies covering topics such as unexpected incidents, extenuating circumstances and appeals. In addition, the assessment provider has outlined how they respond to requests for reasonable adjustments. However, we recommend that the assessment provider should develop a standard operating procedure (SOP) covering the running of the CPSA on the day, for resilience and consistency.</p> <p>We advise that the assessment provider has appropriately described how the CPSA operates within the context of a policy framework which makes it clear to staff and candidates how procedures are implemented, with the following suggested recommendation:</p> <p>Recommendation: The assessment provider should develop a SOP covering the running of the CPSA on the day.</p>
16	Resources and space	Yes	<p>The assessment provider has appropriately described and demonstrated clear evidence of the venue spaces, station layout and set up, equipment and clinical skills</p>

	Demonstrate that the CPSA takes place in a space appropriate for a high stakes assessment with access to appropriate clinical resources.		<p>resources, and efforts made to ensure consistency of experience for candidates on different sites and circuits. Furthermore, the assessment provider has clearly set out how candidates are allocated to their CPSA site.</p> <p>The assessment provider noted that, due to the pandemic, they've had to make changes to the sites used for the CPSA and plan to use a new venue from July 2023.</p> <p>We advise that the assessment provider has clearly described how they ensure the provision of a quality assessment through securing appropriate venues, and the resources needed so that candidates can demonstrate their clinical skills in an authentic way.</p> <p>Next submission: The assessment provider should provide an update on their move to a new venue in July 2023.</p>
17	<p>Data acquisition</p> <p>Describe and demonstrate the approach to accurate and consistent data acquisition during the CPSA and dealing with missing data identified during the CPSA itself.</p>	Yes	<p>The assessment provider has clearly demonstrated that they have processes in place to ensure that CPSA mark data are accurately captured and validated on the day. They have described the approach to dealing with missing data.</p> <p>We noted that the assessment provider has recently introduced an electronic marking system which has helped reduce the risk of missing data.</p> <p>We advise that the assessment provider has appropriately described how scores are captured and there are processes in place to ensure scores are accurate and complete.</p>
18	<p>Production of results</p> <p>Describe and demonstrate how results data are combined and checked after the CPSA to produce results for the exam board, including:</p> <p>a. approach to missing data</p>	Yes	<p>The assessment provider has clearly shown how the CPSA mark data are accurately processed and checked to create results and assessment outcomes for the exam board. They have described appropriate criteria and processes for making post-assessment mark adjustments.</p> <p>The assessment provider has appropriate procedures for quality checks and the review of results data, with suitable people involved. We reviewed a range of reports and analyses produced for discussion at exam boards, as well as a summary of when</p>

	<p>identified during production of results</p> <p>b. approaches to post-assessment mark-data changes.</p>		<p>station suppression would be considered. We advise that decision-making is supported by robust statistical evidence.</p> <p>We advise that the assessment provider has clearly described what data processing occurs between the completion of the CPSA and the exam board and what checks are in place to ensure accurate handling of data and calculation of results.</p> <p>Next submission: The assessment provider should provide an update on the implementation of the electronic marking system and how this has affected, or supported, the assessment provider’s psychometric analysis.</p>
19	<p>Psychometric analysis</p> <p>Describe and demonstrate how the assessment data are analysed and how the outcomes of the analysis feed into post-CPSA review, evaluation and decision making. This should include:</p> <p>a. what analyses are conducted</p> <p>b. how the analysis is used to improve station quality</p> <p>c. how the analysis informs the development of the CPSA.</p>	Yes	<p>The assessment provider has appropriately described and shown how assessment data are analysed and how the outcomes of the analysis feed into post-CPSA review, evaluation and decision making. They have described how psychometric analysis is used to monitor station and examiner performance and improve the CPSA.</p> <p>The assessment provider has given a clear description of how all data are reviewed at the post-test meeting before outcomes are considered by the exam board, with examples of the analyses routinely carried out by the psychometrician. This includes identifying poorly performing stations, or stations with a high failure rate, and analysing and monitoring results for the impact of protected characteristics.</p> <p>The assessment provider has a dedicated psychometrician who produces reports for review at exam boards and to feed into station development and improvement. The psychometrician presents a summary of their work at the annual programme review so that the assessment provider can identify trends and issues that might need to be addressed.</p> <p>We advise that the assessment provider has appropriately described how analyses are carried out, including who is involved, what their responsibilities are, and what checks are in place to ensure accurate handling of data.</p> <p>Next submission: In relation to requirement 16 (resources and space), the assessment</p>

			<p>provider has noted changes to CPSA site locations. In the next submission, the assessment provider should provide an update including psychometric analysis conducted on potential cross site variation, and the actions taken as a result. The update should refer to how electronic marking system reports have been used to support the analysis.</p> <p>Effective practice: We reviewed the assessment provider’s response to its finding that students from ethnic minorities perform less well in the CPSA. The assessment provider conducted focus groups and implemented a programme of bystander training, as well as improving examiner training and ongoing work to make station content more diverse.</p>
20	<p>External examiners</p> <p>Describe and demonstrate how the external examiners contribute to the quality of the CPSA and how the assessment provider responds to their advice.</p>	Yes	<p>The assessment provider has clearly shown how the external examiner plays a role in the quality assurance and improvement of the CPSA and how they engage with the external examiner’s comments and advice as part of the quality improvement cycle.</p> <p>We reviewed examples of detailed and constructive external examiner reports alongside the assessment provider’s response. We noted that the assessment provider appoints one to two external examiners for the assessment. We recommend that the assessment provider appoints a minimum of two external examiners for the CPSA to add resilience to the quality improvement cycle of the CPSA.</p> <p>We advise that the assessment provider has clearly described how external examiners play a role in the quality assurance and improvement of the CPSA, with the following suggested recommendation:</p> <p>Recommendation: The assessment provider should ensure that a minimum of two external examiners contribute to each quality improvement cycle of the CPSA.</p>

Assessment provider's response

The assessment provider has the right to reply to the CPSA reviewers' advice. If they have responded it will be included below or attached.

