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Candidate perceptions of the UK Recorded Consultation Assessment introduced during the COVID-19 pandemic: cross-sectional study

A. Niroshan Siriwardena^{1,2}, Vanessa Botan¹, Despina Laparidou¹, Viet-Hai Phung¹, Peter Cheung², Adrian Freeman³, Richard Wakeford⁴, Meiling Denney², Graham R Law¹

1 University of Lincoln, 2 Royal College of General Practitioners,
3 University of Exeter, 4 University of Cambridge



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Background

Challenges of conducting face-to-face Objective Structured Clinical Examinations (OSCEs) during the pandemic.

The Recorded Consultation Assessment (RCA) was rapidly developed to replace the Clinical Skills Assessment (CSA) or UK general practice licensing during COVID-19.

Following a short pilot a larger pilot was conducted with 1551 GP trainees in Specialty Training Year in July-August 2020.

Each candidate provided 13 patient consultations (telephone, video, face-to-face) recorded on, or uploaded to, a specially customised online information technology platform.

Two examiners reviewed each consultation using an assessment grid.

Aim

To evaluate candidate perceptions of the RCA and explore the relationship with performance.

Methods

Design: Cross-sectional survey of RCA candidates with attitudinal (Likert), demographic, and free text response options.

Participants and/or data: All candidates invited to participate.

Ethical approval: University of Lincoln Human Ethics Committee.

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Analysis

Quantitative descriptive, factor analysis and regression supported by Stata 14

Qualitative thematic analysis of free text responses supported by NVivo 12.

Survey

Ease of collecting, recording, submitting and uploading consultations.

Whether consultations reflected the variety of GP work across the curriculum.

Perceived test fairness.

Ease of use of online platform.

Information about the exam handbook or frequently asked questions (FAQs).

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Whether consultations mainly conducted remotely via audio, remotely via video, face to face or a mixture of these.

Trainer review of consultations before submission.

Demographic questions on candidate gender and whether English was their first language.

Free text option asked, 'Do you have any additional comments?'



