Examining equality
A survey of royal college examinations
Progress review

January 2014
This report was prepared under the auspices of the Equality and Diversity Committee of the British Medical Association, whose membership for 2013-14 was as follows:

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The Committee would like to thank all past members of the Committee who have contributed to the development of this report, in particular Dr Rafik Taibjee (Chair, Equality and Diversity Committee, 2012-13).
In 2005, the BMA undertook a review of the monitoring of specialty examinations in light of the widespread perception that these examinations were unintentionally discriminatory. The findings of this review were published in the BMA's 2006 report *Examining equality: a survey of royal college examinations*. This highlighted evidence that the level and extent of monitoring and evaluation was variable, and made a number of key recommendations for action, including that more effective monitoring and analysis were necessary.

With BMA members continuing to express their concern that different groups achieve different levels of success when undertaking specialty examinations, the BMA’s Equality and Diversity Committee undertook a further review of the monitoring of specialty examinations in 2013. The intent was to help the medical royal colleges / faculties (referred to in this paper as ‘the colleges’) understand, and comply with, best practice for running these examinations. This is a part of the BMA’s commitment to working collaboratively to ensure that medical students and doctors are treated fairly and do not face discrimination in their education and career progression.

In March 2013, Dr Mark Porter (Chair of Council) and Dr Rafik Taibjee (Chair, Equality and Diversity Committee, 2012-13) wrote to the colleges requesting information on whether (and how) they collect and evaluate information on:

- the protected characteristics of age, disability, ethnicity, gender, religion and belief, and sexual orientation for all candidates, examiners and any role play actors

- candidates’ place of qualification

- drop-out rates, pass rates and any complaints made by a candidate, in relation to the protected characteristics of age, disability, ethnicity, gender, religion and belief, and sexual orientation

- uptake of equality and diversity training for examiners and any role play actors

- examples of good practice regarding equality and diversity in the field of assessment which could be shared.

A list of the colleges contacted is provided in Appendix 1, and a copy of the letter is provided in Appendix 2.

Responses were received from all of the colleges contacted. The quality of the responses varied significantly from the detailed to the very short, with the majority less than one page.
The following provides an analysis of the responses received and supplementary information for each of the key themes.

**Monitoring of candidates against protected characteristics**

Monitoring of candidates against protected characteristics is a vital step in ensuring that postgraduate examinations are not affected by any unfair discrimination or bias. This includes regular analysis of the data collected, in particular in relation to drop-out rates, pass rates and complaints. Such analysis can:

- help identify potential barriers to those with protected characteristics
- assess progress over time
- form the basis of any future work to remove unfairness, disadvantage or inequality.

Where monitoring does not take place, or where there is inadequate evaluation, it is usually impossible to determine whether unfair discrimination or bias is occurring. Any perception that policies or procedures are discriminatory, and do not consider the issues affecting minority groups, are unlikely to be legitimately challenged, meaning any perceived stigma or prejudice may be reinforced.

Some monitoring of equality and diversity was reported by the majority of the colleges, but was not consistent across the protected characteristics (see Table 1). These variations in part reflect the developing legislative framework in the UK. Protection against discrimination on the grounds of disability, ethnicity and gender has been enshrined in law since the latter half of the 20th Century, but similar provisions for other equality strands were only introduced with the Equality Act 2010. The relatively high level of monitoring of age probably reflects the fact that many organisations have traditionally collected information on an individual’s date of birth for reasons other than equality and diversity.

<table>
<thead>
<tr>
<th>Protected characteristic</th>
<th>Reported level of monitoring</th>
</tr>
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<tbody>
<tr>
<td>Age</td>
<td>14/18</td>
</tr>
<tr>
<td>Disability</td>
<td>14/18*</td>
</tr>
<tr>
<td>Ethnicity</td>
<td>17/18</td>
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<tr>
<td>Gender</td>
<td>17/18</td>
</tr>
<tr>
<td>Religion and belief</td>
<td>4/18</td>
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<tr>
<td>Sexual orientation</td>
<td>4/18</td>
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</tbody>
</table>

* This information was reported to be mainly collected to inform whether reasonable adjustments are necessary during examinations and not for monitoring purposes.

