March 2022

Multiple Choice Question Examination (MCQ) - Post Examination Report



The College continues to be mindful of the impact COVID-19 and local natural disasters has had on candidates' preparation for recent examinations, implications for training, employment, study leave, and considerable professional and personal burden that they may have experienced.

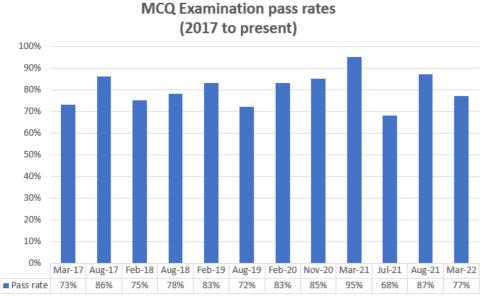
Given these circumstances, the March Multiple Choice Question (MCQ) examination was a 'No-Disadvantage' examination, meaning that an unsuccessful outcome for the examination would not be counted towards a candidate's training trajectory.

Established procedures were followed by The Committee for Examinations to create this examination. Fellows across Australia and New Zealand contributed to the standard setting of every question and the final cut-score that was calculated.

The March 2022 MCQ Examination was sat by 161 candidates. The pass rate was 77 per cent.

Table 1 below shows the pass rates over the last 5 years.

Table 1: MCQ Examination pass rates (2017 to present).



NOTE: The Aug 2021 MCQ Examination was sat by the NSW cohort from the July 2021 period.

The Exam content covered the foundational knowledge within the Stage 1 and Stage 2 syllabus. The pass mark was set to the standard expected by end of Stage 3 training. Candidates were provided performance feedback in identified curriculum areas. These areas include Assessment, Basic Science/Medical Knowledge, Epidemiology, Diagnosis & Classification and Public Health, Ethics and History, Phenomenology, Psychiatry, Philosophy & Psychodynamic Principles, Scholarship, Specific Areas of Practice, Specific Disorders, and Treatments in Psychiatry.

Analysis showed that areas of psychiatry where candidates performed well were in the fields of Assessment, Scholarship and Phenomenology.

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Areas of psychiatry which candidates are not as strong in are Ethics, History and Philosophy and Epidemiology, Diagnosis & Classification, and Public Health. The cohort may benefit from more study in these areas.

Table 2 shows a breakdown of exam content and the average percentage achieved for each question content.

Table 2: Average percentage of each question content.

| Question content | Average percentage of marks achieved by cohort | Maximum marks |
|---|--|---------------|
| Assessment | 71% | 10 |
| Basic sciences/medical knowledge | 60% | 69 |
| Epidemiology, Diagnosis, Classification and public health | 46% | 3 |
| Ethics, History and Philosophy | 43% | 8 |
| Leadership, governance & relevant legal frameworks | 62% | 4 |
| Phenomenology | 65% | 5 |
| Psychology, philosophy and psychodynamic principles | 56% | 2 |
| Scholarship | 69% | 7 |
| Specific areas of practice | 54% | 15 |
| Specific Disorders | 60% | 28 |
| Treatments in Psychiatry | 59% | 29 |

Multiple Choice Questions (MCQs)

MCQs cover foundational knowledge in psychiatry and can include areas of knowledge such as (but not limited to) neuroscience, pharmacotherapy, experimental design and critical analysis, history and philosophy of psychiatry, and principles of key psychotherapies.

The performance of questions in all exams varies and any MCQs that the cohort find difficult are analyzed by members of the CFE. Post-examination analyses of these questions in the exam revealed generally a lack of knowledge contributing to a poor performance, and reasonably robust question quality. Questions with a response pattern that was unexpected were individually reviewed and adjustments made as determined by members of the CFE.

The Specific Areas of Practice were broken down to the categories of; Addiction, Child and Adolescent, Forensic and Indigenous/Māori (1 question). Analysis showed strong knowledge in Addiction.

The Specific Disorders covered in the exam were Anxiety (1 question), Somatoform Disorders (1 question), Substance Use Disorders, Trauma and stress-related and dissociative (1 question), Eating (1 question), Mood, Organic, Personality, Psychosis and Sexual.

On average, trainees had a good understanding of Sexual, Substance Use Disorders and Organic disorders. This is proven in the analysis of the performance of the Specific Disorders MCQs.

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Critical Analysis Problems (CAPs)

The Critical Analysis Problems presented to the cohort were drawn from articles about a development study and a pandemic/social impact study within Sydney.

All CAP questions are categorized within Stage 1 and Stage 2 of the syllabus as covering basic sciences and medical knowledge.

Cohort performance on the CAP questions was good with only a small number of questions where the majority of the cohort struggled to answer correctly.

There were 10 candidates who received 18 marks or more for CAP 1, which had a weighting of 20 marks. Three candidates received 18 marks or more for CAP 2, which also had a weighting of 20 marks.

The CFE would like to remind all candidates that the ability to read and interpret the professional literature is regarded as a core skill of a psychiatrist. Candidates are expected to have knowledge of different types of research studies, controls, sources of bias, basic descriptive and analytic statistics, and reporting of findings. You can access a detailed guide to the knowledge that may be assessed in the CAP component on the College website: RANZCP Guidelines for CAPs

The CFE would like to remind candidates that, as the MCQ examination is predominantly a knowledge-based examination, it is important for candidates to ensure that they are up to date with basic sciences and medical knowledge.

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