Passing the CSA

# Why do people fail?

Most people fail because they do not demonstrate Clinical Management skills sufficiently.

Failure because candidates do not demonstrate Inter-personal Skills are significantly rarer.

Timing is extremely important, five minutes into the case, move onto clinical management.

# Feedback statements

The proportion of those who get feedback statements is different for IMG candidates

Commonest statements from feedback in 2013

7 : Does not develop a management plan (including prescribing and referral) reflecting knowledge of current best practice.

18% of everybody but amongst IMGs 24%

Then

13 : Poor active listening skills and use of cues. Consulting may appear formulaic (slavishly following a model and/or unresponsive to the patient), and lacks fluency.

12% of all but 21% of IMGs

Then

2 : Does not recognise the issues or priorities in the consultation (for example, the patient’s problem, ethical dilemma, etc.).

All 15% and IMG 20%

Then

15 : Does not develop a shared management plan, demonstrating an ability to work in partnership with the patient

All 14% IMGs 20%

# Tips

* Be really familiar with the 3 domains tested in CSA and what they mean
* Review lots of consultations with more than 1 trainer *both* on video *and* in joint surgeries
* When using COTs don’t be content with competent but look for excellence; discuss what would have made this consultation excellent.
* Practice consulting at 10 minutes for the consultation (does not have to include reading beforehand and computer use afterwards)
* Get used to wearing the clothes you will wear for the exam
* Try a surgery in another practice / with an external trainer coming in to assess you.
* Practice examination of things which can be examined on a simulator 26 times a day
* Practice explanation of results and also of common conditions to non-medical friends ( and to the mirror!)
* Make decisions; don’t postpone decision making
* Learn to share your thoughts when you are stuck
* Practice early open questions and plan time so that you have completed Data Gathering by 5-6 minutes.
* Live in an English world completely (what language do you talk at home, what TV / radio programmes, etc.)
* In joint surgeries practice “trio consultations” i.e. share thoughts in front of the patient openly half way through.
* Time away from GP just before the exam does not help …keep consulting
* Use a peer support group which is not full of your friends (friends may not be good at being critical)
* Think of the consultation as a conversation in which you don’t talk much especially at the start but later you will need to take a bigger part in as you pull information together.
* Explain why you need to know particular things
* Talk whilst examining (explain your findings or more ask more Data Gathering related questions)
* Practice 1 new skill in each consultation until you are confident in it.

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Adapted from Dr Jim Bartlett 2013

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