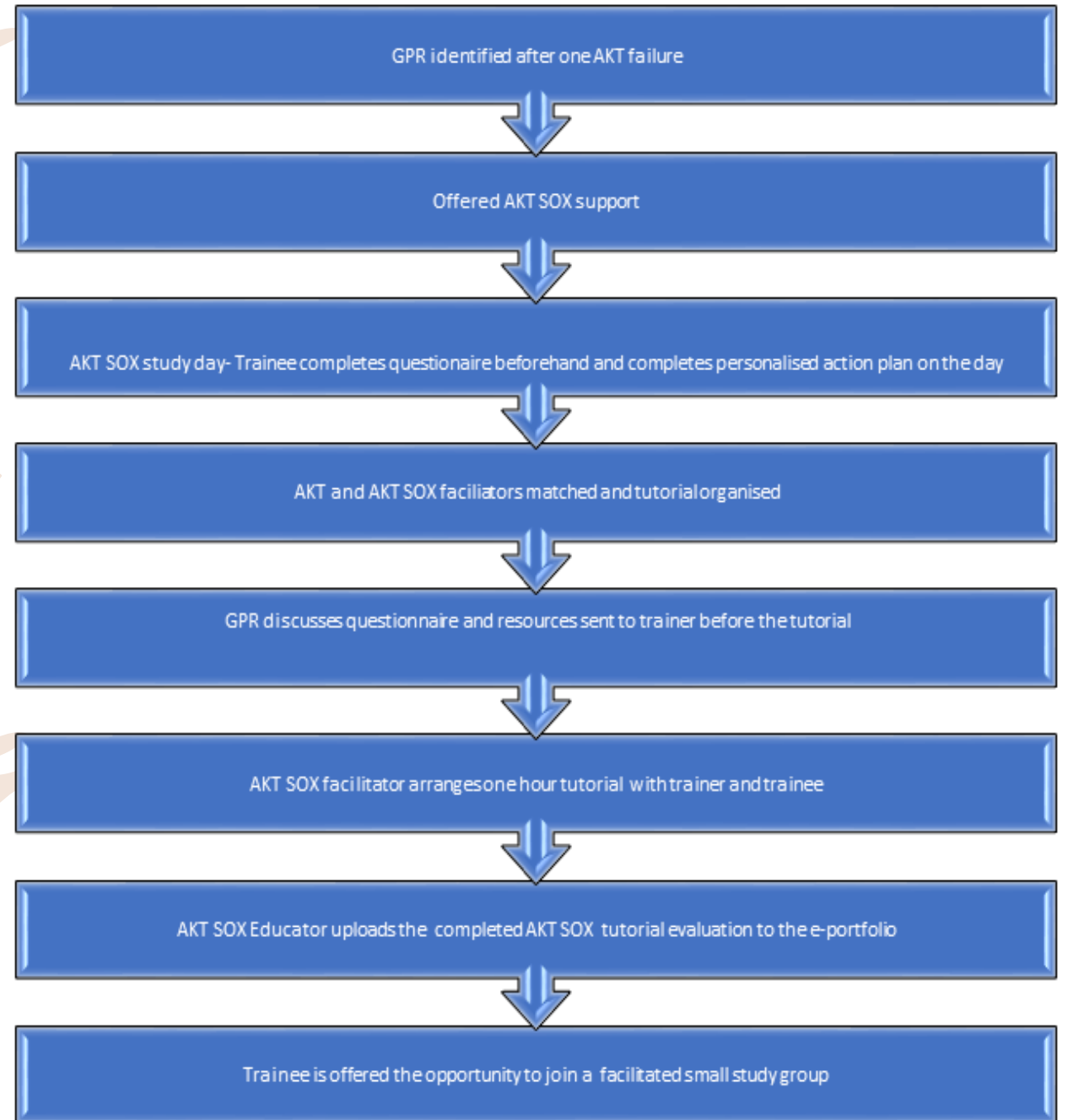


# ***Bolton Trainers Meeting 7.9.21***

- AKT SOX
- Local RCA SOX proposal
- North West Consultation Tool hosted by 14fish

# *AKT SOX*





***Developing a local  
approach to SOX***

# ***SOX = Support On eXtension***

- Developed by experienced RCGP examiners in the North West – Anne Hawkrige and David Molyneux
- National support with other Deaneries also using the SOX approach
- One of very few interventions that we know works with a clear evidence base

# *North West is Best!*

- SOX educators deliver SOX for all trainees after every RCA/CSA exam fail
- Can we take this further locally to ensure all our trainees have an experience of a SOX like approach **prior** to first exam sitting?

