

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

Aston Medical School, Aston University

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	Aston Medical School, Aston University
GMC’s decision	Complies with the CPSA requirements
Date of decision	19 February 2024

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 Aston Medical School, Aston University, 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:

- MLA CPSA - compliance report containing CPSA reviewers' advice.

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 Aston Medical School, Aston University (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](#).

* 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.

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 Aston Medical School, Aston University (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 Aston Medical School, Aston University (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.

There are no mandatory changes.

Recommendations

Please detail here any recommendations you make to the assessment provider.

- The assessment provider should look at providing CPSA-specific ED&I training for examiners, in addition to generic NHS training (Req. 11).
- As they recruit more simulated patients to cover multiple sites, the assessment provider should consider how they ensure that they recruit a diverse range of SPs. At the same time, they should give an update on their progress in building up a pool of real patients for use in the CPSA (Req. 12).
- As the assessment provider becomes familiar with the properties of the CPSA, they should begin developing threshold criteria for moderation of marks and cut score adjustments (Req. 18).
- The assessment provider should ensure that a minimum of two external examiners contribute to each quality improvement cycle of the CPSA (Req.20).

Reasons for the decision

I am satisfied from the compliance report that Aston Medical School, Aston University, has demonstrated compliance with the CPSA requirements through its evidence submission, and the

compliance report sets this out as well as recommendations and updates required in the next submissions. I do not believe any of the recommendations or updates affect the provider's compliance with the CPSA requirements.

Signed

Robin Benstead

Date

19 February 2024

Annex A

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

Aston Medical School, Aston University

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

Aston Medical School, Aston University

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 Aston Medical School, Aston University (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 Aston Medical School, Aston University 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

* CPSA reviewers: 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.

† 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 and updated in November 2023. 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.

Aston Medical School, Aston University

Overview of CPSA reviewers' advice

Overall advice statement from CPSA reviewers

We, the CPSA reviewers, advise the GMC that Aston Medical School, Aston University (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 Aston Medical School, Aston University meets the CPSA requirements, we suggest that the GMC considers a number of recommendations. These include four recommended changes and eight updates, or further information, we consider are needed for the next submission.

In reviewing the CPSA submission we also identified one example of effective practice.

Our advice is based solely on a review of the written information and evidence submitted by Aston Medical School, Aston University, including any clarifications or further information requested as part of that process, from the original submission in Q3 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 is a new school and at the date of submission their first tranche of students hadn't reached the final year of the course, so they hadn't run their CPSA. Their submission documented what they intended to do and drew on evidence from previous years of the programme.</p> <p>The assessment provider has appropriately described and demonstrated how the CPSA will sit 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.</p> <p>The assessment provider's CPSA will be sat in the final year of the programme.</p> <p>Clinical procedural skills are assessed through an ePortfolio. Students must be signed off as competent in year 5 in order to pass finals and graduate. Some practical skills and procedures are reassessed in the CPSA as an integrated task with consultation skills, to ensure the avoidance of skill decay and readiness for graduation.</p> <p>'Professionalism in Practice' is continuously assessed throughout the programme. Students must pass all elements before taking the CPSA.</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>	Yes	<p>The assessment provider has 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 simulated patients (SPs).</p> <p>The assessment provider plans to use a 15 station OSCE for their CPSA, run over three days, with candidates taking five stations per day. Stations are eight minutes long, with</p>

