**Supporting students who fail the Written exam or the Clinical Competency Assessment (CCA):**

Some students will have to repeat an academic year because of failing the written exam or the CCA (the practical component, formerly known as the OSCE), or both. You may also come across students in difficulty who are taking or returning from an interruption of study, for various health or personal reasons. Students from T, P or F year in this position are offered a 1:1 meeting with a senior academic to discuss how to navigate this situation, where they are signposted to the various options available, including Communication Skills support, Counselling on site at SGUL, **[Study+](https://canvas.sgul.ac.uk/courses/113)** and the [[[Academic Success Centre](https://app.10to8.com/book/sgul/)](https://10to8.com/book/sgul/)](https://canvas.sgul.ac.uk/courses/113/pages/academic-success-centre). This process is under review and evolving, and as a Personal Tutor you will be a valuable part of the pastoral support students can access. Often Personal Tutors feedback that some issues could have been best addressed at an earlier stage, if only a student had shared their struggles with them. Your proactive approach, empathy and encouragement to share difficulties can make a real difference in enabling a student to understand their options and collaborate with support staff during their MBBS journey.

There are several support opportunities available to students who fail the written paper or CCA exam. These are summarised in the [MBBS Academic Support Programme](https://sgul365-my.sharepoint.com/:w:/g/personal/mukhan_sgul_ac_uk/EYfhtq4gBUhGsxO93tNh1MsBQI6hfUTBj_KrynrQuz0pBg?e=AbTnMG) section. There are also Canvas portal resources students can access to see links to sample written papers (for F year) and mock CCA stations they can use to practice together. Details of the academic support for the CCA exam can be found on the Canvas Portal under each year group’s page, alongside other Personal Tutoring resources.

If your student has exam procedure issues, please contact the exam team with their concerns and encourage the student to contact the SGUL Study+ and Academic Success team for free sessions tailored to their learning needs.

If there is a question around a learning difficulty, which can be a factor if there are dissimilar scores in the written paper versus practical exam, students can be encouraged to discuss this with the Disability Advisor at SGUL. Identifying learning differences can be invaluable particularly at an early stage in the MBBS course, so that helpful techniques can be utilized for learning.

If your student finds themselves in academic difficulty, how can you, as a Personal Tutor, help them?

**Certain questions are worth exploring**:

Clearly, what you discuss with your student will depend very much on what they failed and by what margin, how they feel about the CCA fail and personal or academic factors. Please encourage them to engage in academic support that they will be offered (in T, P and F-year, via the [Navigating Challenges](https://canvas.sgul.ac.uk/courses/4919/pages/navigating-challenges-resources-supporting-mbbs-students) Canvas page). The following questions are suggestions for initiating a conversation and encouraging open sharing. 

**What happened on the day of the exam?**

* Encourage students to reflect on their own behaviour while empathising with any difficulties they encountered. Some students are so acutely focused on what their examiner did/did not do, or how their simulated patient did/did not behave that it can be tricky to gain insight about what they could do differently next time. If the student attributes the failure to external factors, it can be helpful to express empathy for those situations, and promote their autonomy by exercising curiosity about what happened internally around those events – did the student find they lost concentration, froze, went blank, something else? Has this happened before? What has been helpful in the past? What would they like to do differently ? What resources would they like to seek out to support them in this effort?

**What do you think is being assessed in the CCA?**

* Although all tests and questionnaires are inherently limited, the CCA is a reliable and valid method for assessing competencies. Compared to how doctors were assessed in the past, it is also fair. The University relies on the CCA to ensure students are safe to pass into the next stage of their learning. Some students become pre-occupied with the fact that many (but not all) of the interactions are with ‘simulated’ patients (i.e. actors), resulting in a ‘fake’ interaction. They may think that they themselves are required to ‘act’ and pretend, rather than remain natural and genuine. For example, they often carry misconceptions about how they should show empathy, eg. saying ‘I am sorry to hear that’ is sympathy and not advisable. Research shows that cognitive empathy which verbally reflects what the patient is going through, is more effective.. More junior students also may not realise that the CCA also (indirectly) assesses their basic clinical science knowledge; i.e. they need to know ‘what’ to ask as well as ‘how’ to ask. CCAs also assess whether a student is able to think about and discern what could be going on and how to help, while listening and empathising and engaging in a patient-centred manner.

**What are your thoughts on the margin by which you failed?**

* Some students fail by a close margin. They may be pre-occupied with the fact that they only failed ‘one station too many’. The SGUL Scheme of Assessment determines that in order to pass, candidates are required to achieve the numerical pass mark for the examination and pass at least 65% of stations. Explore with them how they feel about a doctor who is only just ‘competent enough’.

**How did you feel during the CCA?**

* Many students are hampered by their nerves. Help students to think about how nerves affect their behaviours and cognitive processing, and what strategies they might put in place to manage. The faculty encourages students to treat patient interaction on the ward placement as a mock CCA and to formulate their own mock CCA stations like those available on Canvas. Being well-prepared often helps! The Counselling service can also provide support, as can NHS Talking Therapies.

**Have you looked at the feedback written on the CCA mark sheet?**

* Look at the mark sheet with the student and ask them to bring it with them to the meeting. See whether you/they detect recurring themes across all the stations; e.g. do they consistently get low marks for their introductions and initial approach to patients. Do simulated patients often give them low marks? Common features of students who fail: a) Superficial/poor procedural skills; b) Deficiencies in knowledge/clinical reasoning; c) Poor communication (e.g. not listening, unstructured, only closed questions, scattergun approach, unempathic, or judgemental language). Often it is a combination of these features.

**How many patients did you clerk each week, while on placement? (for T-, P-, or F-year students).**

* Students who have failed CCA often spent too little time talking to and examining patients while on placement. Explore with them why this is. Help them understand that patients are often happy to help train the doctors of the future. Alternatively, their clerking has been superficial (spending only 10 minutes with patients). We recommend that students clerk 5 patients per week, at least. Sometimes students recount that they have spoken to many patients, in which case the underlying problem might be that they are repeating ineffective behaviour. Encourage them to seek feedback from peers and clinicians.

**Are you keeping a clerking book while on placement? How are you learning while on placement?**

* A clerking book contains notes from each patient interaction (anonymised!), which can form the foundation for further revision of clinical detail and can highlight areas that were not explored with the patient (i.e. gaps in the clinical history).

**How did you prepare for the CCA?**

* This can fall into two strands – practice and revision: Practice: Students often practice their clinical/procedural skills with a small circle for friends and as such, common communication challenges may be missed. Recommend practising with a range of different people, across all the skills. They may not recognise that speaking with/examining real patients on the wards is the most effective way of developing skills. More junior students have limited opportunity to talk with patients, so may have to seek opportunities with (non-medic) friends and family. Did they use the Clinical Skills Practice Space? How can they link the clinical and communication skills practice to their basic science learning? Revision from OSCE textbooks or websites (e.g. Geekymedics): Although these books and websites can be useful in providing scenarios, they can be one-dimensional and do not map onto the SGUL mark schemes. Tutors recommend that students work in small groups and create a set of their own scenarios (which also helps with revision of their knowledge and clinical reasoning) to practice with each other.

**Did you revisit materials from the taught clinical and communication skills sessions?**

All the learning resources for clinical communication (plus additional resources, references, video materials) can be found on Canvas. All students have access to this module (https://canvas.sgul.ac.uk/courses/787). For clinical skills revision, students are given paper handbooks.

We hope this is helpful for you. If you have any further queries, please don’t hesitate to get in touch.

Dr Katherine Joekes, 2019

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