

FAQ

FREQUENTLY ASKED QUESTIONS



PODCAST WEBINAR

Supporting Your Registrar Preparing for the RACGP 2020 Remote Clinical Exam (RCE)

This year, in response to COVID-19 pandemic restrictions, the RACGP's Objective Structured Clinical Exam (OSCE) has been replaced by the Remote Clinical Exam (RCE).

The RACGP has prepared a comprehensive document outlining this new form of assessment which is available at the following web address or by clicking here: <https://www.racgp.org.au/FSDEDEV/media/documents/RACGP/Coronavirus/RACGP-RCE-FAQs.pdf>

RACGP Summative Assessments - Written

Applied Knowledge Test (AKT) is designed to assess applied knowledge: and the

Key Feature Problem (KFP) exam is designed to assess clinical reasoning and clinical decision-making skills via 26 'short cases'.

In 2020, it is important to note that the content of the exams (AKT and KFP) remains unchanged. It is simply that the delivery is now remote mode.

RACGP Summative Assessments – Clinical

This is the 'practical' examination. In 2020 it will be delivered remotely. It is still designed to simulate a clinical environment and typical patient scenarios that GPs encounter.

Remote Clinical Exam (RCE) vs Objective Structured Clinical Exam (OSCE)

Note: The assessment standard is the same - is the GP capable of practicing unsupervised in Australia.

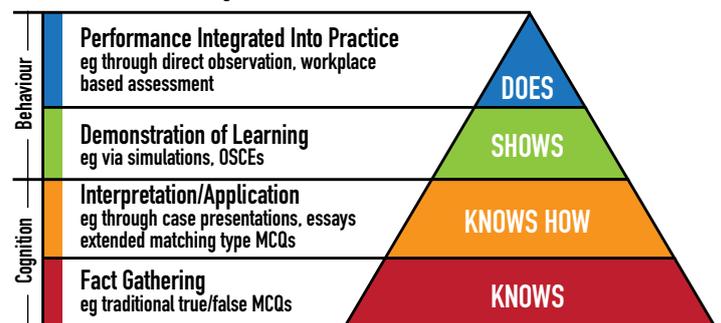
REMOTE CLINICAL EXAM	OSCE
One examiner per station	Two examiners
Greater emphasis on case-based discussion	Simulated role play focus
12-16 cases delivered over 3-4 days	14 clinical presentations
All cases equal in length (10 minutes)	Short and long cases either 8 or 19 minute duration
More reading time per case (5 minutes)	3 minutes reading time
Clinical competency rubric	

RCE - Four Types of Cases will be examined

1. Case-based discussion (high level of detail will be required to show the registrar understands the how/why/ what if of examination)
2. Consultation with a simulated patient (experienced actors)
3. Case-based discussion with descriptions of physical examination or procedure
4. Critical appraisal and case-based discussion with reference to a research paper.

Miller's Pyramid

Miller's Pyramid of Competency Evaluation Through Performance



Adapted from Burns and Mehay (2009) Miller' Prism of Clinical Competency
*Multiple Choice Questions (MCQ)

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Helping Your Registrar Prepare for the RCE