	<p>b. station type</p> <p>c. testing time, including number and duration of stations.</p>		<p>two minutes reading time. The CPSA is run at a single site. At the time of submission, the assessment provider had only used SPs in its exams but was looking to include real patients in the CPSA in future.</p> <p>The assessment provider demonstrated how it's modelling its approach to implementing the CPSA. More detail on this is included under requirement 4, standard setting.</p> <p>We noted that the design may evolve as candidate numbers grow, with the assessment provider looking to move to a sequential testing model and multi-site delivery of the CPSA to accommodate the increased numbers. If they move to a sequential model, they will need to provide an update to the design requirement in a future submission. Under requirement 16, they provided more information about their plans for multisite delivery.</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> <p>Next submission: The assessment provider should give an update on any proposed changes to the design, both as it finalises elements of the CPSA design - such as the standard setting method - and as it changes the design to accommodate increasing candidate numbers, including modelling and timeline for implementation.</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>	Yes	<p>The assessment provider has described how each station is scored and how the CPSA is scored overall. They've provided example marksheets and examiner scoring guidance, including descriptors for borderline candidate performance.</p> <p>The assessment provider plans to use a domain-based scoring approach with three common domains in each station covering process, clinical judgement and communication skills. These domains are appropriate for the CPSA but we anticipate that the assessment provider will want to review them and may modify them based on examiner feedback and station performance. SPs will not contribute to the scoring, but</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>		<p>the scoring domains include interaction with the patient. While the assessment provider has indicated that they may consider including a patient mark in future subject to evaluation and training, we're confident that the current approach meets the intention of the requirement.</p> <p>We advise that the assessment provider has clearly described the rationale and approach to scoring candidate performance.</p> <p>Next submission: The assessment provider should provide an update on how the scoring worked in the CPSA, as well as any changes they've made to the scoring domains after reviewing the exam.</p>
4	<p>Standard setting</p> <p>Describe and demonstrate how standards are set for the first take and resit, as applicable, and the 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>	Yes	<p>The assessment provider has described their rationale and method for standard setting the CPSA, demonstrating how standard setting will be applied at station level and for the overall assessment, including the additional standard setting criteria they'll use to arrive at a final pass mark and pass/fail outcome decision for each candidate. They have also described how the standard will be maintained over different circuits and the rationale and method for standard setting the resit.</p> <p>The assessment provider plans to use the borderline regression method to set their standard in the first CPSA, with a provisional plan that candidates must achieve the overall cut-score plus one standard error of measurement (SEM), and pass at least eight stations, subject to the outcomes of their research and modelling. The assessment provider also intends to use modified Angoff and Contrasting groups methods as sense checks for the standard set. In addition, they're conducting modelling of the conjunctive standard (the minimum number of stations to pass) to ensure it's fair to candidates and does not allow undue compensation across stations in the CPSA. The assessment provider is using data from previous years to inform this modelling. This is an appropriate approach to modelling and setting the standard.</p> <p>The assessment provider has developed a description or 'pen picture' of the minimally competent week one Foundation Programme (F1) doctor to support the standard</p>

			<p>setting and examiner marking. We welcome this as a way to support examiners to understand the required standard to pass the CPSA.</p> <p>For the resit, the assessment provider plans to use a modified Angoff method to set the standard, due to the small size of the current cohort. This is appropriate as they cannot use previously set borderline regression scores from the main sit, and the resit numbers will be too small to allow the borderline regression method to be used to set the standard on the day of the resit.</p> <p>We advise that the approach the assessment provider is taking will enable them to set and maintain the standard appropriately.</p> <p>Next submission: The assessment provider should provide an update on which standard setting method they chose for the CPSA, including any modelling that underpins it.</p>
5	<p>Assessing professionalism</p> <p>Describe and demonstrate how professionalism is assessed during the CPSA and unprofessional behaviours are captured and followed up.</p>	Yes	<p>The assessment provider has described and demonstrated how professionalism is assessed during the CPSA and how wider elements of professionalism are covered elsewhere in their assessment strategy. They have also shown how unprofessional behaviours are captured and followed up.</p> <p>The assessment provider incorporates assessment of professionalism in the content of the CPSA, for example in the three marking domains.</p> <p>The assessment provider has a comprehensive policy for measuring professionalism. There are appropriate mechanisms in place for identifying and following up unprofessional behaviours in the CPSA, with remediation opportunities.</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>	Yes	<p>The assessment provider has explained their sampling approach and described and</p>