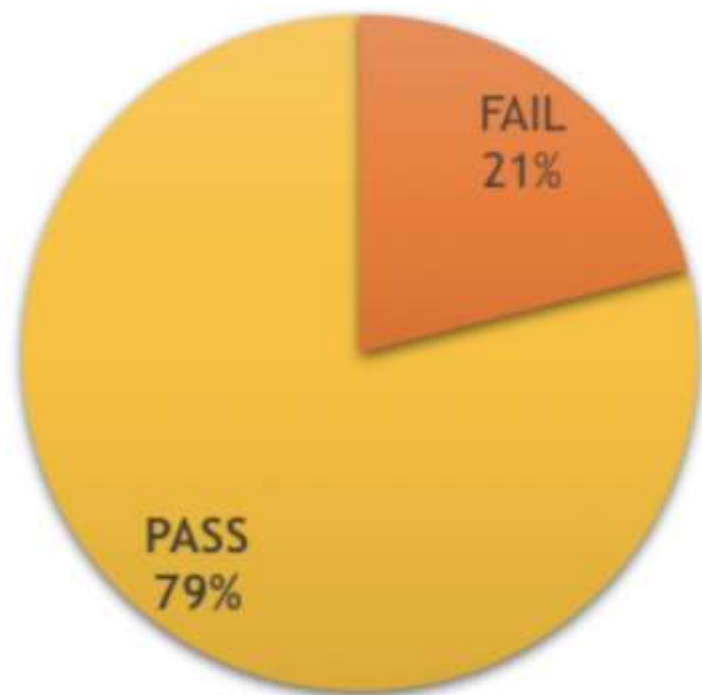


*Have any of you had experience of receiving support from a SOX Educator with your trainee?*