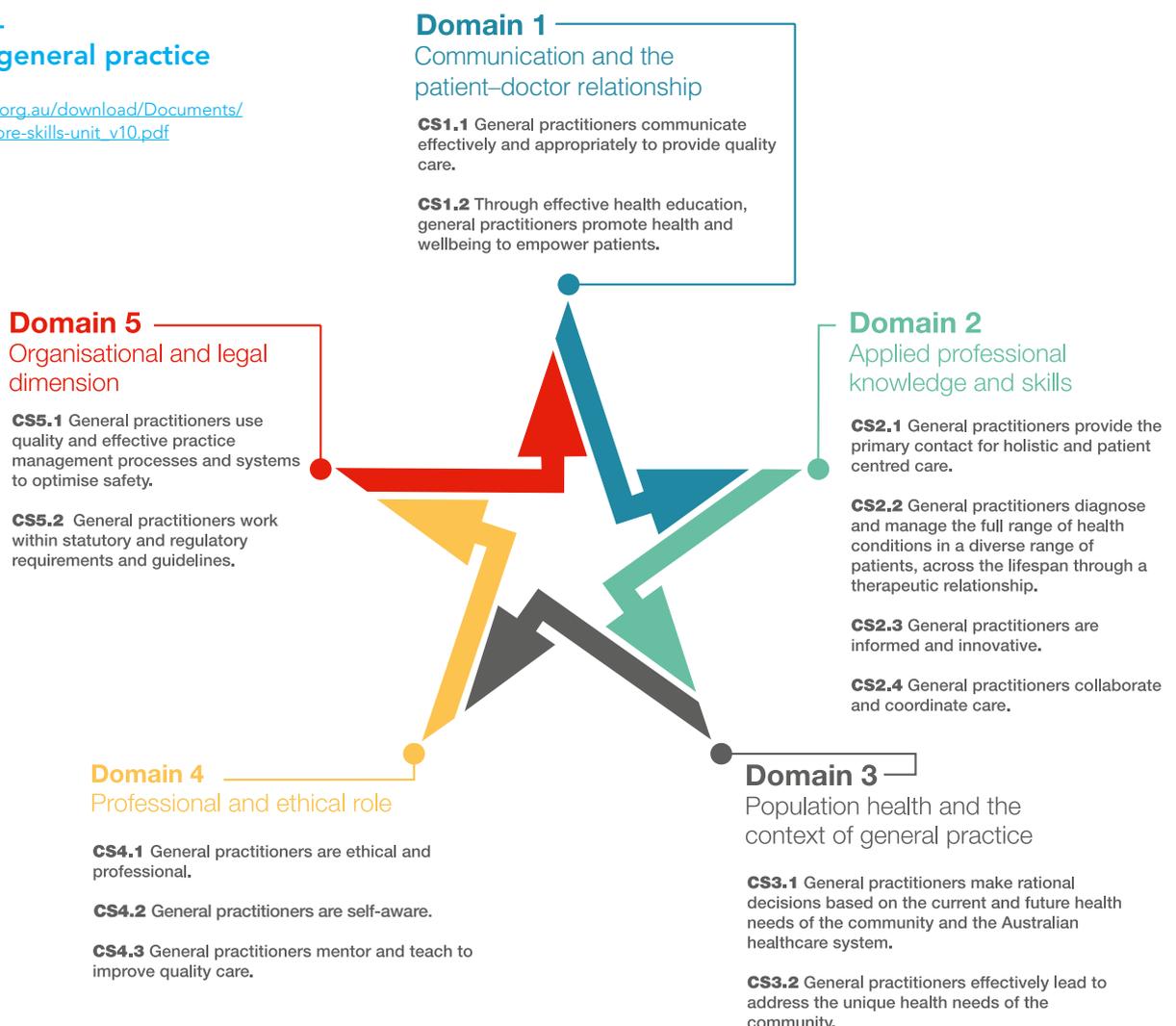
- Understand what is being assessed
 - RACGP curriculum and domains
 - Competency rubric
- Undertake focussed practice-based teaching
- Direct your registrar to appropriate clinical resources
- Provide pastoral care
- Encourage your registrar to use RACGP exam preparation resources and activities
- Encourage your registrar to learn from their clinical exposure.

TIPS

- Focus on skill development, not knowledge
- **Teach to your strengths**
- Specific focus on physical examination skills
- Consider non-clinical domains
- Don't get bogged down with the new format
 - **teach generic skills**
- Ask registrar to document their reasoning in the notes
- Ask the registrar to review the competency rubric and self rate to prioritise learning needs
- Use the GPSA guides and teaching plans
- **Monitor your registrar's anxiety and stress.**

Core Skills - the star of general practice

https://www.racgp.org.au/download/Documents/Curriculum/2016/core-skills-unit_v10.pdf



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What is Being Assessed – Ten Clinical Competencies

1. Communication and consultation skills	<p>a. Communication</p> <ul style="list-style-type: none"> – Rapport building – ROLE PLAY – Active listening– ROLE PLAY – Communication in challenging scenarios e.g. breaking bad news – ROLE PLAY – Brief intervention and motivational interviewing TEACHING PLAN and the GPSA Communication Skills Toolkit <p>b. Consultation skills</p> <ul style="list-style-type: none"> – Consultation structure and timing – DIRECT OBSERVATION, VIDEO REVIEW, ROLE PLAY – Patient agenda – ROLE PLAY – Use ICE – ideas, concerns, expectations Or – Access the GPSA Practice-based Teaching Guide
2. Clinical information gathering and interpretation	<ul style="list-style-type: none"> • History taking – TEACHING PLAN • Physical examination – TEACHING PLAN • Rational test ordering – TEACHING PLAN • Also access The GPSA Educational Resources Guide and https://www.youtube.com/user/GPSynergytraining/playlists
3. Making a diagnosis, decision making and reasoning	<ul style="list-style-type: none"> • Differential diagnosis – CASE DISCUSSION • Clinical reasoning – GPSA Teaching Clinical Reasoning in General Practice Guide • Problem list - CASE DISCUSSION
4. Clinical management and therapeutic reasoning	<ul style="list-style-type: none"> • Rational prescribing – Rational Prescribing in General Practice Guide • Medications – eTG, AMH • Non-pharmacological therapies – HANDI
5. Preventive and population health	<ul style="list-style-type: none"> • Screening and prevention • Health promotion – TEACHING PLAN • Brief intervention and motivational interviewing – TEACHING PLAN • RACGP Red Book
6. Professionalism	<ul style="list-style-type: none"> • Professional and ethical practice - TEACHING PLAN • Critical incident management <ul style="list-style-type: none"> – Medical Board Good Practice Guide – MDO resources (visit both MDA and Avant) – GPSA Teaching Professionalism in General Practice Guide

