Structured Assessment using Multiple Patient Scenarios (StAMPS)

Exam Information
1. Preparing for the StAMPS assessment process

StAMPS is an assessment modality that is designed to test higher order functions in a highly contextualised framework where candidates have the opportunity to explain what they do and demonstrate their clinical reasoning for a given scenario, as opposed to simply providing evidence of knowledge, listing facts or recalling protocols. The methodology for this assessment has been extensively researched and found to be a high level, reliable assessment tool; StAMPS has been accepted as such by the Australian Medical Council (AMC).

StAMPS is essentially a ‘hybrid’ between a viva voce and OSCE examination with the emphasis on the viva voce. Candidates are strongly advised to consider the relevant curriculum statements and prescribed reading list when preparing for the assessment, as well as familiarising themselves with the format of this assessment modality. The Primary Curriculum Assessment Blueprint provides a good guide as to which domain areas the StAMPS examination will focus on and is also of benefit for the AST StAMPS assessments.

2. What does StAMPS assess?

1. Is the candidate a safe clinician to work both independently and unsupervised in rural and/or remote primary care practice?
2. Does the candidate demonstrate appropriate clinical reasoning rather than simply demonstrating recollection of facts?
3. Has the candidate presented their answers in the context of the set geographical and logistical environment where the exam is set?

How does it work?

Candidates have access to a single ‘Community Profile’ available on the Assessment webpage. This document details the setting where the examination is deemed to be taking place and the context in which the candidate is required to answer the questions. The purpose of providing the ‘setting’ of the examination is to ensure uniformity for all candidates and to ensure that candidates are able to demonstrate how such demographic constraints may influence how they proceed with the management of the cases presented.

For the Emergency Medicine exam, there is an additional supplementary profile used for some of the scenarios, that assumes the candidate works at a larger regional emergency department for a couple of weeks a year (refer to the following section on Emergency Medicine for further details). NB: All other ASTs (Adult Internal Medicine, Mental Health, Paediatrics and Surgery) will only have the single ‘Community Profile’ for their examinations.

Number of Scenarios

Each examination consists of 8 scenarios that are examined by different examiners. The scenarios cover a broad range of topics chosen from across the entire breadth and depth of the relevant curriculum and are contextualised to ensure the seven domains of practice are examined.
Format of the StAMPS exam

Candidates are provided with a 10 minute reading time prior to the start of the examination, when they can read the ‘Scenario Information’ provided for each of the 8 scenarios and make notes. Candidates are provided with paper and pencils on the day of the exam. It is recommended that the candidate uses the first 5 minutes of this time to consider the exam as a whole, then the second 5 minutes to focus on the first scenario they are allocated in the examination. Candidates are advised to ensure they are clear about the sequencing in which they will be presented with the eight scenarios.

The individual scenarios involve a 10 minute period with an examiner, and have 1-4 questions or parts, and this varies each exam. The candidate is provided with a ‘time guide’ for the parts in each scenario. The examiner will provide prompts where necessary to assist the candidate. Between each scenario, the candidates have 5 minutes to read the ‘scenario information/candidate material’ for the next scenario and make notes.

The candidate remains in the same room for the duration of the examination, with the examiners moving from room to room between scenarios. Each scenario is examined by the same examiner for the duration of the examination. The relevant Principal examiner (or proxy) will ‘sit in’ with the regular examiners for some scenarios.

The Primary Curriculum StAMPS examination is currently offered as either a ‘face-to-face’ or video-link format – refer to the Assessment calendar for details. AST-Emergency Medicine and Adult Internal Medicine are currently only offered as a ‘face-to-face’ examination and all other AST examinations only as a ‘virtual classroom’ internet link.

For both Primary Curriculum, AST-Emergency medicine and Adult Internal Medicine examination there will be eight different examiners, each responsible for one scenario, for all other ASTs, their will usually only be two examiners, each delivering four scenarios.

Format of Scenarios

Scenarios are developed from actual clinical encounters to ensure they are very firmly based upon ‘real life’ situations. Extensive work is done to ensure the different parts all have a ‘key concept’ which represents the major area to be considered in each part. The ‘key issues’ are expected to elaborate upon the ‘key concept’ and are consistent with current clinical guidelines and best practice (eg the most recent documents are guidelines from the Heart Foundation are used when referencing scenarios involving Acute Coronary Syndrome or management of Rheumatic Heart Disease). Examiners are very aware of situations where there may be differences in approach as dictated by different State Health Department regulations, and thus ensure no group of candidates is disadvantaged by this factor.