*Reminder of  
how SOX is  
effective from the  
research.....*

# CSA SOX Programme 2016 HEENW

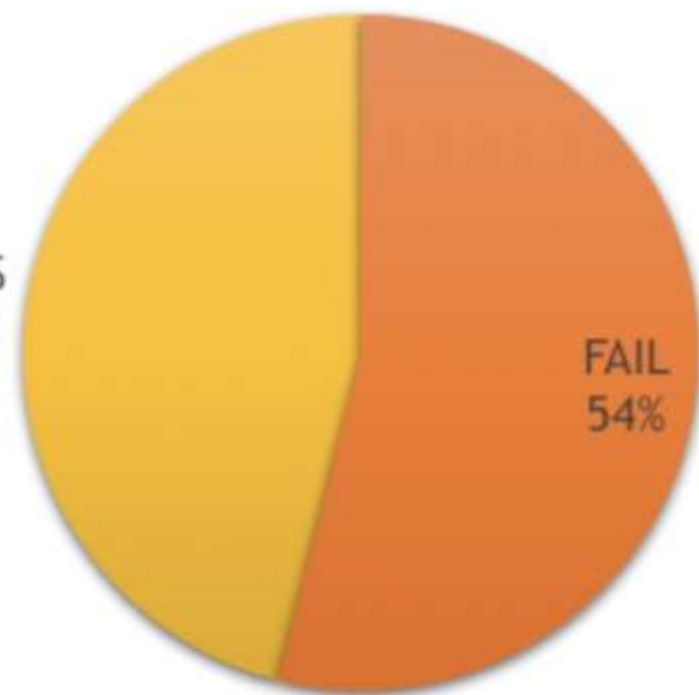
● FAIL ● PASS



CSA SOX Group 3rd & 4th attempts  
Trainee n=29

● FAIL  
● PASS

PASS  
46%



\*National CSA Group 3rd & 4th attempts  
Trainee n=224

\*National CSA MRCGP 2016/17 Annual report



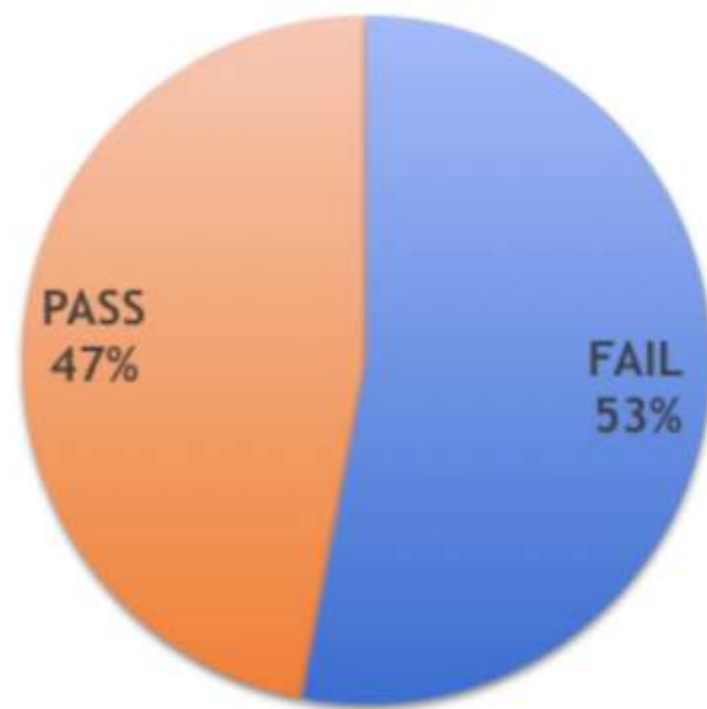
# CSA SOX Programme 2017 HEENW

● FAIL ● PASS



CSA SOX Group 3rd & 4th attempts  
Trainee n=22

● FAIL  
● PASS

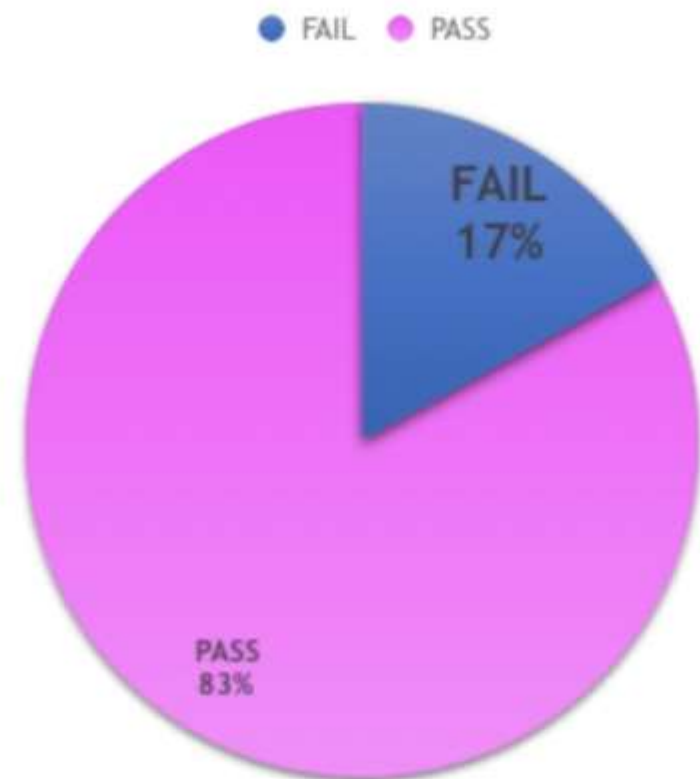


\*National CSA Group 3rd & 4th attempts  
Trainee n=231

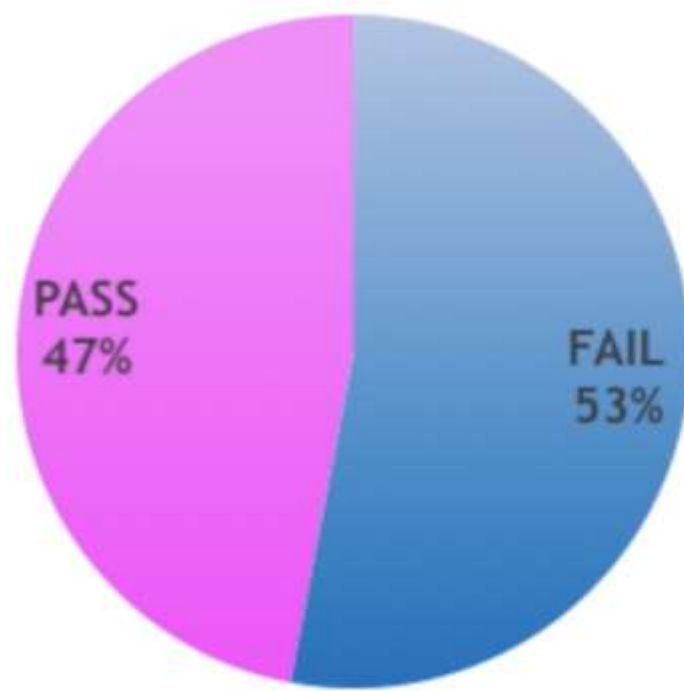
\*National CSA MRCGP 2017/18 Annual report

