

Joint Committee on Intercollegiate Examinations

Guidance Notes for Referees Completion of the Structured Reference Form

(to be read in conjunction with the 2015 Examination Regulations; Reference form available from www.jcie.org.uk)

Guidance Notes for Referees

Section A must be completed by the Applicant.

Sections B – H must be completed by the Referee.

As a Referee you MUST:

- be on the UK or Irish Medical Register [referees do not require a licence to practise in the UK or Ireland] [referees must be in good standing with the GMC or IMC with no restrictions to practise]
- have direct experience of the applicant's current clinical practice within the last 2 years

The Intercollegiate Surgical Curriculum defines the breadth and depth of knowledge, professionalism and technical skill to be attained by surgeons in training. It specifies the levels of expertise to be anticipated at entry and at various stages in training and defines the standards of competence expected on completion of the training programmes. The Joint Committee on Intercollegiate Examinations (JCIE) adopts this standard as the one against which assessment will be made. Candidates will be required to provide verification that this level has been reached in their clinical experience prior to sitting the Intercollegiate Specialty Board examination. The supporting endorsement will normally be provided by the trainers or senior colleagues.

It is important to the relevant Intercollegiate Specialty Board that you, in giving your support, are fully aware of the standards defined in the relevant specialty curriculum (www.iscp.ac.uk). The standards are those which apply to the appropriate discipline at the end of the training programme. Please note that the description of these standards should be taken as a guide to assist you in formulating your reference for the applicant irrespective of his/her position in clinical practice or in a training programme.

The JCIE recommends that if a referee cannot provide support, the referee should complete the structured reference form for their own record and retain a copy.

The examination is conducted in two sections. Section 1 (Multiple Choice Questions in the format of Single Best Answer [SBA] and Section 2 (clinicals – patient based and scenario based). Candidates must meet the required standard in Section 1 to gain eligibility to proceed to Section 2.

The examination will assess various elements of applied knowledge, diagnostic skills, clinical judgment and professionalism. Referees are therefore asked to comment specifically on these elements of an applicant's competence to ensure that candidates have attained the requisite standard in these domains.

Eligibility will be granted by the relevant Board based on the applicant having met all entry criteria and having submitted three supportive structured references.

Diagnostic skills (Reference Section C)

We require your detailed comments on the candidate's suitability with respect to:

- Skilled, logical and analytical elucidation of a patient's history.
- Careful acquisition and processing of information determined in the physical and clinical examination and construction of a satisfactory management plan for all patients.

Please note that candidates will face assessment scenarios which may be complex and demanding and applicants must have satisfied you that they have the necessary skills and experience to deal with patients and situations which are not straightforward or routine. It is expected that discussion will take place in the examination on aspects of diagnostic strategy and on the use, advantages and disadvantages of various

relevant investigations. You should therefore be in a position to indicate that your support is based on knowledge of the candidate's ability in these areas.

Clinical Management (Reference Section D)

The examination is set at the level of knowledge and standard required of a new consultant in the UK or Ireland. Given the range of cases, the spectrum of complexity and the ability to deal with variations and complications within the practice of this specialty – candidates should have been able to convince you that their training / experience is such that they can safely manage both common and more complex clinical problems.

Operative skills (Reference Section E)

While the Intercollegiate Specialty Board Examination does not formally assess technical operating ability the Boards consider it inappropriate to admit candidates to the examination if there is any doubt as to their technical skill. It is therefore considered very important that your support in this area is well founded either from your personal observations and experience of the candidate or from reliable and systematically assessed observations of the candidate's ability in this area. The logbook of surgical procedures on its own should not be considered as any more than a rough guide. The valid observations of expert observers are known to be reliable and *the degree to which you can support* this candidate should be carefully recorded in this section.

Professionalism and Probity (Reference Section F)

The development of a mature and professional approach to performance in clinical practice is essential for safe and successful patient care. Attitudes towards patients and colleagues, their work ethic, their ability to deal with stressful or even confrontational issues and the effectiveness of their communication skills in providing supportive care for patients and their families are indicative of the professional qualities required of a candidate.

Communication & Language Skills (Reference Section G)

The Boards would consider it inappropriate to admit candidates to the examination if there is any doubt as to their ability to demonstrate satisfactory communication and English language skills necessary for their daily practice in the UK/Ireland. You should therefore be in a position to indicate that your support is based on knowledge of the candidate's ability to demonstrate: satisfactory communication in all situations, anticipating and managing any difficulties which may occur; the ability to break bad news in both unexpected and planned settings; appropriate communication with team members, predicting and managing conflict between members of the healthcare team.

Declaration (Reference Section H)

Referees must have evidence to justify their Declaration should this be required by the Board. Structured Reference Forms must be completed in typed format and returned to the applicant.

It is the applicant's responsibility to ensure that all 3 structured references are submitted with the application form.