



## Clinical Examining Board Chair's letter – January 2025

### MRCP(UK) Part 2 Clinical Examination (PACES)

#### Introduction

I am very grateful for your continued support for the MRCP(UK) PACES exam. In the paragraphs below you will find some up to date information on candidate numbers and performance in the recent and forthcoming diets. I am particularly pleased to mention our recently announced PACES Champion Awards for 2024 with winners from across the UK and internationally, all reflecting their exceptional commitment to the exam.

Please note that there is now formal policy on communication during the examination in a language other than English as this has been a point of contention in some International centres. We have also formalised the guidance on candidate briefing in advance of each cycle which many chairs have been delivering on an informal basis. This and other guidance is all in the interest of avoiding unwarranted variation in the way that the exam is delivered in our many centres.

*Dr Rod Harvey, Associate Medical Director for Clinical Examinations / Chair, MRCP(UK) Clinical Examining Board*

#### 2024/02 diet

The overall pass rate from the 2023/02 diet was 52.9%. The pass rate for by graduation type was 73% for UK graduates and 44% for International Medical Graduates. 56.4% of candidates sitting in UK centres passed compared to 46.1% for international centres.

#### 2024/03 Diet

The 2024/03 diet is due to complete in mid-December. A total of 3120 places will have been provided: 1405 in the UK and 1715 internationally, delivered across 82 centres.

#### 2025/01 Diet

The UK application period closed on 18 November, and a total of 1955 applications were received for 1350 places. The [prioritisation criteria](#) for applicants were agreed on 29 October. Candidates who are applying for higher specialty training in 2025 will be allocated places earlier in the diet to ensure that they receive their results ahead of the recruitment deadline on 15 April. There are 53 centres running in this diet. 2344 applications were received for the 1475 international places being delivered in 28 centres. The lower number of total applications reflects the increased capacity in international centres.



## **Important points to note for forthcoming diet**

### **Guidance whereby a PACES examiner needs to leave before the end of a cycle**

It is recognised that there may be an occasional exceptional circumstance whereby a PACES examiner is unable to remain at the PACES exam to complete a full cycle of five candidates. This may occur for two distinct reasons;

1. Where the examiner anticipates the need to leave early
2. Where an examiner becomes unexpectedly incapacitated during a cycle

A separate guidance paper will be shared with examiners, chairs and hosts advising of the necessary action that needs to be taken.

### **Guidance to chairs and hosts on pre cycle briefing of candidates at PACES**

The chair of the examiners, or an examiner acting as a nominated deputy should brief the candidates shortly before the start of each cycle of PACES. This can usually be done once the examiner has completed calibration or in the break between cycles. The briefing is desirable, but is not a mandatory part of the examination. A failure to complete the briefing would not therefore constitute a procedural irregularity and would not be a valid ground for appeal.

The purpose of the briefing is to welcome the candidates to the examination, remind them of the nature of the examination, set them at ease as far as possible and thereby enable them to demonstrate their abilities effectively.

A separate guidance paper will be shared with examiners, chairs and hosts advising of the recommended points to cover and action that needs to be taken.

### **Candidate communication with patients in a language other than English during clinical examination**

In circumstances where a patient participating in a Clinical Examination or Consultation encounter does not have sufficient command of English to understand simple instructions one of the following arrangements should be put in hand for the purposes of facilitating the physical examination only.

- An interpreter who speaks the patient's language may relay instructions given in English by the candidate to the patient. The interpreter would most likely be an attending nurse, but ideally an examiner should not fulfil the role.
- Where the candidate shares a common language other than English with the patient (usually the local language) then, with the explicit permission of one of the examiners, the candidate may converse in that language for the purpose of facilitating the physical examination. Permission to converse in the local language should only be withheld if neither examiner has an ability to understand that language.

The policy only applies to the Clinical examination encounters in Stations 1, 3 and 4 and the physical examination component of Consultation encounters in Stations 2 and 5. All other interactions between the candidate and surrogate or patient in the Consultation and Communication encounters must be conducted exclusively in English.