# CSA SOX Programme 2018 HEENW

● FAIL ● PASS



CSA SOX Group 3rd & 4th attempts  
Trainee n=23

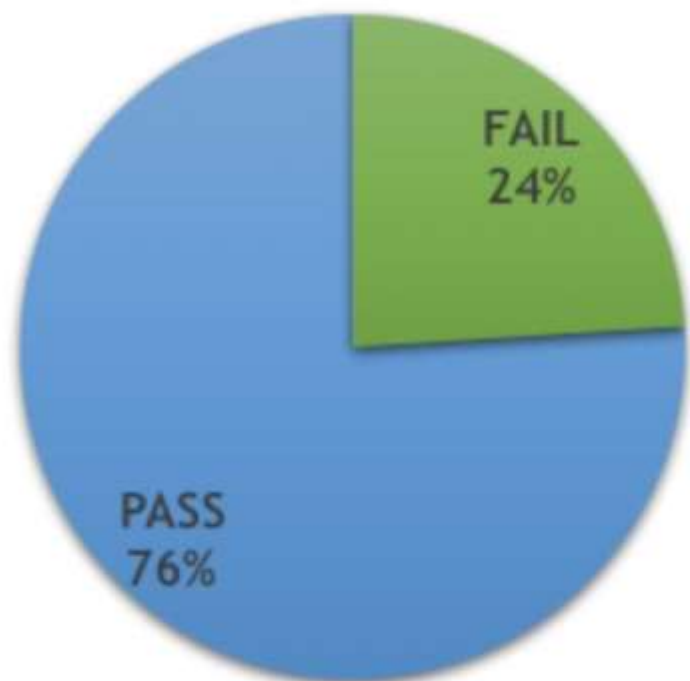


\*National CSA Group 3rd & 4th attempts  
Trainee n=231

\*National CSA MRCGP 2017/18 Annual report

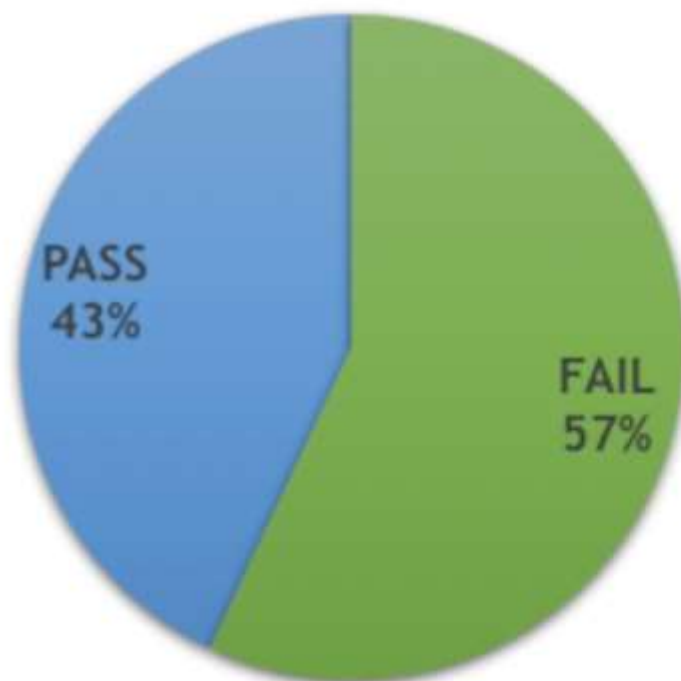
# CSA SOX IMG 2016-18: 3<sup>rd</sup> & 4<sup>th</sup> attempts

