# Supporting RACGP Registrars through AKT and KFP assessments

GP supervisors play a vital role in supporting their registrars through to RACGP Fellowship. However, with approximately 50 per cent of practicing GPs having not sat the written examinations in their current format, many may feel mystified about the process.

This resource aims to help supervisors of all levels of experience understand the exam process and confidently support their registrar prepare for written assessments.

### What are the key aspects to RACGP assessment?

There are three segments to RACGP Fellowship. These are:

### APPLIED KNOWLEDGE TEST (AKT)

- 150 multiple-choice questions based on clinical presentations typically seen in the general practice setting.
- Tests the application of knowledge in the clinical context of Australian general practice.
- Online exam (four hours).

#### **KEY FEATURE PROBLEM (KFP)**

- Short answer questions for 26 clinical scenarios (72 questions).
- Each clinical scenario has multiple questions, requiring either a written response (few words or phrase) or choosing a set number of responses from a selection list.
- Assesses clinical practice and clinical reasoning in general practice.
- Questions explore the candidate's understanding of the key features/critical steps in the context of each clinical scenario.
- Online exam (four hours).

### **CLINICAL COMPETENCY EXAMINIATION (CCE)**

 Candidates will be presented with nine clinical cases, which will each be 15 minutes in duration (plus reading time). Four cases will be discussions over Zoom, similar to the RCE, and five cases will be face-to-face clinical encounters.

### What should a supervisor keep in mind when preparing their registrar for exams?

The key thing supervisors need to remember when helping registrars prepare for exams is the target of the exams – the RACGP Fellowship exams assess a candidate's competency for unsupervised general practice anywhere in Australia. Therefore, it is vital GP supervisors remember this is the level of knowledge that exam candidates need to know: the exams are assessing Fellowship level, not medical school level.

A lot of supervisors who have worked in general practice for a long time may not have sat the RACGP exams. And there are also supervisors who sat the exams a long time ago. What do these supervisors need to know about the current written exams?

Approximately 50 per cent of GP supervisors have not completed the college exams in their current format. If you are one of these supervisors, what you need to understand is the exams have gone through dramatic change in the way they are processed. The written exams are done online and are no longer held on the same day; but are instead split over two days (KFP on Friday and AKT on Saturday).

For some, there is unnecessary mystery or myths about the how the exams are developed and assessed. However, the RACGP provides numerous resources to provide information which aims to best help candidates to demonstrate their ability to function as an unsupervised GP within Australia.

### Where do the online exams take place?

The online exams occur at metropolitan, non-metropolitan and remote exam centres in each state, and internationally. Each candidate is allocated a computer to sit their exam. The exams take place twice a year. For more information, visit <a href="https://www.racgp.org.au/education/registrars/fracgp-exams/exam-enrolment-instructions">https://www.racgp.org.au/education/registrars/fracgp-exams/exam-enrolment-instructions</a>

### How many candidates sit the exams?

Approximately 1200 to 1400 candidates sit RACGP exams.

### Who writes, reviews and marks the exams

The RACGP Fellowship exams are developed by GPs for GPs. The questions are written, reviewed and marked by practising RACGP Fellows from across Australia in all facets of general practice. The pass marks for exams are also set by an expert panel of practising RACGP Fellows. The majority of RACGP Fellows involved in the exam development are not employed by the RACGP, other than on a contractual basis to assist with exam processes.

The development of the exams is rigorous and subject to closely monitored quality assurance and continuous improvement. Once the questions have been reviewed and modified, a group of GPs trial the exam online, in real-time in an examination environment.

### Do the exams assess minutiae or oddities?

No. The questions are always generalised across the country to clinical scenarios GPs – wherever they are – see every day.

### How many times are the exams reviewed by practising RACGP Fellows?

**AKT:** Every question is reviewed by at least 34 RACGP Fellows (14 before and 20-plus GPs after the exam).

**KFP:** Every question is reviewed by at least 40 RACGP Fellows (20 before and 20-plus after the exam).

### Why is it important to have practising Fellows trial written exams in an exam environment?

The purpose of having GPs trial the written exams is to ensure the questions function, and not steer candidates along incorrect pathways of answers. That is, that the questions are written in a way to give the candidate the best chance to provide the correct answer.