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Questionnaire responders

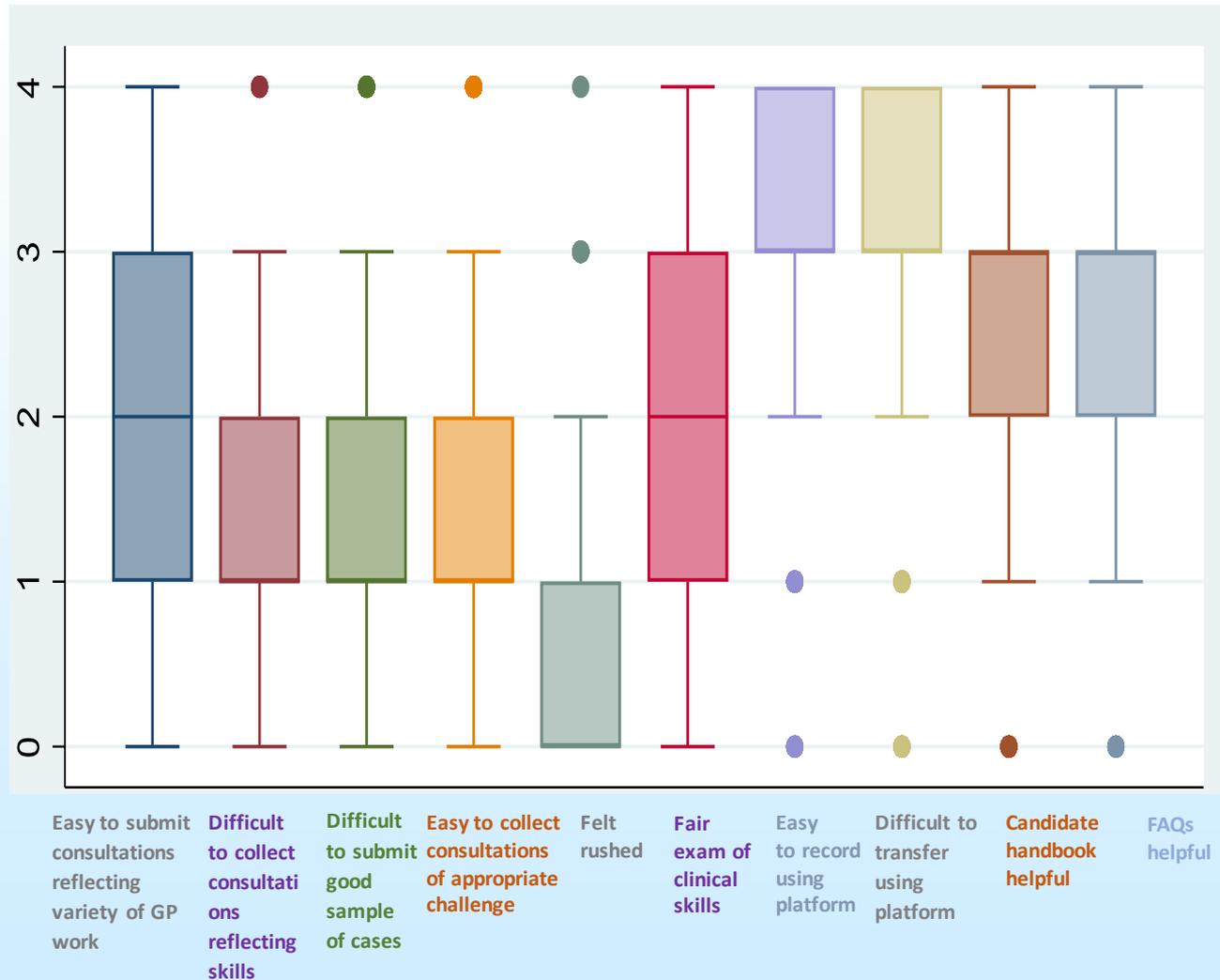
645 of 1551 (41.6%) candidates completed a questionnaire

364 of 645 (56.4%) permitted linkage with performance and demographic data.