● FAIL ● PASS



CSA SOX IMG 2016,17,18  
Trainee n= 50

● FAIL  
● PASS



\*National CSA 2016/17  
Trainee n approx. 528

\*National CSA MRCGP 2016/17 Annual report

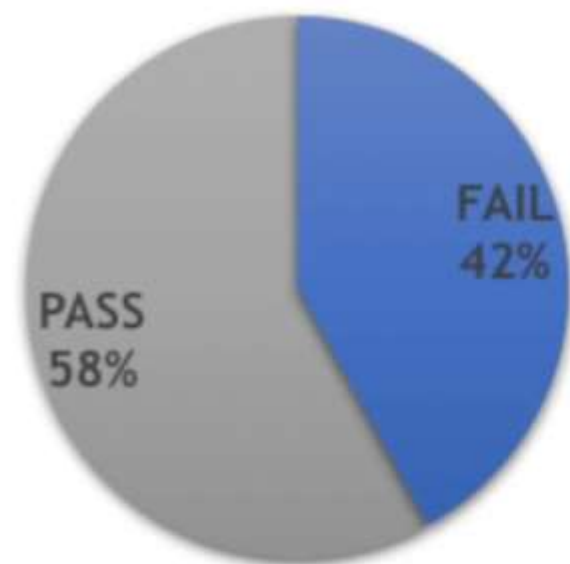
# CSA SOX UKG 2016-18: 3<sup>rd</sup> & 4<sup>th</sup> attempts

● FAIL ● PASS



CSA SOX UKG 2016,17 & 18  
Trainee n= 24

● FAIL  
● PASS



\*National CSA 2016/17  
Trainee n estimated 150

\*National CSA MRCGP 2016/17 Annual report

# SOX and RCA results?


- Difficult to compare pass rates-CSA cancelled mid March 2020, additional RCA diets July/August as risk free attempts, many trainees still not sat RCA
- National pass rates very similar to CSA, Differential attainment statistics also similar(although RCGP not published details as in past RCGP Annual reports)
- RCA tests exactly same competencies as CSA
- Trainee selects cases-greater impact of GP surgery environment, 'Covid effect'increasing remote consultations/triage & too much emphasis on getting the right cases vs analysing trainee skills/knowledge/competence

# **RCA SOX has been delivered remotely 2020/21**

- 3 remote tutorials, E portfolio & 6 consultations analysed(\*majority audio), shared educational plans (trainee, trainer, SOX)
- Analysis, feedback and educational plans use CSA SOX approach as RCA testing same competencies to same standard 'Fit for independent practice'
- CSA Toolkit has been updated and improved for the RCA
- All HEENW Trainers have *free* access to the CSA Toolkit@ Fourteenfish

# RCA 2020/2021 results

Sitting	<u>North West Pass Rate</u>	National Pass Rate
July	74.7%	74.8%
August	58.8%	73.7%
November	67%	70.2%
February	75%	80%
March	80.4%	79.9%



*So for those  
who haven't  
had  
experience  
of SOX...a  
few more  
details*

- SOX educators deliver SOX regionally
- Speak with the trainer initially to get their view on this issues and key to success is support for trainers
- Speak with the trainee with a self assessment questionnaire they complete to understand the holistic issues affecting exam preparation
- E-portfolio review to understand engagements, educator notes, COT assessments etc
- Watch and mark trainee videos/audio recordings, identifying recurrent themes emerging that affect the consultation
- Tutorials time with the trainee and trainer to support in the strategy and guidance around exam preparation



# *Why might SOX work?*

A fresh pair of eyes

A second trainer reaffirming the opinion of the trainer in specific areas can sometimes mean that the trainee is more attentive to key areas

Calibration of video/audio recording marking is key

Clear supportive feedback with a positive strategy/teaching on important consultation issues

Can sometimes help to identify health and wellbeing issues, involving the TPD for further support



# ***The BIG FIVE***

- Consulting like a GP
- Global knowledge sufficient for independent practice
- Addressing specific knowledge gaps
- Good exam technique
- Sitting at the right time

# The Big 5

## Consulting like a GP

Trainer feedback  
Trainee questionnaire self-assessment on consultation skills  
time management  
Previous career/time in General Practice with guidance on the GP vs hospital doctor consultation  
Previous exam feedback statements, particularly on interpersonal skills

## Global knowledge sufficient for independent practice

AKT pass – guidance on plan to develop global knowledge if failed or pass was some time ago  
Trainee questionnaire Curriculum self-assessment  
Trainer feedback  
PUNs and Dens  
Understanding of the sufficient evidence guidance for case submission

