Royal College of Anaesthetists

Dear Colleague

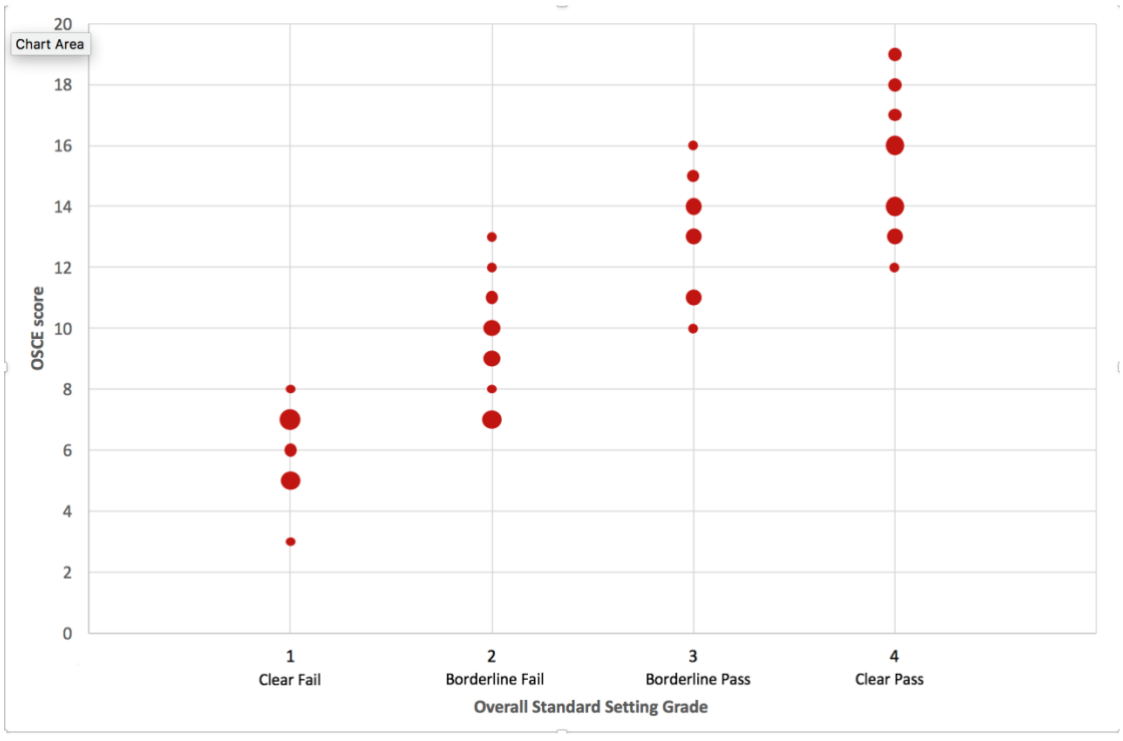
As part of the forthcoming November Primary Exam we are planning to run a trial of Borderline Regression (BLR) as an alternative standard setting process in the OSCE.

BLR is a widely used and well established method used to calculate cut off scores (pass marks) in OSCEs.