Analysis of the responses found there to be limited evaluation of monitoring data. Only 8/18 of the colleges reported analysing pass rates in relation to the protected characteristics.
Analysis of drop-out rates and complaints was reportedly less common. Only one college reported analysing complaints, appeals and disqualifications. In this college analyses were only undertaken in relation to ethnicity.

**Monitoring of candidates’ place of qualification**

The rationale for monitoring candidates’ place of qualification is the same as that for monitoring against the protected characteristics. Having rigorous and robust data on candidates’ place of qualification allows the colleges to explore whether disparities exist and if any practices are discriminatory. It also helps analysis of how to break down any barriers to career progression and how to best support trainees.

While monitoring of candidates’ place of qualification was reported by most colleges (17/18), only 8/18 reported undertaking analysis of pass rates in relation to place of qualification. None of the colleges reported that they analyse drop-out rates or complaints in relation to trainees’ place of qualification. While one college noted that they undertake analyses of candidates’ drop-out rates, this was only in relation to UK trainees.

**Monitoring and training of examiners**

Examiners are often involved in developing assessments for specialty examinations (e.g. writing exam questions). A key component in helping to eliminate any potential discrimination or unfair bias is ensuring that the diversity of examiners adequately reflects the diversity of the candidate population, and is responsive to the changing demographics of the wider medical workforce. This is an important way of ensuring a breadth of personal and professional perspectives among the population of examiners.

It is essential that the diversity of those involved in running, marking and grading examinations is monitored, and that these data are analysed. This includes reviewing the pattern of examiner performance to ensure consistency. Cross referencing by candidates’ performance should also be used in quality assurance mechanisms to ensure that there are no hidden biases in examiner behaviour.

Equality and diversity monitoring of examiners was reported by only 12/18 colleges, with considerable variation in monitoring across the diversity strands (see Table 2).

<table>
<thead>
<tr>
<th>Protected characteristic</th>
<th>Reported level of monitoring</th>
</tr>
</thead>
<tbody>
<tr>
<td>Age</td>
<td>6/18</td>
</tr>
<tr>
<td>Disability</td>
<td>7/18</td>
</tr>
<tr>
<td>Ethnicity</td>
<td>12/18</td>
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<tr>
<td>Gender</td>
<td>12/18</td>
</tr>
<tr>
<td>Religion and belief</td>
<td>2/18</td>
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<tr>
<td>Sexual orientation</td>
<td>2/18</td>
</tr>
</tbody>
</table>
Analysis of examiners’ performance in relation to the protected characteristics was found to be rare. Where this was reported, it did not involve analysis of all the protected characteristics. Of the responses received only 4/18 colleges reported undertaking analyses of any kind, and in all cases this was only in relation to the protected characteristics of gender and ethnicity. As with the monitoring of candidates, it is likely that these variations reflect the developing legislative framework in the UK.

Education and training in equality and diversity is a key tool in helping examiners understand how an individual’s social identity may impact on their experiences during medical training. Its overarching aim is to help identify and change behaviours that may lead to unfair discrimination. This includes raising awareness of the barriers faced by candidates from minority groups, and improving understanding of how discrimination can impact on an individual’s career.

All of the colleges reported that they require examiners to have undertaken equality and diversity training.

**Monitoring and training of role play actors**

The use of role play actors is a common feature in specialty examinations as a way of supporting the assessment of a candidate’s competency in history taking, communication and examination skills. It is important that the diversity of these actors reflects the diversity of the patient population, and that the actors understand how equality and diversity can impact on their role in the assessment process. As with examiners, it is essential that the diversity of role play actors is monitored and evaluated, and that they receive training in equality and diversity.

