







## Statement from Chair of ICBSE re MRCS Part A & Part B, September and October 2020

Now the results of both Part A and Part B of the Intercollegiate MRCS examination have been published, the four Surgical Royal Colleges of the United Kingdom and in Ireland, and the Intercollegiate Committee for Basic Surgical Examinations (ICBSE), hope that the following information is helpful to recent and prospective examination candidates.

Firstly, we wish to emphasise that we understand how difficult and challenging the pandemic has made preparing for and sitting these high-stakes examinations, particularly as day-to-day surgical practice, which is integral to preparation, has been so disrupted for surgical trainees. The pandemic caused all postgraduate medical examinations to be postponed earlier in the year, clearly disrupting candidates hoping to take exams, and worrying for those whose career progression relied on examination success.

The four Colleges and ICBSE undertook to recommence examinations as soon as possible, with much of this effort undertaken in partnership with the Joint Committee for Intercollegiate Examinations (JCIE), which is responsible for surgical fellowship examinations, and colleges of other specialities. Changes in exam delivery and, for MRCS Part B, exam structure were necessary to allow examinations to be provided. All changes were scrutinised by the GMC, which studied and ratified detailed proposals for exam delivery and assessment of results and standard setting. Foremost in the mind of the Colleges and the GMC was to provide examinations of the same rigour as before the pandemic to maintain patient safety. Surgical trainee representatives and lay representatives were involved at key points along the pathway of change.

MRCS Part A was delivered online to avoid the risk of large numbers of candidates and staff meeting and to allow the examination to be taken outside the UK and Ireland. More than 3,000 candidates took the examination and the Colleges acknowledge the effort made by candidates to prepare and sit the exam under different conditions. Most candidates were able to complete the examination without difficulty: for a small proportion who did run into difficulty the offer was made that they would be able to re-sit shortly after the initial attempt, following resolution of the software problems. Their attempts were not counted in the number of attempts allowed at the exam, no cost was incurred and the initial results were not used in the standard-setting process. This re-sit has now successfully taken place.

The results of Part A were analysed in the standard way, which allows the proportion of candidates passing to reflect the level of attainment achieved. The standard setting process is complex and extra checks undertaken by ICBSE, unfortunately, led to a delay of five days releasing results. The Colleges wish to apologise for this again, and hope that all stakeholders understand the importance of accuracy and rigour required to deliver results. The Colleges were pleased to find that results were good, meaning the proportion of candidates passing was 42%, the highest proportion ever recorded in this exam.

Out of necessity caused by the online delivery method, the examination regulations were changed. This led to some results initially being delayed while 'infractions' were investigated. In the vast majority of cases these 'infractions' were not judged to be significant and were related to appropriate revised regulations designed to protect the standards of the examination. It is regretted that any candidate was affected by this but the Colleges hope that there is understanding that maintaining standards and thus maintaining patient safety was the cause of this new method of candidate scrutiny.

The four Colleges and ICBSE are very grateful for the feedback from Part A candidates following the examination.

MRCS Part B was delivered 'face-to-face' and was re-designed to allow this. The number of questions was reduced from 17 to 13 and some questions altered to allow socially-distanced delivery. No new or untried questions were used. All of these changes were agreed with the GMC. The results analysis and standard-setting process given these changes were also agreed with the GMC in advance.

The four Colleges and ICBSE wish to recognise the partnership shown by candidates before and during the examination. Regulations put in place regarding social distancing and contract tracing were adhered to without exception, and participation in lengthy, pre-exam webinars by hundreds of candidates demonstrated willing and determination to help make exam delivery a success.

The MRCS Part B was taken by 540 candidates. As far as can be determined, all UK- and Ireland-based candidates whose career progression required passing Part B were accommodated. MRCS Part B results were analysed in the standard way, with ratified adjustments made for fewer questions but maintaining standards to protect patient safety. Again, results were pleasingly good, and the percentage of candidates passing was the highest ever: 75% of candidates passed. The effort in revision, preparation and participation are clear and acknowledged.

A small number of candidates were not able to take the exam in October because of pandemic-related self-isolation, and they will be sitting the examination later this month, timed such that results release does not mean applying for re-sits, if needed, is affected.

The Colleges and ICBSE are similarly very grateful for the feedback from MRCS Part B candidates following the examination.

It has be emphasised that for candidates taking MRCS Parts A or B who were not successful, this most recent attempt will not be counted in the total number of attempts allowed at either part of the Intercollegiate MRCS.

In summary, the Colleges and ICBSE are aware of the profound difficulties the pandemic is causing trainees, particularly those preparing for vital, high-stakes examinations. It is evident that the current candidate cohort have made considerable efforts to prepare for and sit examinations and, having the achieved the highest pass rates ever recorded in both MRCS Parts A and B, deserve praise for all their efforts. To those candidates who were successful, please accept the congratulations of the Colleges and ICBSE. To those who were not successful; we are sorry you did not pass on this occasion, but the four Colleges and ICBSE will do all we can to support you, and wish you good luck in the future.

Yours faithfully,

J. this.

John Hines

Consultant Urological Surgeon

Chair, ICBSE