	<p>Describe how the CPSA content relates to the MLA content map:</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 capabilities iv. Practical skills and procedures v. Patient presentations vi. Conditions <p>c. Demonstrate that candidates can identify and interpret clinical findings.</p>		<p>demonstrated how the CPSA content relates to the themes and domains of the <i>MLA content map</i>. They have also described where and how candidates can demonstrate their ability to identify and interpret clinical findings.</p> <p>The assessment provider has described and demonstrated the process for content sampling at a station level and across the whole CPSA. They have rules in place that allow them to sample across a range of domains and areas of clinical practice, with clear mapping to the content map.</p> <p>While the assessment provider doesn't currently use real patients in the CPSA, we saw examples of how it uses SPs to assess how candidates identify and interpret clinical findings. Nevertheless, we welcome the assessment provider's move to include real patients, as this will enhance the authenticity of this part of the CPSA.</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>
7	<p>Quality of CPSA content</p> <p>Describe and demonstrate how stations are created and approved, and quality is maintained. This</p>	Yes	<p>The assessment provider has 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>Station writers are trained at a 'master class', or individual tutorial session, which</p>

	<p>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 writing and review process.</p>		<p>covers the quality assurance cycle for station creation, timings, marking domains, blueprinting, and style and format.</p> <p>The process starts with stations being mapped to the CPSA blueprint, then written by subject matter experts. The draft stations are tested by clinical teaching fellows, before going through further quality assurance steps, including review by the external examiner. Borderline and good station performances are filmed using staff for examiner and SP training, with the writers invited for a review of their stations after the CPSA.</p> <p>Feedback will be collected from examiners, patients and candidates on the day of the CPSA and post-exam station metrics will be used when revising stations.</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>
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 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.</p> <p>We saw a standard operating procedure (SOP) for security of OSCE content before, during and after the CPSA. The SOP covers sharing material with external stakeholders involved in the CPSA – such as examiners and simulated patients – as well detailing who has access to exam material on the day of the CPSA.</p> <p>We were also reassured to see that, as part of their planning for a move to a multi-site CPSA, the assessment provider has demonstrated awareness of the security issues they'll need to address.</p> <p>We are satisfied that the assessment provider appropriately ensures the security of</p>

			CPSA materials.
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 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>Candidates are familiar with the format, having been assessed using OSCEs from their first year. They attend a briefing which covers format, timing and the standard setting process. The briefing also covers the concept of the minimally competent candidate and what attitudes and behaviours they need to demonstrate in order to pass the CPSA. This information is reinforced through a handbook, question and answer (Q&A) sessions, newsletters and emails.</p> <p>We advise that the assessment provider has appropriately shown how they prepare candidates to take the CPSA and inform them of what to expect.</p>
10	<p>Results and feedback to candidates</p> <p>Describe and demonstrate what 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>	Yes	<p>The assessment provider has described the information they give to candidates about their results and performance, including how the quality of any feedback is assured, and what support is given to unsuccessful candidates.</p> <p>Candidates receive their raw score for the CPSA overall, whether they've passed or failed, as well as breakdowns of their score by station and domain.</p> <p>Written feedback from examiners is mandatory and examiners are trained and briefed to give it. Feedback is moderated before being given to students. The assessment provider is currently trialling the use of feedback statements instead of free text feedback.</p> <p>Unsuccessful candidates are supported by the Student Support Lead and Year Lead. They have an action plan for achieving improvement, which includes making use of</p>