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7. General practice systems and regulatory requirements	<ul style="list-style-type: none"> • Computer software • Recall systems • Medicolegal documentation • Confidentiality and consent • Infection control • Review MDO resources (MDA and Avant)
8. Procedural skills	<ul style="list-style-type: none"> • Demonstrates procedural skills - DEMONSTRATION • Refers appropriately • Murtagh's Practice Tips • RTO resources
9. Managing uncertainty	<ul style="list-style-type: none"> • Manages uncertainty • Uses time as a diagnostic tool • Manages undifferentiated presentations • GPSA Managing Uncertainty in General Practice Guide
10. Identifying and managing the significantly ill patient	<ul style="list-style-type: none"> • Can identify and manage the significantly ill patient • Aware of own limitations <ul style="list-style-type: none"> – https://resus.org.au/guidelines/ – RTO resources



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Random Case Analysis (RCA)

Although not part of the RCE, interrogating your registrar's learning through RCA is arguably the best way to help them with their exam preparation.

- What/when?
- Why/how come?
- What if?

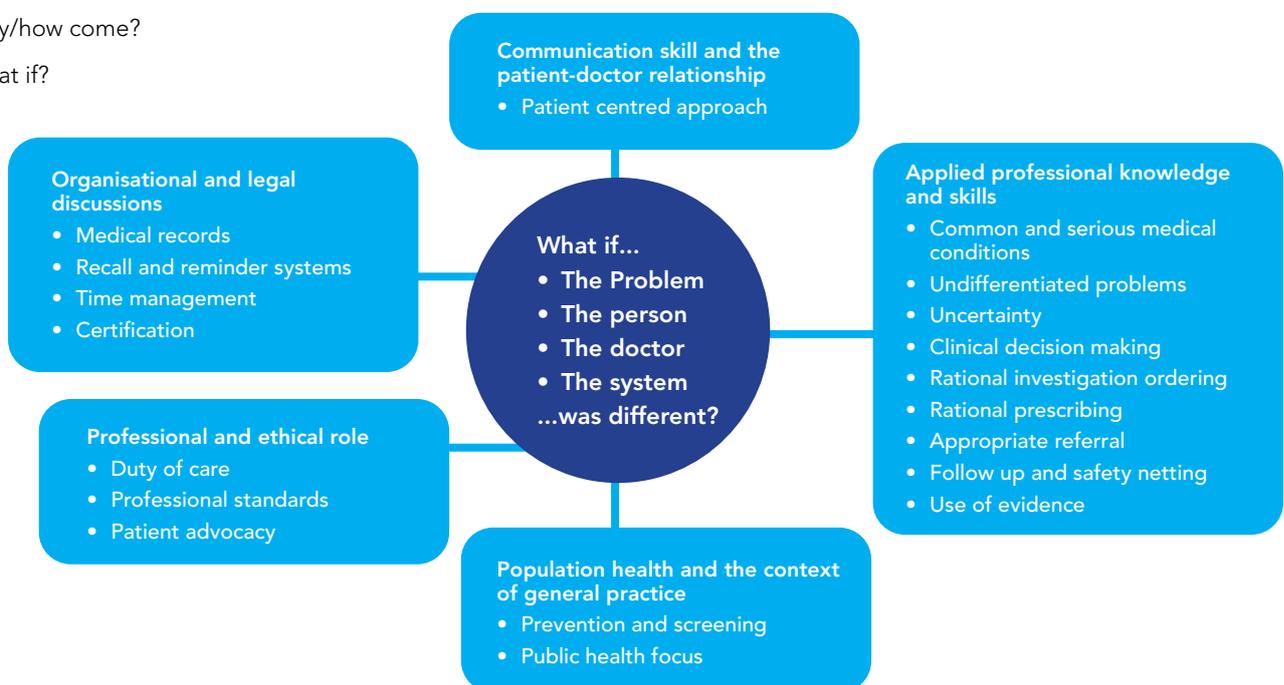


Figure 1. Framework for random case analysis using the RACGP domains of general practice.

Useful links

RACGP's FAQs regarding the RCE:

<https://www.racgp.org.au/FSDEDEV/media/documents/RACGP/Coronavirus/RACGP-RCE-FAQs.pdf>

RACGP Curriculum: https://www.racgp.org.au/download/Documents/Curriculum/2016/core-skills-unit_v10.pdf

GPSA's Collated Educational Resources: <https://gpsupervisorsaustralia.org.au/download/8233/>

GPSA GP Supervisor Guides: <https://gpsupervisorsaustralia.org.au/guides/>

GP Synergy "Playlists" video resources: <https://www.youtube.com/user/GPSynergytraining/playlists>

Society to Improve Diagnosis in Medicine's Clinical Reasoning Toolkit: <https://www.improvediagnosis.org/clinicalreasoning/>