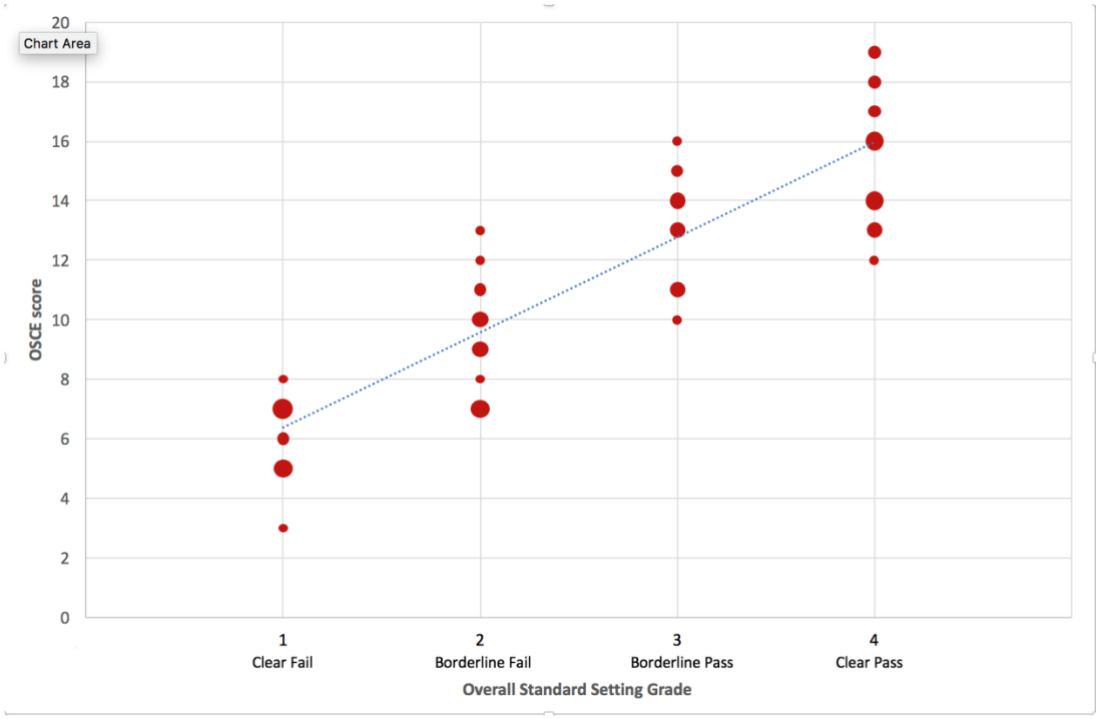
The current process comprises a check list marking system, marked by an examiner at each station. A number of stations are unmanned kiosk stations. The pass mark for each station is pre-set by the OSCE group, the sum of pass marks in 16 "live" stations resulting in the overall pass mark for the OSCE round. (This is the process that we call "Angoffing" but should be more correctly called Limen Referencing)

BLR uses 2 variables to calculate the pass mark for each station. Candidates will continue to be marked using a check list as is currently used. In addition, at the completion of each 5 minute station the examiner will allocate a global rating score which they feel reflects their opinion of the candidate's overall performance on the station. A four-point rating scale will be used – Clear Fail, Fail, Pass, Clear Pass. It is important to note that the global rating score the examiner is giving is not going to be used for that candidate's score but it will be used to help calculate the pass mark as described below.

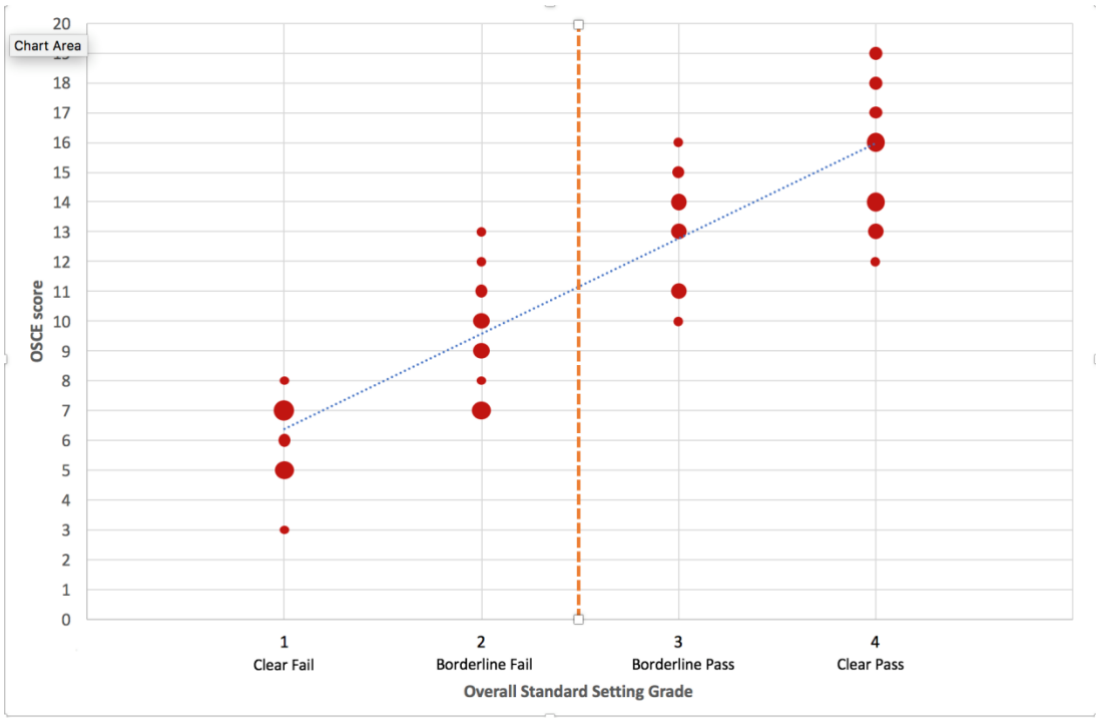
Check lists scores are then correlated against global rating scores. A line of best fit is applied, the borderline point identified, which is then used to identify the cut off score (see diagrams).