Ten of the colleges noted that role play actors were used as a part of their examinations. Of this group, one reported monitoring their diversity, and only two reported providing equality and diversity training to them.
Discussion and conclusions

This review has found that there continues to be considerable variability in the processes and procedures for monitoring speciality examinations with respect to equality and diversity. Of particular concern is:

• the inconsistency in monitoring candidates in relation to age, disability, ethnicity, gender, religion and belief, and sexual orientation

• that not all of the colleges monitor candidates' place of qualification

• that not all of the colleges evaluate the data they collect against pass rates, and that there is limited evaluation of these data in relation to drop-out rates and complaints

• that the monitoring of examiners and role play actors with regard to equality and diversity is inadequate

• that the provision of equality and diversity training for role play actors (for the colleges that use them) is deficient.

In light of these findings, we are concerned that insufficient attention may be being paid to ensuring these examinations are not affected by any unfair discrimination or bias.

The BMA believes that best practice would be for the colleges to match the requirements of the public sector equality duty (PSED) as set out in section 149 of the Equality Act 2010. This reflects the fact that the public rely on these examinations to ensure that trainee doctors meet appropriate standards of competence upon completion of their specialty training.

The key features of the PSED include the requirement to have ‘due regard’ for the need to eliminate unlawful discrimination, and to advance equality of opportunity between those who have a protected characteristic and those who do not. Complying with the ‘due regard’ requirement is governed by the following principles.

(i) There should be a proper analysis of all the relevant material and an appreciation of the duty to have due regard.

(ii) Regard should be had to the duty to have due regard before, and at the time, a particular policy is considered. It should not be a “box-ticking” exercise but should instead be a process integrated in the decision-making process.

(iii) The duty is a continuing one.

(iv) The duty is non-delegable and will always remain the responsibility of the body subject to the duty.

(v) The duty to have due regard should be exercised with rigour and an open mind.

(vi) The duty should be reconsidered if new information comes to light and adequate records should be kept of the consideration and decision-making processes undertaken in order to demonstrate that the equality duties have been undertaken conscientiously. If the relevant general equality duty is not mentioned, it does not mean that the duty has not been performed, however it is good practice to refer to the duty and any considerations under it to avoid future legal challenge.
Although there is no specific requirement to undertake an equalities impact assessment, the Equality and Human Rights Commission (EHRC) favours doing so, and it is likely that such an assessment is the best way to provide the necessary evidence to demonstrate appropriate analysis has been undertaken.

While the Equality Act 2010 is not prescriptive about what actions should be taken to comply with the PSED, we believe that all the colleges should ensure they have implemented robust processes and procedures to regularly collect and evaluate data on those who are sitting specialty examinations, those who are examining them, and any other individuals involved in the assessment process. This is more than just data collection; any problems identified through analysis of the data should be followed up and tackled. This should be complemented by comprehensive and mandatory equality and diversity training for examiners and any other individuals involved in the assessment process (such as actors). The work each college is undertaking in this area – including any concerns they have identified and action taken to address these concerns – should be included in their Annual Specialty Report to the General Medical Council (GMC), and made publically available. Implementing these measures comprehensively will ensure all the colleges are able to robustly challenge any perceptions that these examinations are unintentionally discriminatory.
Recommendations for action

All colleges should:

• monitor and evaluate candidates’ pass rates, drop-out rates and complaints on an annual basis against the following characteristics: age, disability, ethnicity, gender, religion and belief, and sexual orientation

• monitor the diversity of all examiners and actors on an annual basis in relation to age, disability, ethnicity, gender, religion and belief, and sexual orientation, and cross reference these data to candidates’ performance

• provide an update on their findings, progress and any areas of concern in their Annual Specialty Report to the GMC, and make this information publically available

• provide mandatory equality and diversity training for all examiners and actors involved in specialty examination assessments.
The findings of this review have been shared with the Academy of Medical Royal Colleges (AoMRC), the GMC, and all the colleges involved in the project. It is planned that this will be fed into the ongoing work on standards for examiners being undertaken by the AoMRC Assessment Committee.