Assessment provider's response

Response to the Recommendation and Request for Update on Requirement 4: Standard setting

For the academic year 2023-24 we have revised the conjunctive standard for passing the CPSA. Regardless of their overall score, candidates must pass at least 12 of the 16 stations. Previously, candidates had to pass at least 11 of the 16 stations. This change will raise the standard. For the academic year 2023-24 we will continue our practice of rounding the pass mark to the nearest possible score (eg a pass mark of 12.2 is rounded to 12 and a pass mark of 12.6 is rounded to 13). We are conducting an analysis of marks from previous exams to quantify the effect of rounding and changing the minimum number of stations that candidates must pass. We will also analyze the results from the CPSA in summer 2024 to identify the effects of rounding and changes to the minimum number of stations that candidates must pass. The results of these analyses will inform a review of the passing standards for 2024-25.

Response to Recommendation for Requirement 10: Results and feedback to candidates

Since making our submission to the GMC we have reviewed the amount of station level feedback given to candidates. After the exams in July 2021 and July 2022 we sent all candidates a detailed *Practice Points* document which described how marks were awarded together with specific learning points for each station. In addition to this document each candidate received an individualised report containing the feedback written by each of their 16 examiners. In 2022-23 we reduced this feedback; we did not send a *Practice Points* document to candidates. We did this with the specific aim of protecting the validity and security of stations.

Meanwhile we have enhanced the training that we provide for all our standardised patients. When we review the examiner training package for 2023-24 we will include more guidance on how to provide high quality feedback.

Response to Request for Update on Requirement 12: Simulated/real patients

In the academic year 2022-23 we increased the number of training sessions that we offered to our standardised patients. These sessions covered their role in teaching and assessment and were designed for both new and experienced standardised patients. In the immediate

run up to the CPSA in July 2023 we ran a live online training session for all standardised patients who had not attended training the previous year. A recording of this session was available to those who could not join live. Plans to introduce real patients were deferred to 2023-24. We will be able to report on this venture in our next submission.

Response to Recommendation and Request for Update for Requirement 14: Feedback to examiners and standardised patients

In the academic year 2023-24 we are introducing two methods for identifying and remediating substandard standardised patient (SP) performance. The standardised patients who are employed for the CPSA are also employed throughout the academic year for teaching sessions on Effective Consulting and for practice OSCEs. The tutors who facilitate these sessions will give the standardised patients specific feedback on their performance. We have a protocol for responding to feedback about the performance of a standardised patient which falls below our expectation. Meanwhile, we will analyse the mean score of each SP in the same way that we analyse the mean score of each examiner to identify “hawks” and “doves”. Initial analysis shows a very strong correlation between the standardised patient score and the overall score given to each candidate.

We continue to analyse the means scores of all our examiners and will be happy to provide the GMC with an update at the time of our next submission.

Response to Recommendation for Requirement 15: Policies and procedures

In preparation for the CPSA in July 2024 we will develop an SOP which covers the running of the CPSA on the day of the exam. This SOP will incorporate the checklists and timetables used at each examination venue, together with the instructions for use of the electronic marking software.

Response to Request for Update on Requirement 16: Resources and space

In July 2023 we used 5 venues for the CPSA. We had a single venue in Bristol. This was our largest venue; it accommodated 6 circuits operating in parallel. The other 4 venues were in Bath, Cheltenham, Taunton and Swindon; each of these venues accommodated 2 circuits operating in parallel. At all 5 venues we had a morning sitting and an afternoon sitting. This arrangement worked well. Therefore we will continue with this arrangement in the academic year 2023-24.

Response to Request for Update on Requirement 18: Production of results

We began using the new electronic marking system for all our Objective Structured Clinical Examinations (OSCEs) in the academic year 2021-22. It has speeded up the production of results and the initial psychometric analysis. Our Faculty psychometrician continues to produce reports that go beyond the scope of the standard software; they are able to produce these reports within a few days.

Response to Request for Update on Requirement 19: Psychometric analysis

Analysis by our psychometrician did not show any significance difference in the mean total score of candidates at the 5 venues used for the exam in July 2023. Likewise there was no significant difference in the mean total score of candidates according to which sitting they were allocated. We would be happy to provide more information about these analyses in our next submission.

Response to Recommendation on Requirement 20: External examiner

At present we have a single external examiner for the CPSA. In accordance with the recommendation of the reviewers we will appoint a second external examiner so that two external examiners contribute to each quality improvement cycle of the CPSA.

The endnotes below cover additional responses to individual requirements.

¹ **Assessment provider response:** This accurately described the situation in 2021. However, in summer 2023 we had just 2 sittings (morning and afternoon) at all venues. Our largest venue had 6 circuits operating in parallel. Please see our response to Requirement 16.