### How are the written exams marked?

**AKT:** The 150 multiple choice questions are auto-marked.

**KFP:** There are approximately 72 items across the whole exam (26 clinical cases), marked by 72 markers each cycle. Each marker marks the same question for all exam candidates (approximately 1200 to 1400 candidates) to ensure consistency on each question.

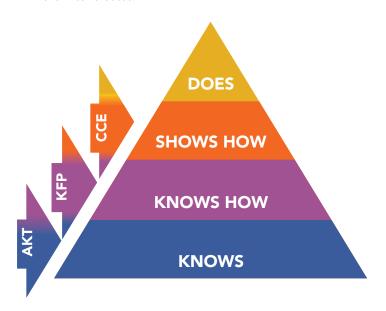
The quality assurance process also involves the marking of exam markers, to ensure they apply the answer grid consistently for each paper.

### Is the pass mark for each exam the same for each exam cycle?

No. The pass mark for each exam changes from cycle to cycle and is set by an expert panel using the Modified Angoff Approach for setting standards.

## Is there a correlation between the candidates sitting the exam and passing each component (AKT and KFP) in the same exam cycle?

The Millers Pyramid (below) shows the progression of what is needed to pass the AKT and KFP for candidates, while the table (below) shows the pass/fail correlation for the 2020.1 exam candidates.



2020.1 AKT AND KFP EXAM PASS/FAIL CORRELATION			
AKT	KFP	NUMBER	PERCENTAGE
Pass	Pass	642	68
Pass	Fail	93	10
Fail	Pass	49	5
Fail	Fail	159	17
Total		943	100

<sup>\*</sup>See RACGP public exam reports archive at <a href="https://www.racgp.org.au/education/registrars/fracgp-exams/exam-results">https://www.racgp.org.au/education/registrars/fracgp-exams/exam-results</a>

### Where is the content for the AKT and KFP drawn from?

The content is drawn from the RACGP curriculum, domains of general practice, and Bettering the Evaluation and Care of Health (BEACH) data (mostly chapter seven).

\*BEACH data shows the demographic for presentations across Australia.

While BEACH data is no longer collected, the resource is still used to inform academia, industry, and others requiring general practice data. For more information, visit <a href="https://sydney.edu.au/medicine/fmrc/beach/">https://sydney.edu.au/medicine/fmrc/beach/</a>

### Is there negative marking for incorrect answers in the AKT and KFP?

No. If a candidate answers incorrectly, they receive no mark for that question. It does not attract a negative mark.

### Is there a penalty for extra responses or overcoding in the KFP?

Any answer above what is asked for will attract a 0.25 per cent deduction on the overall score. For example, if the question asks for four answers and the candidate provides six, the extra two answers will each be penalised whether they are correct or not. Or, if the candidate gives 11 responses to a four-answer question, and only gets three answers correct they will be penalised 1.75 per cent (0.25 per cent for each of the seven extra responses). The KFP requires candidates to respond concisely to instructions, rather than providing lists of answers.

#### **OVERCODING EXAMPLE**

Supervisors should show their registrar the following example of overcoding and how it is marked, to help them understand the penalty of providing more responses than required.

#### **EXAM CASE**

David Kamsi, aged 55 years, presents with a two-week history of painless swelling in the left elbow. He is a carpenter and does heavy work but has not had any injuries.

#### Question 1.3

Considering the most likely diagnosis in question 1, what are your initial management steps? Write four (4) management steps.



### CANDIDATE'S EXTRA RESPONSES/ OVERCODING

- 1. RICE i.e. rest, ice, compression and elevation
- 2. NSAID e.g. Panadol
- 3. Aspirate and follow up with steroid injection
- 4. Educate and review
- 11 responses to a 4-answer question
- 3 correct answers
- 7 extra responses
   7 x 0.25% penalty
   1.75% deducted from final score

#### **MAX SCORE: 4**

- A. Avoidance of exacerbating activity (Score: 1)
- B. Anti-inflammatories/NSAIDS (Score: 1)
- C. Steroid injection (Score: 1)
- D. Aspiration of fluid (Score: 1)
- E. Educate/explain re benign condition (Score: 1)
- F. Ice/cold packs
- G. Compression; elevation
- H. Referral for surgery if persists
- I. Referral for surgery if persists
- J. Analgesia
- K. Imaging
- L. Antibiotic

## How can I help my registrar prepare for, avoid avoid overcoding and the subsequent marking penalties?

Discuss, teach and role-model clinical reasoning, and give your registrar ample opportunities to practise clinical reasoning with you.

