

Feedback on the November 2007 nMRCGP applied knowledge test (AKT)

In October 2007, the applied knowledge test (AKT) of the nMRCGP was offered for the first time, marking the start of a new era of knowledge testing in MCQ format. The AKT has now replaced both the MCQ component of the old MRCGP and the summative assessment MCQ. A pass in the AKT is a requirement for licensure for all those now entering general practice training.

The first sitting of the AKT also marked the introduction of computer-based testing. Testing centres are located throughout the UK and Northern Ireland and the new computer-based method was generally welcomed because of the increased convenience it offers candidates.

GP educators will know that we have provided regular feedback on the MRCGP MCQ for a number of years, and we will provide feedback on the AKT in a similar fashion, both direct to educationalists and on the exam section of the College website. As before, we hope that the feedback will be of benefit to programme directors and trainers in guiding the learning of GP registrars (and to registrars themselves). To this end we aim to structure our feedback using headings which relate to the RCGP curriculum documentation. We continue to welcome comments about our feedback, and these can be sent to us via the e-mail address at the bottom of this page.

Statistics

1303 candidates sat the AKT in October 2007. Their mean score was 152 out of 200 scored items, with the best candidate gaining a very impressive 191. As with the old MCQ, the pass mark for the AKT was set utilising internationally recognised statistical techniques for standard setting, including linear equating and Angoff derived methods. On this occasion the pass mark was set at 70.5%. This resulted in a pass rate of 77.1% of those taking the test.

More detailed analysis of the results showed that candidates who declared themselves as completing specialist training in 2008, had a pass rate of 87%, whilst those completing in 2009, had a pass rate of 75%. This supports the advice given in the nMRCGP regulations that candidates are most likely to be successful in the AKT if it is taken in their final year of GP training.

The mean scores by subject area were:

- 'Clinical medicine' 75.7%
- 'Evidence interpretation' 80.7%
- 'Organisational questions' 73.3%

For the sake of transparency we also report the other key statistics from this test:

Reliability (Cronbach α coefficient) = 0.89

Standard error of measurement = 5.4

Scoring items

We were pleased to note from our analysis of the test that items performed well and on this occasion none required suppression from the overall score.

Performance in key clinical areas

Providing feedback which is educationally useful but which does not undermine the security of test items is never easy. However there are a number of key clinical areas we wish to highlight to direct and facilitate learning. We have attempted to link these broadly with areas in the curriculum statements or to signpost using the curriculum map.

As is usual, candidates attempting the paper generally performed well. We were encouraged to note high scores (as in the last Multiple Choice paper) in relation to the treatment of hypertension, demonstrating ongoing awareness of developments in this important area. Candidates also performed well in items relating to the associated topic of CKD. Good performance was noted with regard to management of anticoagulation, as well as the diagnosis of psychiatric problems and musculoskeletal problems. (With regard to the curriculum, these are covered in cardiovascular problems: treatment, care of people with mental health problems: symptoms, and rheumatology: symptoms).

Areas causing difficulty for candidates

Care of acutely ill people: symptoms

Knowledge about consciousness disturbance appears to have declined compared with results from earlier Multiple Choice papers. Loss of consciousness is a common occurrence and candidates should be familiar with frequently occurring and important causes.

Respiratory problems: common and/or important conditions

In our last feedback on the MCQ paper, we highlighted our concerns about candidates' knowledge of the treatment of asthma in children. In the recent AKT, there appeared to be a lack of knowledge about the management of acute asthma. As we stated previously, national guidelines on the treatment of asthma

(and other respiratory conditions) have been available for several years and we expect candidates to be familiar with these. Perhaps much of asthma care has now passed to nurses but asthma is a common and important condition which GPs must be competent to manage.

Sexual health: treatment

Candidates performed poorly with regard to questions about the management of side effects arising from taking hormonal contraception. Again, this is core general practice knowledge, and improving sexual health is also a key Government target. The increasing involvement of nurses in the provision of contraceptive advice is no excuse for lack of familiarity with contraceptive problems.

Legal matters (curriculum map- being a general practitioner- contextual aspects)

a) Certification Items on certification were generally not well done. Certification in a range of guises is currently a remit of doctors alone so excuses about nurses do not apply here! Reports arising from the Shipman case have highlighted to all doctors the importance of correct procedures with death certification, and candidates must know these, even if they have never been involved in certifying a death in general practice. Sickness certification is a daily task of general practitioners, and the rules governing other types of certification and registration, such as those for blindness, whilst perhaps less common, should also be known.

b) Access to medical records. The law contains pitfalls for the unwary and candidates should be clear about their duties in respects of access and confidentiality.

Healthy people: promoting health and preventing disease. Primary care management

There has been a considerable amount of information distributed to GPs over the past few years with regard to the special requirements of preventive care for certain groups of patients, such as those who have had a splenectomy. We expect candidates to be aware of areas such as this that have been flagged up by the Department of Health as requiring particular attention.

Travel health (curriculum map-healthy people)

This is a large area and candidates are not expected to have detailed knowledge: we are aware that guidance changes frequently and much of the workload is dealt with by nurses. However, general principles are important and candidates should be familiar with regimes for commonly prescribed drugs.

ENT and facial problems:common and/or important conditions

This is bread and butter stuff which appears to need more focussed and detailed learning!

AKT core group

Comments or questions can be sent to: Bill.irish@southwest.nhs.uk