In the longer term, the BMA believes there is a need for further research on the factors beyond the assessment process which may contribute to unfair bias and differential attainment in specialty examinations. This includes consideration of factors related to postgraduate training programmes, as well as external factors outside of postgraduate medical education.

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**Next steps**

Following joint discussions between the Colleges and the GMC in July 2013, it was agreed that a task and finish group would be established by the AoMRC to review standards and requirements for examiners in all specialties. The intended outcome is to establish generic standards which will represent the minimum requirements for examiner selection, training, performance management and duration of appointment (including collection of equality and diversity data).
Appendix 1

- College of Emergency Medicine
- Faculty of Dental Surgery
- Faculty of Occupational Medicine
- Faculty of Pharmaceutical Medicine
- Faculty of Public Health
- Royal College of Anaesthetists
- Royal College of General Practitioners
- Royal College of Obstetricians and Gynaecologists
- Royal College of Ophthalmologists
- Royal College of Paediatrics & Child Health
- Royal College of Pathologists
- Royal College of Physicians London
- Royal College of Physicians & Surgeons of Glasgow
- Royal College of Physicians of Edinburgh
- Royal College of Psychiatrists
- Royal College of Radiologists
- Royal College of Surgeons of Edinburgh
- Royal College of Surgeons of England
Dear «Salutation»

Equality and diversity monitoring of specialty examinations

We are writing in relation to the equality and diversity monitoring of specialty examinations.

There is a growing level of concern among some BMA members that certain groups achieve different levels of success when undertaking these examinations. This has led to a widespread perception that they are unintentionally discriminatory. We know that there may be many factors at play, and this may not necessarily be a fair view, but feel it is important to understand how widespread an issue this is. Of particular concern are the differential pass rates for candidates qualified overseas compared to UK graduates.

In 2006, we undertook a review of the way in which these examinations are monitored and evaluated with respect to equality and diversity, and made a number of key recommendations for action. A copy of the final report published in light of this review is enclosed for your information. We are now keen to follow up this work to see how things have changed, and share best practice regarding the way postgraduate professional examinations are monitored and evaluated.

The purpose of monitoring is to enable an organisation to establish its current position, identify barriers to aspects of equality and diversity, accommodate for the needs of all, remove any unfairness or disadvantage, plan future action to address any inequalities, and assess progress over time. Failing to do so risks reinforcing stigma and prejudice, as well as enhancing the perception that an organisation’s policies and procedures do not address the issues affecting minority groups. Monitoring is more than just data collection. Data must be regularly analysed and questioned. Any barriers or failures highlighted must be followed up and tackled. This approach is supported by the Equality and Human Rights Commission, and is a vital step in meeting the provisions of the Equality Act 2010 with regard to an organisation’s public functions.

As a way of ensuring specialty examinations are not affected by any discrimination or bias, we believe that Royal Colleges should collect and evaluate data on:

- the legally protected characteristics – ethnicity, gender, disability, age, sexual orientation, and religion and belief – for all candidates, examiners and any role play actors
- candidates’ place of qualification
- drop-out rates, pass rates, and complaints against a candidates’ protected characteristics
- uptake of equality and diversity training for examiners and any role play actors.

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If you are already undertaking this work, we would be grateful if you would share this information with us. If you do not carry out this monitoring and evaluation, it would be helpful to know whether your College has any plans to implement these changes. We also want to hear any examples you think are good practice regarding equality and diversity in the field of assessment which could be shared.

We would be grateful to receive your reply by 30 April 2013. Please would you send this to George Roycroft (Deputy Head of Science and Education) at groycroft@bma.org.uk, or by post to BMA House, Tavistock Square, London, WC1H 9JP.

Thank you in advance for your help in this matter.

Yours sincerely

Dr Mark Porter
Chair of Council

Dr Rafik Taibjee
Chair, Equality and Diversity Committee
(2012-13)