Random case analysis (RCA) is a powerful teaching tool for clinical reasoning. Use RCA during your in-practice teaching and ask your registrar to provide a specific number of answers to your questions. By giving a specific number of answers, your registrar practises the same discipline required for KFP questions. This will help your registrar refine their clinical reasoning skills and avoid the temptation of "dumping" more answers than required.

You can also use GPSA teaching plans to practise clinical reasoning on specific conditions prominently seen by registrars in general practice.

Before the exam, remind your registrar to:

- Read the questions carefully.
- Provide the correct number of answers (not extra).
- Answers must be specific, concise and within context.
- Do not 'stack' more than one answer on a line.
- Avoid questions or joinings do not use "i.e." or "e.g." because if you create a list, you will overcode.
- Avoid general answers such as "educate", "review",
   "investigate", "reassure", "refer", or "RICE". If a
   candidate answers with a general response such as
   "reassure", this does not give any insight into their
   knowledge or if they can manage the condition they are
   presented with. So, do not use these general answers,
   unless they are clarified.
- Remember the AKT is designed to test the application of knowledge in the clinical context of Australian general practice.
- Remember the KFP paper is about key features, it is not a simple short answer paper where candidates list all possible answers.
- Remember the KFP paper is looking at a candidate's clinical reasoning to see if they can assess and synthesise the information they are given, and then address the individual patient and rationalise the subsequent investigation and management of the case.

### What resources are available to help prepare my registrar for the RACGP written exams?

#### **GPSA** guides

- Teaching Clinical Reasoning in General Practice at <a href="https://gpsupervisorsaustralia.org.au/download/2166/">https://gpsupervisorsaustralia.org.au/download/2166/</a>
- Random Case Analysis in General Practice at <a href="https://gpsupervisorsaustralia.org.au/download/2160/">https://gpsupervisorsaustralia.org.au/download/2160/</a>

### **GPSA** frequently asked questions

- Random Case Analysis at <a href="https://gpsupervisorsaustralia.org.au/download/3676/">https://gpsupervisorsaustralia.org.au/download/3676/</a>
- Preparing your GP Registrar for the KFP at https://gpsupervisorsaustralia.org.au/download/3973/
- Supporting GP Registrars who have Failed an Exam at https://gpsupervisorsaustralia.org.au/download/3978/

#### **GPSA** webinars

- Using Random Case Analysis as a Supervision Tool at https://youtu.be/Oc2NiliAqIM
- Teaching Clinical Reasoning at https://youtu.be/Hmca\_sohViY
- Supporting Your RACGP Registrar Through Their Written Assessments at <a href="https://youtu.be/40y8cAtQ9Tw">https://youtu.be/40y8cAtQ9Tw</a>
- My Registrar has Failed an RACGP Exam Where to Now? at <a href="https://youtu.be/Bm1ciKpbpMl">https://youtu.be/Bm1ciKpbpMl</a>

#### Teaching plans and clinical reasoning challenges

 GPSA teaching plans at <a href="https://gpsupervisorsaustralia.org.au/teaching-plans/">https://gpsupervisorsaustralia.org.au/teaching-plans/</a>

#### **RACGP Exam Support Program resources**

- Examination polices
- Public exam reports
- Examination guide
- Exam preparation courses
- Practice exams
- Exam support online (ESO)
- Exam preparation in practice
- Examiner podcasts
- RACGP clinical guidelines
- John Murtagh Library
- gplearning (online portal)
- Approved publications
- Aboriginal and Torres Strait Islander health
- Rural health
- Approved external clinical resources
- Exam preparation videos

All available at <a href="https://www.racgp.org.au/education/">https://www.racgp.org.au/education/</a>
registrars/fracgp-exams/exam-support-program-resources

### Guidelines

 Therapeutic Guidelines' digital format, eTG complete is available at <a href="http://www.tg.org.au/">http://www.tg.org.au/</a>

### How can supervisors apply to become involved in the exam assessment process?

Supervisors who would like to become involved in writing, reviewing or trialling the written exams, email your expression of interest to <a href="mailto:assessment@RACGP.org.au">assessment@RACGP.org.au</a>

Does this resource need to be updated? Contact GPSA: P: 03 9607 8590 E:admin@gpsa.org.au, W: gpsa.org.au
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