## Address specific knowledge gaps

Use of AKT package  
Trainee plan to identify and address knowledge gaps  
Impact on performance in mandatory cases  
Case exposure

## Good exam technique

Trainee understanding of the exam – have they read the RCA website  
Have they read the trainee guide  
Review trainee questionnaire – frequency of video review, mix of video/audio/F2F cases  
How to overcome any technical challenges  
Reminder that they need to vocalise any information that is relevant that an examiner might not be aware of eg allergies influencing prescribing decisions  
Time management  
Surgery plan for appropriate cases  
Using the RAG rating grid appropriately, videoing enough and feedback from trainer on videos  
Need for reasonable adjustment requests

## Choose to sit at the right time

Previous exam attempts, score, feedback statements, developing weaker domains and ensuring sufficient evidence  
Health and wellbeing issues impacting on exam preparation (consider directing trainee to discuss further with AD/TPD)  
Direct to ARCP recommendations and any AD/TPD educator note meetings  
Timing in relation time in training including any extension period  
% LTFT and adequate case exposure  
RCA application window

# ***RCA SOX support themes from July***

## **Top 5 areas that trainees struggled with**

- 1. Patient-centred management**
- 2. Time management**
- 3. ICE**
- 4. Psychosocial**
- 5. Verbalising thinking**

***SOX has to be  
a supportive  
process for the  
trainer and  
trainee***





***How might our  
local SOX work?***

***We're all  
busy!***



Start as a brief intervention



One tutorial with a  
buddy/swap system and  
review?



## *Local approach to SOX*

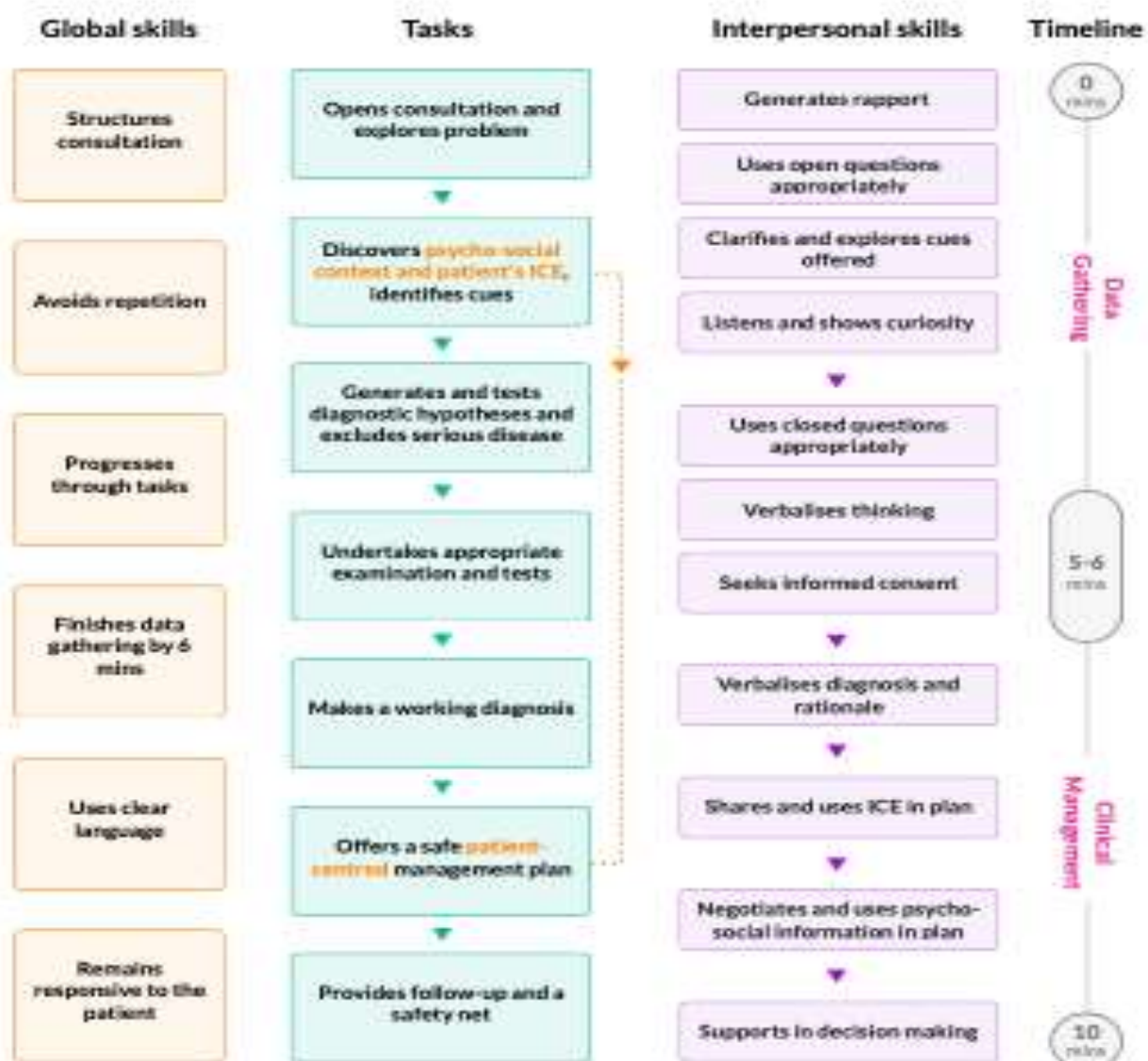
Speak to the trainer about what support they would benefit from in advance. Check they have access to the CSA Toolkit @Fourteenfish