			<p>feedback from the CPSA.</p> <p>We advise that the assessment provider has appropriately described the information and support they give to candidates about their results and performance.</p> <p>Next submission: The assessment provider should give an update on whether it plans to introduce feedback statements, or any other updates it makes to its feedback.</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> <p>b. training to support examiners' preparedness</p> <p>c. details of marking calibration</p> <p>d. details of equality, diversity and inclusion (ED&I) training.</p>	Yes	<p>The assessment provider has described and demonstrated how examiners are recruited, trained, briefed and calibrated. This includes the 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 a clear set of criteria for who can become an examiner, with Consultants, GPs and Trainees, above Speciality Trainee 3 (ST3) involved in teaching, able to examine in any station. Clinical teaching fellows are also able to assess process-driven stations, such as practical procedure stations.</p> <p>Examiners must attend yearly examiner training, both generic and station specific, as well as a briefing on the morning of the CPSA, followed by station-specific calibration across the circuits. This recognises that the CPSA is a new assessment and there may be changes to which the assessment provider must update examiners.</p> <p>All examiners must show they've completed NHS or Aston University ED&I training. While this is enough for us to advise that the CPSA meets the requirement, the assessment provider could enhance this aspect of examiner training by including CPSA-specific ED&I training, focussing on assessment.</p> <p>We advise that the assessment provider has described how examiners are recruited, trained, briefed and calibrated, so that they're well-prepared to mark in the CPSA, with the following suggested recommendation:</p> <p>Recommendation: The assessment provider should look at providing CPSA-specific</p>

			ED&I training for examiners, in addition to generic NHS training.
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 described how SPs are involved in the CPSA, and demonstrated how they are recruited, trained, briefed and calibrated on their role.</p> <p>The assessment provider recruits SPs through formal advertisements and informal networks of professional simulators. It has built up a pool of experienced SPs who've participated in earlier years assessments. The assessment provider plans to use the same approach to build up a pool of real patients for use in the CPSA. We noted that this approach may need to be supplemented to ensure that the assessment provider recruits a diverse range of SPs and real patients.</p> <p>SPs receive their brief to rehearse at home before attending the training session, where they run through the station and receive feedback. ED&I in relation to the CPSA is covered at the training.</p> <p>Additionally, they will attend group training sessions to ensure that all SPs on a station are calibrated across circuits.</p> <p>We asked about how the assessment provider intends to ensure SPs are calibrated across circuits and sites as it moves to multi-site delivery. We were reassured that they identified multiple strands of the quality assurance processes which focus on consistency, including the use of internal auditors to review stations on the day of the CPSA and the use of exemplar videos of SP performances as benchmarks.</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, with the following suggested recommendation:</p> <p>Recommendation: As they recruit more simulated patients to cover multiple sites, the assessment provider should consider how they ensure that they recruit a diverse range of SPs. At the same time, they should give an update on their progress in building up a pool of real patients for use in the CPSA.</p>

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 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>With the current single site delivery, on the morning of the CPSA the SPs run through the station with the examiners to ensure consistency of performance.</p> <p>As the assessment provider moves to multi-site delivery, they intend to hold calibration the night before the OSCE to allow SPs/real patients and examiners to meet online and run through the stations. Agreed actions from the calibration will then be implemented by the assessment provider.</p> <p>We advise that the assessment provider has clearly described how examiners and patients 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 described and demonstrated how they monitor examiners and SPs during and after the CPSA, and what feedback is given to examiners and SPs. They have also shown how they monitor the impact of examiner feedback on future marking behaviours and how they deal with underperformance.</p> <p>Examiners will be sent a graphical representation which will allow them to understand their marking. Where the assessment provider identifies a pattern of lenient, stringent or inconsistent marking, the examiner will first be invited to reflect and then, if necessary, be retrained.</p> <p>SPs will be provided with feedback from more than one examiner and canvassed for their feedback on the CPSA. Where there's an issue with an SP not performing the station as intended, it will be escalated to the chair of the exams.</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</p>

