

Intercollegiate MRCS Part B (OSCE) Examiner Briefing

Examiner Briefing

Will cover:

- Timing arrangements & management of station
- Action to be taken in the event of an alarm
- General points
- Marking & collection of mark sheets
- Station allocations & Layout of centre

All the OSCE Stations will contain:

- A definition of task(s) to be performed by candidate
- Instructions to candidates, examiners and patients (simulated or real)
- A marking sheet
- A list of requirements (e.g. equipment)

Examiner Instructions 1

- **After briefing you must attend your designated station**
 - For stations involving patient/cadaveric material contacts, please follow dress code
 - Switch off mobile phone for the duration of circuit
 - Carefully study all the documentation provided
 - If you find any mistakes and/or ambiguities with the marking format please report this immediately to the Supervising Examiner for guidance
 - Track-changed suggestions should be made on **spare** copies of the scenarios and handed to Exams Staff
 - Please do not make any changes to live scenarios without discussion.
 - Please check scenario carefully even if you have examined previously – they often change
 - If a patient does not turn up, your station may need to be changed at short notice.

Examiner Instructions 2

- Decide on layout of station and positioning
- Examine (all) patients and confirm physical signs
- Check simulated patients' understanding of scripts/scenarios
- Check that all required props/equipment are available, functioning and match the scenario instructions
- Check the maximum mark available in the scenario documentation adds up to the correct amount
- Make certain that you are clear about what you are being asked to do, if not ask the Supervising Examiner
- Inform the Supervising Examiner if you have any uncertainty about the subject matter you are examining
- Leave yourself enough time to prepare to examine the station

Examiner Instructions 3

- There may be a maximum of 5 stations that use **tablet computers**. These are to allow candidates to zoom in to an image
- Read the scenario and instructions in advance and be aware what is required of the tablet for that scenario
- Two hard-copies of the image will be provided in the event of a malfunction (one for the examiner and one for the candidate)
- In the event of a malfunction:
 - Exams Staff should be notified immediately
 - Candidates should be re-assured that they will not be disadvantaged
 - The hard-copy images should be used.
 - If the candidate is disadvantaged time-wise they will be allowed to sit the entire station again at the end of the circuit

Timing & Managing the Station 1

There will be three signals:

1. For the candidate to move on to the next station and read the Instructions. The task/questioning must stop immediately
2. A further signal after one minute for the candidate to enter the station and commence the task
3. A signal at six minutes; in Clinical Examination and History Stations this will indicate the time for the candidate to end the task and for the questioning period to start
(*Supervising Examiner will inform you of the exact sound of each signal)

Timing & Managing the Station 2

- In station, greet candidate and check candidate number.
- Follow instructions for examination technique and marking.
- After 6 minutes the signal will sound, indicating a change of activity in Clinical Examination and History stations but for most it is simply an indication of 3 minutes remaining.
- At the end of 9 minutes another signal will instruct candidates to move on to the next station.
 - Candidates must move on at this point, regardless of stage they have reached. College staff will guide the candidates.
 - Candidates who complete the station within time must remain in the station until the signal to 'move on'.
 - Candidates who finish the station early and there is time-permitting are allowed to revisit questions they did not previously attempt to answer.
 - Examiners should check the location/direction of the following station and tell the candidate how to get there if necessary.

Prompting/Script

- Examiners should read the questions as stated in the script in the first instance.
- It is important candidates receive the same experience of a question across all centres
- If the candidate fails to respond, one attempt can be made to re-phrase the question if there is sufficient time remaining.
- The re-phrasing should be made in a manner that does not lead the candidate.

Marking (1)

- You must complete your mark sheets in full
 - No half marks to be used
 - The mark sheets will guide the range available: minimum is 0, do not leave blanks
 - Use the whole range of marks and grades
- Mark the domains shown on the mark sheet separately and independently of each other, according to the guidance given
- Do not add domain marks to decide on your overall judgement
- Do not ignore small mistakes and mark according to the mark sheet guidance
- The overall judgement should be based on your assessment of the candidate's performance as whole
- Overall assessment is Fail, Borderline or Pass
- **Ensure** the mark sheet is **not visible** to the candidates

Marking (2)

- In double manned bays agree a single overall assessment
- One minute is available for this process whilst the next candidate is outside reading their instructions
- Mark sheets will be gathered and checked frequently – these must be fully completed

Veto Mark

- No concept of a “veto mark” or “killer station”
- Outcome of OSCE will not be determined by the recording of an overall judgement of fail in a single station
- Your judgement is one of many

Emergency Evacuation

- If an emergency evacuation of the centre is required you should remain with your candidate/patient/actor and proceed to the evacuation point
- Exam will recommence at the beginning of the station that the candidate had started.

