Final Report

Thames Valley and Wessex (TVW) Primary Care Fellowship in Exam Support – Thames Valley

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I applied to the exam support fellowship post shortly after receiving my GP certificate of completion of training (CCT). During my farewell meeting with my educational supervisor (ES), we reflected together on my training journey. My ES congratulated me on passing the MRCGP examinations on first attempts but noted that he expected that I would score higher on the RCA (Recorded Consultations Assessment). I too, was hoping for a higher grade and upon looking into this further, it was interesting to read through the MRCGP interim and annual reports on their examinations results. In terms of source of Primary Medical Qualification and binary ethnicity, the reports noted a significant differential performance in both the RCA and the AKT. The GMC concluded that the reasons contributing to this are "multifactorial and are unlikely to be solely due to the format and nature of the exit examination or bias (conscious or unconscious) amongst examiners".

In the initial few weeks of my fellowship, I had the opportunity to be able to support two GP trainees in the Oxford Scheme with their preparation for the consultation skills exam (RCA back then). One of the trainees was sitting the RCA for the third time and the other trainee was struggling to meet the exam requirements in gathering satisfactory and suitable videos by the submission deadline. This was very rewarding and an educational experience for me. I was very pleased when they both passed their RCA and provided me with constructive feedback. In addition, this was a good opportunity to research what resources were available to support the trainees in their MRCGP examinations.

After this initial induction and research period, I consulted with my mentor. I was informed of the low uptake for the examination support sessions offered by the local training programmes among trainees. Having recently trained locally in the deanery, I was not aware of all the support that is available and thought it would be useful to inform both trainees and trainers of the support sessions available. In addition, we discussed the uniqueness of Primary Care practice in the UK compared to other parts of the World and keeping in mind the substantial percentage of international medical graduates (IMGs- 57% of national trainees at the time) who might not be used to the UK's examinations format which could be a contributing factor to the differential performance in both the AKT and RCA. Hence, I sat the aim of my project to generate a user-friendly booklet with easy access to a summary of resources that trainers and trainees found most useful in preparation for the MRCGP examinations as well as a list of what resources are offered at the deanery level to GP Specialty Trainees in Thames Valley.

I started with a qualitative analysis of 13 completed interviews (done both face to face and through email responses) with current and former trainees who have successfully completed both the AKT and RCA. These interviews were made of open-ended questions and focused on what resources were

found to be most useful in preparation for the examinations as well as top tips for preparation and the exam day.

Afterwards, I liaised with local training programme directors and the GP school to gather a comprehensive list of the sessions and courses that are available and currently in offer in Thames Valley. This process of data gathering was later complicated by the merger between HEE and NHS England as some training providers were unsure if the funding would carry on after the merger. The final list was subsequently shorter and incomplete pending the finalization of the deanery led courses that is expected to start from April 2024. In the meantime, current trainees will benefit from monetary support towards AKT and CSA online courses until March 2024.

I also thought that it would be a good idea to approach trainers by sending a survey out to ask about the following:

- how involved they are in supporting their trainees with exams preparation
- if they think it would be beneficial to spend more time during tutorials to help trainees with exam preparation
- how confident they would feel with their knowledge of the examinations format and resources available
- if they expect the VTS to be the main support for exams rather than the trainers and finally
- what support they currently provide to trainees in terms of AKT preparation.

It was felt that it would be best to attend the Thames Valley trainers' conveners meeting to gather this data. Attending this meeting was very helpful, it was a good opportunity to learn about the difficulties and challenges trainers face and the types of obstacles they have to come over and solve in several aspects including finances, recruitment and trainers' education.

I also had the opportunity to present my project aims and objectives and I had some very useful and beneficial suggestions from trainers' representatives to be included in the final report.

I had 21 responses from current trainers and the responses were very insightful in shedding a light on the trainers' awareness of resources available, their views on being more involved in their trainees' exams' preparation as well as what support they already provide.

The merger, low number of responses to surveys, difficulty accessing large number of trainers and necessity of the final booklet to go through several approval stages did feel like "the main bumps" along my fellowship journey. However later, I came to appreciate this real-life experience and challenges of going through an improvement project. Identifying a cause for the problem in the question, gathering data to get stakeholders' views on ways to solve it and implementing the change is much harder done than said. However, this made the final result even more rewarding.

The final version of the resources booklet that I worked on was handed over the Associate dean for exam support, it was found to be very helpful by some of the trainers, trainees as well as some of the GP school faculty and staff who reviewed it. This is awaiting the finalization of local resources and courses that will carry on in the new year prior to it being shared with all trainees and trainers in Thames Valley. A copy of it will also be uploaded to the deanery's website and sent twice a year in August and February (in order not to miss out late joining trainees) via email from the deanery.

This is a summary of the main information contained in the booklet:

- Introduction to MRCGP Examinations
- Format, Duration, and When to sit?
- Latest Performance Statistics

- Links to check dates of upcoming diets and booking + Reasonable adjustments
- AKT resources list with direct links and prices if applicable
- SCA resources list with direct links and prices if applicable
- Lists of what is on offer at the local deanery level with contact emails to book/ enquire
- Exam strategies and tips shared by previous trainees

Upon discussion with the exam support team at the deanery, we are hoping that this booklet will be particularly helpful to IMGs as they might be less aware of several online resources and question' banks that UK PMQ holders would have most likely used during medical school exams preparation.

The fellowship study budget has allowed me to train to become accredited in lifestyle medicine. I enrolled into the British Society of Lifestyle Medicine accreditation programme in September 2023, and it will probably take me a year to complete it. Lifestyle is part of our everyday work; it is an important aspect of every consultation yet there isn't formal evidence-based education in UK and most international medical school's programme. Its importance and research are emerging and expending. In addition, it is very important for us as healthcare professionals and trainees to be aware of lifestyle medicine for our own wellbeing, to improve our overall physical and mental health and eventually performance in our careers and training journeys. I am hoping that I will be able to share my learning outcomes with my colleagues at work as well as trainees that I will be working with and hopefully one day if I become a trainer.

I would like to also mention how beneficial and informative the CPD component of the fellowship has been. I found the sessions on values, strengths, and personality types, as well as the facilitation course day and the compassionate leadership talk to have very strong take home messages for me that were very insightful.

Finally, it has been great to meet several colleagues and educational pioneers in TVW and to have the opportunity to have a non-clinical aspect in my working week that helped in diversifying my GP work schedule and learning new skills.