			evaluated.
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 described and documented detailed processes and procedures for running all aspects of the CPSA on the day, including evidence of efforts to ensure consistency across different sites, supplemented with information about central university policies, including processes for reasonable adjustments.</p> <p>Some aspects of the CPSA remain in development. For example, the approach to standard setting remains to be finalised. However, the assessment provider demonstrated, through the narrative and evidence a clear set of policies and procedures around the CPSA, with any gaps identified. We're reassured that the assessment provider has a process in place to produce the relevant documentation before the CPSA is run.</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.</p> <p>Effective practice: The assessment provider has a comprehensive set of SOPs covering the CPSA, and clear plans for what they will do as their CPSA develops.</p> <p>Next submission: The assessment provider should submit updated procedures covering the CPSA.</p>
16	<p>Resources and space</p> <p>Demonstrate that the CPSA takes place in a space appropriate for a high stakes assessment with access to appropriate clinical resources.</p>	Yes	<p>The assessment provider has demonstrated that the CPSA takes place in a space appropriate for a high stakes assessment, with access to appropriate clinical equipment and resources.</p> <p>The assessment provider currently holds the CPSA on a single site. We're satisfied that the assessment provider has the space and resources to run the CPSA for the current level of candidate numbers.</p> <p>As noted in requirement 2 – Design, the assessment provider intends to move to a</p>

			<p>multi-site delivery model. They have appropriate plans in place for this.</p> <p>We advise that the assessment provider has clearly described how they ensure the provision of the CPSA 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 give an update on the move to a multi-site CPSA.</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 shown how the CPSA mark data are accurately captured and validated on the day and has described the approach to dealing with missing data.</p> <p>We saw the current processes for transcribing paper marksheets to Excel. While the assessment provider has built in safeguards, the manual transcription process introduces the possibility of error. As a result, we welcome the assessment provider's move to implement electronic marking software which will enable robust data acquisition and ensure security is maintained when downloading marks for psychometric analysis. The system is currently being piloted.</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> <p>Next submission: The assessment provider has indicated that they're developing SOPs for the use of the electronic marking software. These should be provided in the next submission, including updated contingency plans for if the software fails on the day.</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>	Yes	<p>The assessment provider has shown how the CPSA mark data are accurately processed and checked to create results and assessment outcomes for the exam board. They have described the criteria and process for making post-assessment mark adjustments.</p> <p>As with requirement 17, the process of moving to an electronic marking platform will minimise the interventions needed in combining and checking the results data. Analysis is undertaken by a dedicated psychometrician.</p>

	<p>a. approach to missing data identified during production of results</p> <p>b. approaches to post-assessment mark-data changes.</p>		<p>The assessment provider has an SOP which outlines the metrics that they'll review when considering making post-exam changes. Changes will be recommended to the exam board, if necessary, following review of the whole CPSA. While this may be appropriate as the assessment provider becomes familiar with the properties of the CPSA, we recommend that they begin developing threshold criteria for moderation of marks and cut score adjustments.</p> <p>We advise that the assessment provider has clearly described what data processing will occur 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, with the following suggested recommendation:</p> <p>Recommendation: As the assessment provider becomes familiar with the properties of the CPSA, they should begin developing threshold criteria for moderation of marks and cut score adjustments.</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 described their plans for how assessment data will be analysed and how the outcomes of the analysis will feed into post-CPSA review, evaluation and decision making, to demonstrate that the assessment produces reliable outcomes. They've described how psychometric analysis will be used to monitor station and examiner performance and improve the CPSA.</p> <p>We noted in our review that the final format of the analysis will depend in part on the standard setting method chosen.</p> <p>We advise that, based on the other elements of their submission, including descriptions of the quality assurance process and how the assessment provider intends to use the analysis to feed into reviewing stations, examiners and SPs, the assessment provider has appropriately described their approach to how they will analyse the CPSA.</p> <p>Next submission: The assessment provider should provide an example of the analysis of the CPSA, showing how outcomes of the analysis have fed into post-CPSA review,</p>

			evaluation and decision making.
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 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 saw evidence from earlier years that the assessment provider makes use of the external examiner as a critical friend, with opportunities to review stations before the OSCE, to observe on the day and attend and input into the exam board.</p> <p>Given that the assessment provider had yet to run the CPSA at the time of submission, we recommend that they should ensure that they have a number of external perspectives feeding into the development and review 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 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

The assessment provider has acknowledged the report and has confirmed it provides an accurate summary. They have no points on which they feel they need to provide a response at this time.