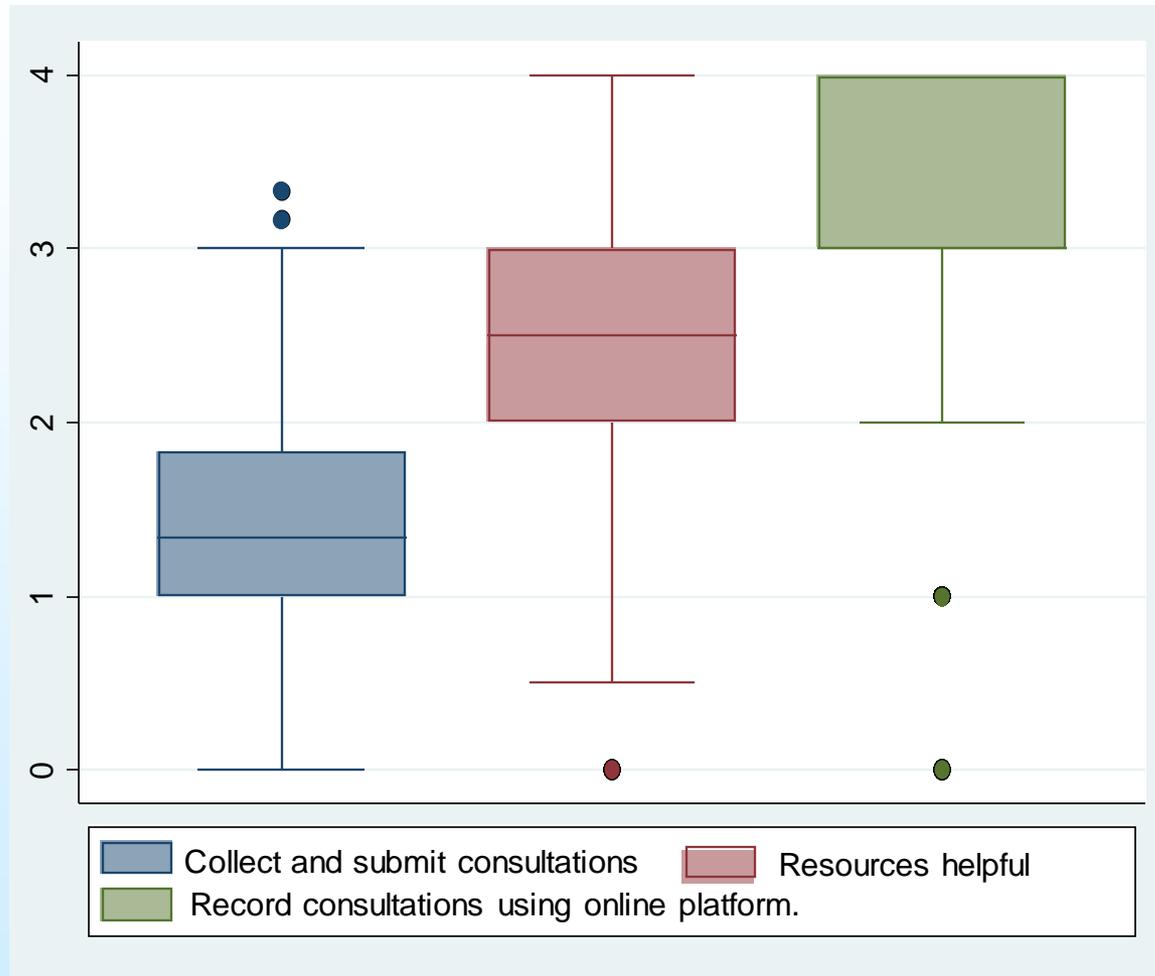
Responders vs non-responders

- No difference in gender ($p=0.35$) or candidates declaring disability ($p =0.96$).
- More White than ethnic minority ($p=0.005$) and more UK compared to non-UK candidates completing the questionnaire ($p=0.003$).

Candidate item scores



Questionnaire subscale scores



Thematic analysis

Theme 1: Assessment experience

Perceptions of RCA and compared with CSA

Reflects work and skills vs unrepresentative

Difficulties finding, consenting, consulting and selecting cases

Fairness overall and compared to CSA vs unfair

Impact on individuals, training, work, and patients

Theme 2: Resources and support

Organisational problems with exam developed at short notice

Logistic, equipment and exam barriers and costs

Guidance and communication problems

Theme 3 Digital platform

Theme 4 Suggestions for improvement

More time, clearer guidance

Predictors of RCA pass

Predictor		Odds ratio	95% CI		P
Sex (Male)		0.48	0.23	1.02	0.055
Disability (Yes)		0.48	0.18	1.30	0.15
Ethnicity (White)		2.99	1.23	7.30	0.016
PMQ (UK graduate)		6.88	2.79	16.95	<0.001
English first language (Yes)		5.11	2.08	12.56	<0.001
Attempts	Second	1.73	0.62	4.82	0.29
	Third +	1.78	0.62	5.11	0.28
Perceptions of exam	Exam satisfaction	1.56	0.85	2.88	0.15
	Resources helpful	1.34	0.80	2.24	0.27
	Digital platform	0.85	0.58	1.24	0.40
Consultation type	Mainly audio	0.61	0.25	1.50	0.28
	Mainly video	0.65	0.07	5.63	0.69
	MainlyF2F	1.88	0.27	13.35	0.53
Trainer review	Some	0.63	0.10	4.07	0.63
	All	0.50	0.08	3.11	0.46

Conclusion

The RCA was feasible and broadly acceptable

Candidates experienced challenges

Suggested areas for improvement included:

- more time to record and submit cases, per case and overall
- additional information (e.g. photos) to be submitted
- clearer guidance on procedures, case suitability and marking
- fairness for IMGs and less than full time trainees
- more detailed feedback from exam and trainer were requested.



Thank you for listening!

nsiriwardena@lincoln.ac.uk

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