Analyse 2-3 videos/audio recordings – guest trainer, actual trainer and trainee to all mark using the RAG rating grid in advance

Meet for around 2 hours to discuss calibration, emergent themes and an exam preparation strategy eg areas of the consultation to concentrate on and tips, discussing potential exam timing

Complete an educator note, using the Local SOX Proforma about the strategy





# CSA RATING GRID

**R** = Red rating    **A** = Amber rating    **G** = Green rating

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# CSA Rating Grid

Date:	Trainee:	Case:	
GLOBAL	TASKS	INTERPERSONAL SKILLS	NOTES
Structures consultation <span>R A G</span>	Opens consultation and explores problem <span>R A G</span>	Generates rapport <span>R A G</span>	
Avoids repetition <span>R A G</span>	Discovers patient's psycho-social context <span>R A G</span>	Uses open questions appropriately <span>R A G</span>	
	Identifies cues <span>R A G</span>	Clarifies and explores cues offered <span>R A G</span>	
	Discovers patient's ICE <span>R A G</span>	Listens and shows curiosity <span>R A G</span>	
Progresses through tasks <span>R A G</span>	Generates / tests diagnostic hypotheses <span>R A G</span>	Uses closed questions appropriately <span>R A G</span>	
	Rules in / out serious disease <span>R A G</span>	Verbalises diagnostic thinking <span>R A G</span>	
Finishes data gathering by 6 mins <span>R A G</span>	Undertakes appropriate examination and tests <span>R A G</span>	Seeks informed consent <span>R A G</span>	
Uses clear language <span>R A G</span>	Makes a working diagnosis <span>R A G</span>	Verbalises diagnosis and rationale <span>R A G</span>	
Remains responsive to the patient <span>R A G</span>	Offers a safe patient centred management plan <span>R A G</span>	Shares and uses ICE in plan <span>R A G</span>	
		Negotiates and uses psycho-social information in plan <span>R A G</span>	
	Provides follow up/safety net <span>R A G</span>	Supports in decision making <span>R A G</span>	
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***SOX educators in your area will support you if you need any guidance or advice – we are here to help!***

- Ian Hamer
- Nick Walton



## *CSA Toolkit access*

- Would it help to run through use of the CSA toolkit- 2021 EDITION(RCA update)?
- Maybe not today but would it help at another meeting to run through RAG rating calibration of a video, so we're all marking at the right level?
- PLEASE NOTE: The Trainee has access to the RCA Package @Fourteenfish. Why not rate some of the package recordings using the CSA Rating Grid?
- CSA Toolkit has examiner **RAG** rated videos for Trainer calibration



*General thoughts on this idea?*



*Support  
from me*

- [Nick.walton@hee.nhs.uk](mailto:Nick.walton@hee.nhs.uk)

*We would  
like your  
ongoing  
thoughts  
and  
feedback*

---

Ideas on how it is  
working

---

Ideas on how to  
develop/improve

---

We're all part of the  
North West leading the  
way....

A brown brushstroke graphic with a rough, hand-painted edge, containing white text. The text is centered within the brushstroke and reads: 

*Summary of  
the plan –  
what we've  
agreed*





***Thank you!***