

Exploring the relationship between GP Selection Scores and MRCGP Exam Performance

Brief

In this study, Work Psychology Group (WPG) partnered with the General Medical Council (GMC) to explore the links between trainee General Practitioners' (GP) selection scores and their performance on the Membership of the Royal College of General Practitioners (MRCGP) licensing examinations. Training a GP is both costly and resource-intensive, therefore, it is essential that trainees who are likely to struggle in terms of their progression to competency are identified early in training and provided with targeted support which aims to speed their 'time to competence'. Establishing evidence of the relationship between selection data and MRCGP results could therefore aid with early identification of trainees who may require support.

WPG's Approach

Selection data was provided by the GP National Recruitment Office for the GP machine-markable tests (MMT), also known as the Clinical Problem Solving (CPS; assessing the application of medical knowledge in a clinical setting) test and the Situational Judgement Test (SJT; assessing non-clinical attributes and behaviours), in addition to the Selection Centre (SC; including data from a written prioritisation exercise and three role-play exercises). The GMC provided scores for each of the MRCGP examinations: the Applied Knowledge Test (AKT) and the Clinical Skills Assessment (CSA).

A number of statistical tests were used to examine the nature of the relationship between selection scores and performance in the MRCGP examinations. These results were then investigated further to understand the impact of ethnicity and place of medical qualification (PMQ).

Results and Outcomes

The initial findings demonstrate a clear link between selection test scores and subsequent performance on the MRCGP assessments. In particular, the CPS is found to correlate most with performance in the AKT, and the SJT and SC are found to correlate most with performance in the CSA. The majority of trainees who obtain a clear pass in the CPS and SJT selection tools go on to pass both the AKT and CSA assessments first time, whereas trainees who are borderline in their performance on the selection tools are more likely to have to repeat the MRCGP assessments.

Within the group who obtain borderline scores in the selection tests, there are noticeable differences when the group is split by ethnicity and PMQ. White candidates who have trained in the UK have the best pass rates for the MRCGP assessments, whereas the BME candidates who have trained outside the UK have the lowest pass rate for both of the MRCGP assessments, in particular the CSA exam. Additional analysis illustrated that scores on the IELTS language test sat by international candidates are significantly linked to performance, suggesting that these test scores should be considered alongside performance in other selection tools when assessing which GP trainees may benefit most from additional support.

The present study clearly shows that scores on selection tests are linked to performance further into GP training. As such, the selection tools are valid tools for differentiating between potential GP trainees, and for identifying those that may require additional support in order to reach the required level of competence during the standard training time of three years.