



The Royal College of Surgeons of England

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Ann R Coll Surg Engl
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Letter from the Court of Examiners

The President The Royal College of Surgeons of England

Dear Sir,

Re MRCS and the Court of Examiners

At the April meeting of the Court of Examiners, we discussed the changes that we gather have been proposed for an interim MRCS examination. Part A of the new MRCS is to consist of a written MCQ examination of two 2-hour papers taken together. Part B will be an oral examination consisting of structured interviews covering the basic sciences of anatomy, physiology and pathology together with applied topics (although omitting specific aspects of surgical procedures). Initially we gather that the communication bay was to be replaced by a communication skills course and assessment, but due to the shortage of time, it is proposed to retain the communication bay until a formal communication skills course with a robust assessment can be introduced. We note that there is no clinical examination in this new proposed interim examination. However, we understand that the Irish College will continue to run the existing examination without changes, and that the heads of the surgical colleges have agreed that the overseas MRCS will continue to include the established clinical assessment.

The changes outlined represent a reduction in the level of knowledge and clinical skills that will be required to obtain the MRCS for candidates in England, and paradoxically will be of a lower standard than that which will be needed to obtain

the MRCS for candidates sitting overseas. The proposed additional requirements for the award of the MRCS Diploma from the English College will also require the approval of the outcome of a candidate's workplace assessments by a hospital surgical tutor, who may have had no educational training, experience or certification by the English College.

The Court unanimously wishes to express grave reservations about the proposed changes. Specific anxieties were as follows:

1. The present proposals for the new MRCS do not represent an adequate level of knowledge or clinical skill to merit the award of the Diploma. The Court feels strongly that the MRCS Diploma should not be awarded without assessment by written, oral and clinical examination.
2. There will be a disparity between what is required for the award of the MRCS Diploma for candidates in the UK and overseas. This will introduce a two-tier system.
3. The introduction of the need for a surgical tutor to give clinical approval based on workplace-based assessment is unsatisfactory, and workplace clinical assessments have yet to be adequately validated.
4. The Court feels strongly that the level of knowledge and skill required to achieve the Diploma of MRCS should be defended and not compromised by the drive for intercollegiate cooperation and to meet specialty demands.
5. The Court feels that the difficulties arising in delivering the proposed changes to training and assessment

exist because we are failing to take into account the need to set and maintain standards. If changes are to be introduced, we feel strongly that they need to be piloted in a way that demonstrates their superiority to existing systems.

It is the responsibility of the Court of Examiners through the College Council to preserve surgical standards by conducting quality-assured surgical examinations, which will maintain the trust of the public. The current MRCS has been tried and tested and recognised by PMETB. The Court therefore feels that standards are being eroded by the changes proposed for the new interim MRCS examination and we wish to express our concern as is our public duty. Furthermore, at this time of great anxiety regarding MMC and the MTAS debacle and with the Tooke review still to be completed, it is inappropriate to introduce an interim examination before the outcome of the review is known. If the proposed new MRCS examination fails to safeguard surgical standards, the reputation of the College will be seriously compromised and responsibility laid at our door.

We urge the Council to act to prevent such a damaging scenario for British surgery.

Yours sincerely

John Chester

On behalf of the Court of Examiners

The editor invites comment on the message of this letter to be forwarded to the president and Council.