## **Fair Assessment: Are my judgements unbiased? Equality and diversity training for PACES examiners**

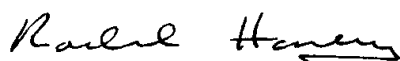
Examiners are reminded that they are required to undertake one module (every three years) of the bespoke online equality and diversity training (*Fair Assessment: Are my judgements unbiased?*) created especially for MRCP(UK) PACES examiners. New examiners undergoing training will receive instructions and a registration code to access the e-learning platform from their college examination team. Existing examiners who need to complete a further module should revisit the e-learning platform [HELM \(helmlms.com\)](https://www.helmlms.com). If examining in this forthcoming year, please ensure that your Fair Assessment training is up-to-date.

## **PACES Champion awards 2024**

A total of 16 nominations were received for the PACES champions awards (10 from the UK and 6 international). Congratulations go to the following winners for 2024 who will receive an award and certificate during the 2025.01 diet.

- **Dr Aravind Ponnuswamy**, Consultant Respiratory Physician, Countess of Chester Hospital / PACES host and examiner for Countess of Chester Hospital and RCP at The Spine
- **PACES team at The James Cook University Hospital, Middlesbrough** under the leadership of **Dr Mahir Hamad**, Consultant Physician and Clinical Director
- **Julia Szemeredi**, Postgraduate Education Service Manager, Guy's and St Thomas' Hospital, London / PACES lead administrator
- **Dr Khalid Javaid**, Consultant Stroke Medicine, New Cross Hospital, Wolverhampton / PACES clinical lead, chair and host examiner for Walsall Manor Hospital
- **Dr Rajaratnam Mathialagan**, Consultant Gastroenterologist, Queen Elizabeth Hospital King's Lynn / PACES chair and host examiner for North Cambridgeshire Hospital, Wisbech
- **Dr Sheena Mitchell**, Consultant in Care of Older People Medicine, Whittington Hospital, London / PACES clinical lead
- **Dr Akshay Munjal**, PACES lead administrator, Max Super Specialty Hospital, Saket, New Delhi, India
- **Farhana Affandi**, PACES chief administrative coordinator, Malaysia
- **Dr Mohammed Ilyas Sahadulla**, Federation PACES lead examiner and host examiner, Thiruvananthapuram, India
- **Professor Lim Shih Hui**, PACES host examiner and Federation Lead for Singapore

**Thank you.** Finally, the Federation would again like to express its thanks to all who have participated in the PACES examination over the last three years, allowing us to continue offering trainees the opportunity to complete this important assessment and move onto the next stage in their career. We recognise the extreme pressures examiners are experiencing in the workplace, and are enormously grateful for your continued support to enable us to assess both UK trainees, and others working in the NHS and worldwide, who in time will become the next generation of consultants and PACES examiners!



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## Hot Topics – January 2025

- Candidate dress code – some concern has been expressed over candidates attending for the exam dressed in what some might consider an excessively casual manner. The guidance for candidates is that they should dress in a conservative and professional way and should ensure that their attire does not interfere with their ability to demonstrate the skills required to pass the exam. Whilst the regulations are clear that a candidate presenting inappropriately dressed may be prevented from sitting the exam it is important that examiners do not exercise any judgement over the appearance or dress of any candidate who has been admitted to the exam.

Examiners should dress in a professional manner which is likely to engender the confidence of both patients and candidates.

- Where a candidate has been granted a reasonable adjustment, every effort must be made to ensure that it is appropriately delivered. Examiners should be reminded that where a candidate has been allowed to read the written introductory material in advance that they can carry notes around the carousel. It is important that these notes are not retained inadvertently by examiners before they have been used in the relevant encounter.

Any discussion with the candidate about the adjustment on the day of the exam must be conducted in private and not in the presence of other candidates. Examiners must be informed of candidates who have been granted a reasonable adjustment and its nature at the time of the chair's briefing.

- There continues to be a significant number of missing or duplicate marks on the mark sheets. Please ensure that all mark sheets are thoroughly checked before the data is entered into the eCPS and that any missing marks are corrected. It is important that the mark sheet lozenges are fully shaded and that any corrections are thoroughly erased with the rubbers available.
- Calibration in the clinical examination encounters should continue to be performed by examiners blind to the diagnosis or physical signs believed to be present. However, the confirmed diagnosis / physical examination findings should be made available to examiners to review after calibration has been completed to allow them to validate their findings.
- In Consultation encounters please ensure that an examination couch or bed is available for the candidate to use should they so wish, even if the patient could reasonably be expected to be examined in a seated position. There have been some appeals over a perceived difficulty in performing an appropriate examination in the absence of such a facility.