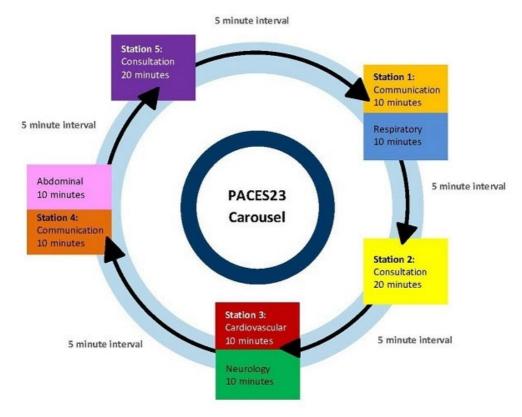


Clinical Examining Board Chair's letter - September 2023

MRCP(UK) Part 2 Clinical Examination (PACES)

PACES23 Update

We look forward to implementing the new format examination known as PACES23 from the start of this coming diet (2023/03).* The examination will continue to test the same clinical skills within a five-station set up but with some variation to the encounters.



*PACES23 will be introduced for candidates sitting in Singapore from early 2024.

A comprehensive range of resources for candidates and examiner to ensure that they are prepared for the new format of PACES include:

- Informative videos of the new encounters. There are a series of informative videos which outline the new 10-minute Communication and 20-minute Consultations within PACES23.
- Examiner webinar A recording of the examiner webinar held on 4 August 2023 is available on the MRCP(UK) PACES23 web page.
- Examiner online training. In preparation for the new format of the examination (PACES23) we are required by our regulator, the GMC, to ensure our examiners are fully trained before examining in the new carousel. All examiners are required to watch a short presentation which explains the changes to the examination and complete an assessment module. The whole process should take about 30 minutes. Examiners will not be eligible to examine until they have completed the online training module.

Keep an eye on the PACES23 web page on the MRCP(UK) website for more information.







New Senior Examiner Appointments

We would like to congratulate Dr Matt Thomas (RCPE) and Dr Rasha Mukhtar (RCP), who have been appointed to succeed Dr Rod Harvey (RCPE) and Dr Abdul-Majeed Salmasi (RCP) as senior examiners for PACES examinations from this autumn. Dr Matt Thomas is a consultant geriatrician at Poole Hospital and Dr Rasha Mukhtar is a consultant endocrinologist at Frimley Park Hospital. Both Dr Thomas and Dr Mukhtar have several years of experience as PACES examiners. Dr Thomas chairs and examines in the UK and internationally; has 10 years' experience as a regional advisor and a previous member of the MRCP(UK) Scenario Editorial Committee. Dr Mukhtar also undertakes PACES hosting in addition to chairing and international examining activity on behalf of MRCP(UK). We wish to thank both Rod Harvey and Abdul-Majeed Salmasi for their contribution to PACES.

2023/1 and 2023/2 diets

The 2023.1 diet ran from the end of January to early April. A total of 2469 candidates sat the examination (1264 in UK centres and 1205 internationally), with an overall pass rate of 52.1% (58.8% in the UK and 47.5% internationally).

The 2023.2 diet started on 2 June offering 1403 examination spaces in the UK and 608 spaces internationally. Full results from this diet are not yet available.

2023/3 diet

In 2023.3 the total number of spaces is expected to be 1410 in the UK and 1324 internationally. Due to anticipated large numbers of applications it has been agreed to use prioritisation criteria, as publicised when allocating places.

Industrial action

Four centres were affected by the second round of industrial action by trainee doctors in England, due to the impact on examiner availability. This included one RCP examination centre being reduced to a single day while another ran single rather than double cycles. Candidates affected were provided with alternative spaces during the diet or prioritised for the next diet. We would again like to thank the PACES team at RCP for their hard work in ensuring that the impact on candidates was minimised by continuing to run centres where possible. We will continue to monitor the situation and will ensure that candidates are kept informed if scheduled centres are affected by future action.

PACES Champions awards 2023

The PACES Champions awards are designed to recognise individuals for their commitment to the PACES examination. The deadline for nominations is 29 September 2023. Details of how to nominate can be found here.

Dr Stuart Hood
Chair
MRCP(UK) Clinical Examining Board
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Prof Hasan Tahir Medical Secretary MRCP(UK) Clinical Examining Board hasan.tahir@mrcpuk.org







Hot Topics – September 2023

- ❖ Appeals: Examiners may be contacted for their comments on appeals. It is a duty of the examiners to respond to any such requests for further information from Central Office. We are maintaining a register of those examiners who do not respond to multiple emails. This allows us to deal with appeals in a fair and consistent manner.
- ❖ PACES23 Pass marks: With the introduction of PACES23 we need to ensure that the standard of the examination remains the same and that no candidate is disadvantaged or advantaged by the changes. This involves a standard setting exercise to determine the pass mark for each skill. This means that release of results will be delayed to ensure the pass rate does not change significantly. Further details regarding the release of results for the first 3 diets of PACES23 can be found here.

Post cycle discussion will still involve reviewing the eCPS spreadsheet but the pass marks for each skill will be undetermined and will therefore not be shown. We will therefore be unable to discuss "close fails" as we currently do. However, a score of <50% of the available marks for any skill is very likely to represent a fail and a score of >75% of the available marks is likely to be a passing mark for that skill. For marks between 50 and 74% for any skill please scrutinise for 2-point examiner discrepancy and ensure administrators ensure comments are made to justify U or B marks.

The pass mark for Skill G (Maintaining patient welfare) is unlikely to change, so please discuss and recommend whether a candidate who scores 2 unsatisfactory marks at a single encounter should pass or fail.

❖ Calibration: A recent incident has highlighted the importance of calibrating patients without knowledge of the patient's signs or diagnosis. Examiners should calibrate from the candidate's perspective and decide for themselves which signs are present after assessing the patient. Prior knowledge of the diagnosis or signs may influence the calibration process to the detriment of candidates. Hosts are asked to reserve patient details unless specifically required.