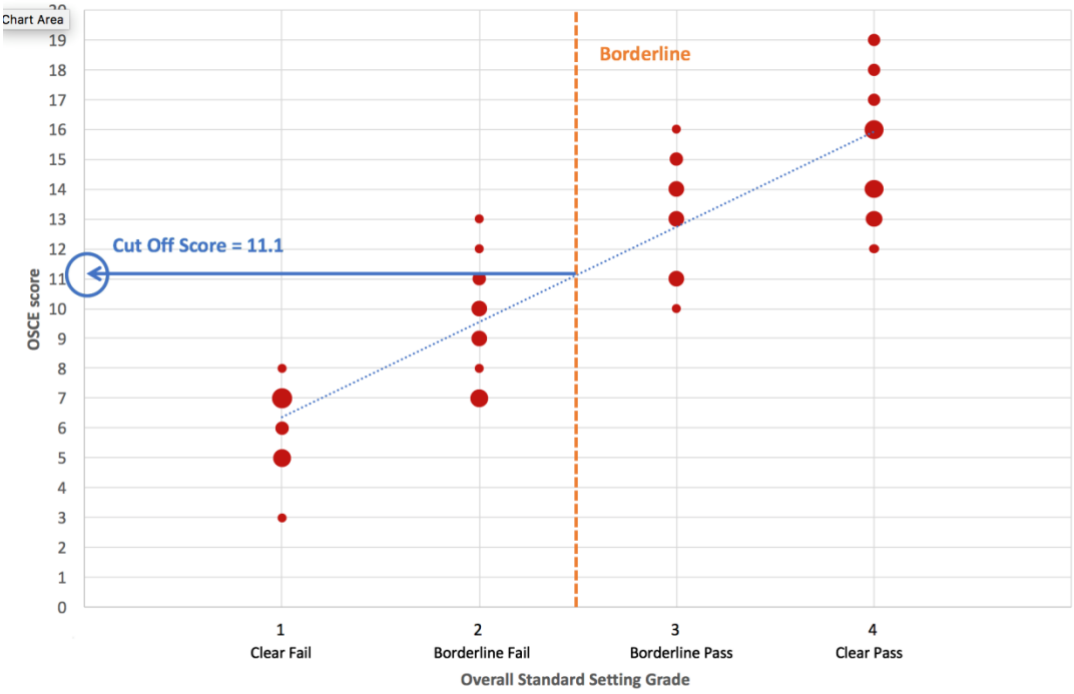
The global rating scores are on the x axis – we will use a four-point scale Clear Fail, Fail, Pass, Clear Pass. The Y axis equates to the check list score - which for the OSCE will continue to be marked out of 20.



Clever number crunching / stats will place a line of best fit.



The borderline point is identified – mid-point between the "fail" and "pass" mark.



The cut off score can be calculated from the point where the orange borderline point intersects the line of best fit. This would then be used with the scores from the other stations to calculate the passmark for the exam.

For the purposes of this trial

- We will continue to use our current system, candidates being marked against a check list, using a pre-determined pass mark. There will be no change to the process of identifying successful and unsuccessful candidates.

- You will be asked to allocate a global rating scale mark for each candidate on completion of each OSCE station – Clear Fail, Fail, Pass, Clear Pass – **You don't have to do anything else**

- You should only allocate a global mark against the performance of the candidate in your own station. Your global rating mark is not a "guestimate" of whether the candidate will pass / fail the overall exam

- Do not try to add up the scores in a station to allocate a global rating score. You do not know the weighting of specific questions

- Do not be afraid to give a fail mark. **This does not mean the candidate has failed** the station

- You will be provided with a separate marking sheet for the global rating scale for each OSCE round

We will complete a post exam analysis to look at how BLR compares to our current system.

Guidance for Global Rating Scale

Clear Fail
Unstructured, scatter gun, lack of basic understanding of topic, offers multiple answers for examiner to pick, guessing answers dangerous clinical approach

Borderline Fail
Erratic, inconsistent performance across range of questions. Hesitant with answering. Poor clinical decisions

Borderline Pass
Some gaps in knowledge demonstrated Basic knowledge, uncertain of in-depth questions

Clear Pass
Clear on core topics. Able to manage clinical and patient based scenarios in confident and fluent manner

Damian Doyle
OSCE Chair
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