# AUSTRALASIAN COLLEGE FOR EMERGENCY MEDICINE

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# **ACEM Fellowship Examination Bulletin – February 2017**

As communicated in previous bulletins (called ESCOMMUNICATIONS), the College continues to review and refine its processes for each examination it holds. The introduction of new and revised examination formats from 2015, and associated different assessment scales and standard setting methods can present uncertainty for all involved. The Examinations Subcommittee (ESC) remains committed to the production of high quality, robust, defensible and fair examinations and is grateful for the feedback received from all members who have been involved in assisting the College to further develop and deliver the examinations.

The new Fellowship Written and Clinical (OSCE) examinations have now been in operation for two years and the structure and format of each of the examinations has been tweaked in response to feedback received and the lessons learned. We will continue to review and refine, whilst being cognisant of the need to 'bed' down the examination format and structure for trainees and those who are assisting them in their preparations.

The following refinements/changes/additions that have been implemented since the last Bulletin include:

### Changes to the number of questions to the SAQ Paper

The three (3) hour ACEM Fellowship SAQ paper will contain a maximum of 360 marks from the February 2017.1. As outlined in earlier bulletins, previous papers were in excess of 400 marks. The reduction in the number of marks is considered to be of advantage to candidates, as the total time to sit the SAQ paper remains the same.

#### **Updated SAQ Writing Guide**

Guidelines for writing the Fellowship SAQ examination paper have been updated and sent to all SAQ writers. These have now also been uploaded to the website in the resources section of the Examination page and are available to all College fellows and trainees. These replace the previous SAQ Paper Development Communication – published Nov 2015 and include tips on wording/terminology, formatting and general concepts when constructing an SAQ. These will continue to be updated to remain contemporaneous to the current SAQ paper.

#### **Feedback to Unsuccessful Candidates**

Candidates who were unsuccessful in the Nov 2017.2 OSCE received a feedback letter that included their global rating and domain scores for each of the fifteen (15) stations, the pass score for the exam and the percentage range their score was below the pass score i.e. 1-5 % below, 20-30% below. In addition, candidates also received examiner comments for some stations where their performance was just at standard or below the standard expected as indicated by the global rating. It is acknowledged that feedback on all stations where a candidate's performance was just at or below the standard expected is desirable and the College is looking at ways to further improve the feedback provided to candidates on individual stations.

As always, candidates are strongly encouraged to reflect on their individual performance, to identify those areas needing further development and to discuss their results with their DEMT, a Fellow of the College or a mentor who is supporting them in their training.

#### Weighting of Domains within the November 2106.2 OSCE (Clinical)

The November 2016.2 OSCEs included 15 stations comprising 12 single and 3 double stations held over 3 days. Single stations were of 10 minutes duration which included 3 minutes reading time & 7 minutes OSCE testing. Double stations were of 20 minutes duration which included 3 minutes reading time & 17 minutes OSCE testing. Candidates were examined on 6 single length stations on day 1, 6 single length stations on day 2 and 3 double length stations on day 3, making up 180 minutes in total examination time. All stations have equal weighting except for double stations which have double weighting or single weighting x 2.

During reading time, candidates are provided with the:

Clinical script

- Tasks that are to be completed
- What they are not to do (if thought to be applicable)
- Domains examined
- The % each domain contributes to the overall mark

Single length OSCE station assess up to three domains linked to one of the curriculum areas of medical expertise, decision making and prioritisation, communication (professionalism & teamwork and collaboration), health advocacy, scholarship and teaching, leadership and management. Double length stations can assess up to five domains. There may be sub-domains linked to an overarching domain i.e. 2 parts to medical expertise as an example.

Candidates are assessed individually for each domain using a 7 point rating scale as illustrated below:

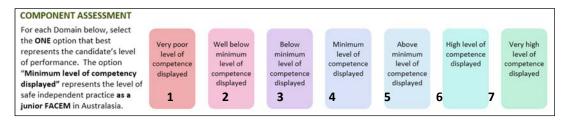


Table 1: Domain assessment rating scale

Examiners are also required to give a global rating of the candidate's overall performance for each station as illustrated in Table 2. The rating takes into account the entirety of the OSCE, and is not just the sum or average of the individual domain scores. The global rating is used in the standard setting and does not contribute directly to a candidate's examination mark.

In terms of a safely practising junior emergency physician, select the ONE option that best reflects the	Well Below Standard	Below Standard	Just At Standard	Above Standard	Well Above Standard
candidate's performance in this station:	0	0	0	0	0

Table 2: Global scale assessment rating scale

As outlined in earlier examination communication bulletins, the borderline regression method is used to derive the pass mark for each OSCE. This is done as follows:

- A single OSCE station's domain marks are proportioned, such that they sum to a factor of 1.0 (or 100%), no matter how many domains are marked.
- The percentage weighting allocated to each domain is taken into account i.e. a domain that is weighted 25% would account for 0.25 of the 1.0.
- If stations have 2 or 3 domains, they still contribute the same amount to the overall pass mark.
- Double length stations, because of double weighting, have their domain marks doubled at the end of this calculation.
- A perfect score for the whole exam is 18.0.
- A candidate gets a fractional mark out of 1.0 for each station, and the total fractions are added up. This is expressed as a % of 18.0, and is what is seen in their result. If this result is higher than the pass mark (also expressed as a %), the candidate passes the OSCE.

## **OSCE Working Party Members**

6 casual vacancies for the OSCE Working Party were advertised and filled in early February, due to people being unable to continue their work in the Working Party. There were over 50 applicants and the Examinations Subcommittee, on behalf of the Council of Education, congratulates these Fellows. There will be another opportunity to become a member on an examination working party later in 2017 when the membership of these groups is refreshed.