

Notes for Primary Care Teachers

ASSESSMENTS – THE CONJOINT MAFP/FACGP EXAMINATION

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This article will briefly discuss the aims and objectives and various components of the Conjoint MAFP/FACGP examination.

Aim of the Conjoint Examination

To enable a valid, reliable, efficient and feasible assessment to a predetermined standard of competence (and, to a certain extent, the performance) of the candidate in respect of unsupervised work in general practice/family medicine.

Primary objective

To assess and certify the competence of candidates for unsupervised general/family practice.

Secondary objectives

- To provide an educational experience for candidates that
- helps them to identify their strengths and weaknesses
 - motivates them to undertake specific steps to develop their skills
 - stimulates their interest in vocational training and continuing professional development.

Competence and performance

Competence is the ability to carry out task/s and it is usually defined by the three behavioural attributes: knowledge, skills and attitude. *Performance* is the demonstration of this competence in actual practice.

Knowledge

The first essential attribute is knowledge. The knowledge acquired and retrieved must be applied, i.e. integrated with new knowledge where applicable, interpreted, analysed, synthesised, evaluated, critically appraised and utilised in the solution of health problems.

Skills

The skills involved are referred to as *cognitive* skills. However in clinical practice, mere possession of cognitive skills is still not enough. *Psychomotor and technical* skills

used in clinical/physical examinations and practical procedures are necessary.

- *Clinical Skills*. Application of cognitive skills together with the appropriate affective behaviour and psychomotor and technical skills in the clinical context (namely, history taking, clinical/physical examination, investigations, problem definition and patient management) would constitute clinical skills.
- *Practice Skills*. Utilisation of these clinical skills in candidate's own practice would constitute performance or practice skills.

All these skills must relate or be applied to the content of general practice/family medicine and test instruments are available to assess these skills.

Attitude

Affective behaviour encompassing: rapport, empathy, attitude, communication skills, interpersonal skills, teamwork, integrity, professional and ethical values, and quality of self-awareness.

Test instruments

Conception, design and use of these test instruments in this examination are underpinned by the need and aim to maximise compliance with the criteria of validity, reliability, efficiency and feasibility alluded to above. The composite of these test instruments constitutes the format of our Conjoint examination.

Formative assessment

Continuous assessment with constructive feedback consist of: written tests, clinical examinations and evaluation of log books, supervisors' reports, etc.

Summative assessment

The objective of the summative assessment is to certify the competence of the trainee who has completed the requisite vocational training program.

The summative assessment is divided into two parts, Part I being the written papers and the Part II, the clinical examination.

PART I

a. Applied Knowledge Tests

Objective: To assess the breadth and depth of applied knowledge in general practice

150 clinically based questions to be answered in 3 hours.

- 70 Single Best Answer Items
- 80 Extended Matching Items.

The use of questions to assess candidates' application of factual knowledge for problem solving ensures the relevance and validity of this segment. The large number of questions together with the objectivity inherent in scoring the answers satisfies the criterion of reliability.

b. Key Feature Problems

Key Feature Problems (KFP) test clinical decision making skills in general practice. They deliberately focus on critical aspects in the resolution of a general practice/family medicine problem, typically involving decisions

c. Visual Interpretations (VI)

To assess the candidate's skills in the interpretation of coloured slides of medical conditions, medical photographs, ECG tracings, X-rays, ultrasound pictures, other imaging materials, microscopic specimens, lab reports, charts and other materials which may be encountered in daily clinical family practice.

- VI 1. This segment is designed to assess the candidate's skills in the interpretation of coloured slides of medical conditions, medical photographs,

which may be encountered in daily clinical family practice.

- VI 2. This segment is designed to assess the candidate's skills in the interpretation of ECG tracings, X-rays, ultrasound pictures, other imaging materials, microscopic specimens, lab reports, charts and other materials which may be encountered in daily clinical family practice.

PART II

This is the clinical component of the examination which consists of clinical consultations, oral examination and Basic Life Support (BLS) segments. The clinical consultation consists of long and short consultations, practical procedures and telephone call/emergency call. Real patients, simulated patients and manikins are used in the examination. The oral examination tests the candidates in four areas, i.e. practice management; short term management; comprehensive, holistic and continuing care to patients and their families, and health promotion and preventive care. Both the clinical consultations and oral examinations are incorporated into the Objected Structured Clinical Examinations (OSCE). The BLS segment is pre-certified.

REFERENCES AND FURTHER READINGS

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