Prior to use, every scenario is extensively reviewed by a number of College Fellows or Fellows of other relevant Colleges (eg FACEMs in the case of the Emergency medicine examination). Every scenario is ‘road tested’ by either a candidate or Fellow who has recently sat and passed the relevant examination to ensure wording of the main questions, the prompting questions and the timing of the parts of the scenario are appropriate.

Prior to the examination, extensive consideration and consultation is undertaken to identify the main issues that should be covered in each part of each scenario. It should be noted that there is no one perfect answer for any given scenario and candidates do not necessarily need to exhaustively list information as there may be a number of different perfectly reasonable approaches to answering the questions posed. Questions may start broad and then narrow in on something specific, or start off with a narrow focus then broaden out. Often initial management without a clear diagnosis is required.
The examiners are looking to ensure that Candidates are able to appropriately contextualise their answers and are functioning at the standard expected for a Fellow of the College. The examiners have very carefully considered criteria to assess candidates against.

4. StAMPS Grades and Marking

Candidate performance is assessed across **five categories** (below) using a global assessment scale.

1. Overall Impression
2. Develop appropriate management plan that incorporates relevant medical & rural (community profile) contextual factors
3. Define the problem systematically
4. Communication
5. Be flexible in response to new information

The Global Assessment scale has **four categories**:

1. *Excellent*: the examiner considers that the candidate demonstrated a very high level of competency.
2. *Satisfactory*: the examiner considers that for the curriculum and domains covered by the scenario that the candidate is considered safe to practice independently and unsupervised in the context of rural and/or remote primary care practice.
3. *Borderline*: the examiner considers that the candidate is not yet ready to practice independently or unsupervised – in this category it may be that some of the elements of the scenario were well covered, but not in others or that the overall performance was below that expected for a satisfactory grade.
4. *Unsatisfactory*: the examiner considers that from the information gathered in the scenario the candidate is not yet safe to be practicing independently or unsupervised – this grade is also awarded in the situation where a candidate’s discussion would result in a critical – potentially life threatening or significant morbidity outcome for patient presenting with a given problem.

The result of the examination is determined by the grades achieved across the eight scenarios. It should be noted that the standard for the examination is ‘pre-set’ prior to the examination and that there is no statistical adjustment of results.

5. How are the results determined?

The grades awarded for ‘overall impression’ are viewed in the first instance:

- If a candidate has achieved a satisfactory or higher grade in all 8 scenarios, they will have passed the examination.
- If they have achieved a borderline score for one scenario, but satisfactory in the other seven, they will have passed.
- In the case of only five scenarios being at a satisfactory or higher grade, the overall result will be a fail.
- In those cases where there is not a clear result, the other grading categories are then considered, with the category ‘Develop appropriate management plan that incorporates relevant medical & rural contextual factors’ being the next to be viewed and then if there is still no clear result the other three categories are reviewed.
It should be noted that each grading category is viewed individually and that the overall impression is just that, it is not a ‘composite score’ of the other grades awarded for the scenario.

The relevant principal examiner carefully reviews every examination result to ensure they are correct.

The following algorithm provided to guide grading for Overall Impression. Examiners for the primary curriculum examination use this criteria from the perspective of competent generalist primary care provider. For all the ASTs, a higher level of competency is expected, but not at the level of a specialist in the relevant area.

StAMPS Algorithm

Taking into consideration all the key concepts of this scenario, do you consider the Candidate to be a safe Practitioner?

- **NO**
  - **UNSATISFACTORY GRADE**
    - *Must provide reasons*
    - *Was there a significant deficiency?*
  - **BORDERLINE**
    - Must comment & provide justification

- **YES**
  - Are they performing at the level expected for **FELLOW** of **ACRRM**
    - **NO**
    - **YES**
    - Are they a *standout* exceptional candidate
      - **NO**
      - **YES**
      - **SATISFACTORY**
      - **EXCELLENT**
Appeals, Special Considerations and Incidents

Please refer to the assessment handbook for information relating to Appeals, Special Considerations and Incidents. Policies relating to these are available on the ACRRM website – www.acrrm.org.au.