General Points 1

- If a candidate starts the station incorrectly you should invite him/her to re-read the instructions
- In bays involving scripted questions, specific guidance will be given as to how to adjust for candidates whose subsequent answers may be based on an initially incorrect response
- In stations involving history taking/examination examiners should observe and not interrupt candidates for the time allocated for the task unless the patient is being hurt or embarrassed

General Points 2

- Candidates who complete the observed task within the 6 minutes allowed can indicate to you that they are ready to be questioned
- Candidates must, if necessary, be interrupted and moved onto the questioning at the end of the 6 minutes.

General Points 3

- Candidates have been instructed to follow a specific dress code throughout
 - Arms bare below the elbow
 - No jewellery on hands or wrists with the exception of wedding rings/bands
 - Either no tie or tie tucked in
 - Face must be uncovered
- If candidates have a religious or cultural difficulty in complying with the code the minimum requirement is that it is to be followed in any station involving contact with a real or simulated patient
- There is no need to swap examiners if a candidate is known to you.

General Points 4

- If any untoward events occur in a station please complete an incident report form
- Lay and clinical examiners should report 1) any issues with the station and 2) any actions which stray from the guidance issued
 - Any actions by a fellow examiner that stray from the guidance issued should be reported immediately
- After patient/cadaveric material contacts, candidates and examiners should use the hand gel provided
- If candidates are seen holding/using a mobile phone or similar device during the circuit they will be deemed to be cheating
- If a candidate exhibits any unprofessional behaviour (e.g. swearing) during the exam, this should be reported to Exams staff for investigation of potential malpractice
- If you are examining in a Comms Skills station please ensure you retain any paper/notes held by the candidate
- Results are not available on the day.

General Points 5

- Observers may be present
 - There will not be more than one per station
 - Intercollegiate Assessors
 - New trainee examiners
 - Approved interested parties
 - Intercollegiate Assessors take precedence over an observer
 - Observer/Assessor should be as unobtrusive as possible and not interfere in your running of the station.

General Points 6

- If allocated as an assistant in the single manned clinical skills/patient safety stations, you must not play any part in the conduct of the examination or the marking
 - These are single examiner stations
 - Your role is purely to assist as required by the candidate and/or the examiner

General Points 7

- You should not leave your station once the circuit has begun
 - There is no time between stations for phone calls/ coffee breaks etc - rest breaks will be provided
- You should not do anything that might distract the candidate
- There will be a short examiner debrief meeting at the end of the day
- You are not permitted to leave the centre until the marks have been checked, collated and verified and the Supervising Examiner has confirmed you are free to leave

Appraisal & Feedback

Two types of feedback:

- To examiner - appraisal will be conducted by senior Intercollegiate Assessors.
- By examiner - examiners invited to give feedback on the performance of the station with suggestions for improvement
 - Examiners should not attempt to alter any aspects of the station whilst the circuit is in progress
- If you are examining in a pilot station you must complete a feedback form

Equality and Diversity

- Examiners should be mindful of ICBSE's (and their own) commitment to promoting Equality and Diversity whilst examining
- You should act in a fair, consistent and transparent manner
- You should avoid any behaviour that may be construed as discrimination, harassment or victimisation during the examination
- All candidates should be treated equally regardless of any of the 'protected characteristics' as covered in the relevant legislation.

Standard

- The standard to be applied to every candidate is that of a trainee competent to enter higher surgical training.

Key Points

On Arrival

- Familiarise yourself with the station
 - Discuss scenario with lay examiner/patient/actor
 - Decide the standard for your station *before the first candidate comes in* – not after the first few have been through – and stick to it
 - Check props and maximum mark figure on paper work

Questions

- Read questions as stated in the script
 - You may only re-word/paraphrase questions after a candidate has failed to satisfactorily understand the question
 - Do not allow yourself to fail to complete all questions

Marksheets

- Ensure mark sheets are fully completed including the global rating

Standard

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Any Questions?



The Assessors

Assessment Process

- ICBSE and therefore college independent
- Assesses the whole of MRCS except for candidate performance
- Assessment feedback to Exam Supervisor
- Briefing to examiners & candidates at beginning & end of examination

Assessor Behaviour

- Enter the exam station before the candidate
- Leave the exam station after the candidate
- Will stay out of your way
- Ask to see the final marks
- May make a quick comment after the final mark

Common Examiner Errors

- Off piste
- Not reading the words of the question
- Missing a question
- Prompting
- “If time permits” — asking extra questions

Common Examiner Errors

- Letting the candidates see the mark sheet
- Sitting behind the desk rather than observing candidate performance closely
- Conversation with the candidate after the last question

Good Examiner Performance

- Clear introduction and closure
- Appropriate body language (active engagement)
- Supportive use of question rephrasing if candidate fails to understand the question

Feedback

- After a candidate exits
- At break times
- During a free slot in the exam
- Debrief after the exam has finished
- Via the assessment spreadsheet
(comments normally sent out by 6 weeks
& detailed comments are an exception)