PERSPECTIVE

Reflections on the delivery of online postgraduate specialty membership examinations in orthodontics

The Faculty of Dental Surgery of the Royal College of Surgeons of England is an independent internationally recognised UK professional body comprised of a board and over 5,000 members. The Faculty is commited to enabling all members of the dental team to achieve and maintain excellence in practice and patient care.

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Key points

- Highlights the need for remote specialist examinations in orthodontics during the pandemic.
- Discusses the modifications required to the existing assessment for remote delivery.
- Candidate and examiner feedback metrics are presented.

For many specialist trainees in dentistry, the UK COVID-19 lockdown heralded a period of significant disruption to their clinical training. A clear undertaking was made early on in the pandemic to maintain training progression wherever possible.[1] This meant that the Royal Colleges were required to facilitate specialist examinations, while also following relevant government guidelines on social distancing to ensure safety of candidates, administrators and examiners. The only safe and practicable way of achieving this has been through the development and delivery of remote assessments. This was a mandatory requirement during the early stages of the pandemic, but even now, there remains a strong argument for minimising candidate and examiner travel to examinations and requirements to stay in local accommodation, therefore reducing the overall risk for participants acquiring COVID-19 infection during face-to-face (F2F) specialist examinations. However, all parties would agree that direct interaction between the examiner and candidate provides the optimal clinical examination experience. Here, we reflect on almost two years of a remote bi-collegiate MOrth examination run by the Royal College of Surgeons of England and the Royal College of Physicians and Surgeons of Glasgow. For a summative clinical assessment of specialist knowledge, skill and behaviour that has traditionally had F2F interaction as a core component, this has necessitated adaptations to the process of delivering this examination.

In order to deliver a specialist clinical examination remotely, a number of essential changes were required to a format that included a written component, an objective structured clinical examination (OSCE) and an oral examination for a series of presented and unseen clinical cases. The examination was reframed by a senior examiner team to facilitate remote delivery but maintain the validity, reliability and fairness of the original assessment. This was achieved through the introduction of a short-answer question paper and two remote clinical communication scenarios using examiners as actors to replace the OSCE, while maintaining the presented and unseen (structured clinical reasoning) cases sections, also to be delivered remotely. In order to conduct the examination remotely, the Microsoft Teams (MS Teams, Microsoft Inc) platform was used, combined with remote and real-time proctoring. MS Teams has a number of facilities that make it a very versatile system for the organisation of remote examinations, including secure information transfer, split-screen functionality and the ability to set-up multiple 'rooms' for the examinations themselves, as well as breakout 'rooms' for examiners, administrators and candidates. As for much of the population since the first lockdown, the use of MS Teams has become embedded into normal life and the examination departments within the colleges were able to successfully adapt their use for efficient running of remote examinations.

We have previously reported in more detail on development, implementation and feedback for this online examination.[2] Overall, the positive response rates for candidates and examiners were well over 70%, with candidates overwhelmingly reporting that the online examination format worked well. Similarly, 80% of examiners reported that they felt the online examination style did not affect the mark that the candidate achieved and all were confident that the marks the candidates achieved were a reflection of their ability and not affected by the online delivery.[2]

Clearly, there is no substitute for F2F interactions between candidates and examiners in specialist clinical examinations. As we have seen, communication via a video link can work very effectively but inevitably, can suffer from occasional tecnological problems, lacks many of the subtleties of direct communication and will never represent a permanent replacement. However, the rapid establishment of a functional and robust online specialist examination has allowed career progression to continue during the pandemic and maximised the safety of all participants in during this process. It is likely that remote delivery will continue to influence the provision of speciality examinations in dentistry over coming years, both nationally and internationally. ■

References

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2. Eckhardt C E, Seehra J, Chadwick S M *et al.* Development, implementation and feedback for an online speciality membership examination in orthodontics during the COVID-19 pandemic. *Br Dent J* 2021; **231:** 503–511.