Friday May 3rd, 2024 – Closed Workshop Meeting
(Only for UEMS-CESMA delegates)

Chairs: Albert Mifsud, Gian Battista Parigi and Ambrogio Fassina

13.00 – 13.30   Name badges and registration

13.30 – 13.40   Welcome and introduction *(Maeve Durkan)*

In her presidential address, Dr Durkan warmly welcomed all participants and outlined the purpose of the workshop. She extended her gratitude to Prof. Dany Mathysen, whose efforts made it possible to host the event in his hometown, and led a round of introductions. Special thanks were also given to the Office team, with particular recognition to Amelia and Sandrine.

13.40 – 15.45   Appraisal workshop
13.40 – 13.45   General introduction on UEMS-CESMA appraisals *(Danny Mathysen)*

Prof. Mathysen initiated the workshop sessions with a warm welcome to all participants in Antwerp. He emphasized the importance of inviting the observers of the appraisals, encouraging them to check out the proceedings from 2020, when we began the Transplant Surgery Exam. It is crucial for the observers to grasp the **concept of the examination under appraisal**, as it should foster **discussion** and **consensus**, **which is our key observation**.
He raised questions about the clarity of the instructions provided to candidates. UEMS-CESMA observers will interview both examiners and candidates to gather their feedback on the examination process. Regarding examination safety procedures, we will assess how easily candidates could cheat during the exams. If the Angoff method is employed, we will evaluate its proper application.
Lastly, he noted that we encountered a significant volume of appraisals last year, resulting in a substantial backlog. The first draft must be submitted to the Appraisal Officer within 30 days of the examination's conclusion. New requirements for appraisals include establishing timelines; arrangements need to be made six months prior to the appraisal date.
Prof. Mathysen also introduced Dr Brian Jocobs and his testimonial. Dr. Durkan encouraged everyone to take notes promptly, advising observers to do so immediately rather than relying on their memories later.

13.45 – 13.55   Testimonial of an appraiser *(Brian Jacobs)*
Dr Jacobs shared his reflections, drawing on personal experiences both as an examinee and a trainer. His insights highlighted several challenges and potential pitfalls in medical examination processes:

- **Exam Anxiety:** Experiences of fear, stress, and even intimidating behavior by examiners, including incidents of female students being reduced to tears.
- **Exam Conditions:** Issues like disruptive noise, the leaking of exam questions by exiting candidates, and rapid loss of "crammed" knowledge.
- **Exam Structure Concerns:** Key questions around the purpose of accreditation—whether the exam effectively evaluates essential skills and knowledge.
- **Exam Design Challenges:** The difficulty of creating clear, structured questions that test not just rote knowledge but critical thinking, especially when practices differ across Europe.

What Can Go Wrong?
- **MCQ Pitfalls:** Poor question structure, incomplete syllabus coverage, excessive factual focus over conceptual understanding, and language complexity.
- **Statistics and Fair Assessment:** Many examiners rely on a pass mark rather than a robust statistical approach, often overlooking the nuances of "minimally competent" candidates. Statisticians' input is frequently underutilized.

Integrity Concerns and Technical Issues:
- **Cheating Prevention:** Ensuring fairness can be challenging without multiple cameras on candidates; Dr Jacobs advocates for open-book exams as a solution.
- **Technical Failures:** Remote server issues, bandwidth limitations, and overlapping candidate cohorts can disrupt online assessments.

Examiner and Appraiser Challenges:
- **Coordination Difficulties:** Identifying appraisers early and managing absences is crucial, as delays in reporting can be costly. He notes the importance of appraisers who can step in to keep things moving.

Unique Hurdles for Smaller Specialties: resource limitations in smaller fields—like funding and manpower—make implementing examinations particularly challenging.

Final reflections: Dr Jacobs joined CESMA to better understand the examination framework and assess whether it's worthwhile to establish an exam in his specialty (Psychiatry). His experience revealed the complex demands of exam creation and the many elements that can go wrong, underscoring the difficulty and dedication required in developing robust assessment systems.

13.55 – 14.05   Progress on the updated appraisals report template *(Danny Mathysen)*

Prof. Mathysen presented an update on the work of the *UEMS-CESMA Core Appraisal Group*, which has completed a revised **Appraisal Report Template** for 2024. The new template is more standardized, expanded from 7-8 pages to 20, and is ready for use moving forward. He invited the audience to submit its feedback on this process and what would they like included in a guidance document.

Key Points and Cautionary Notes:
- **Exam Quality as a Priority:** Danny emphasized that the quality of exam content is critical and should be a central investment.
- **Question Security:** Reliable and secure exam questions are essential.
- **Testing Security Measures:** Observers are encouraged to test the exam's security. Attempting activities like taking notes or discreetly interviewing candidates can reveal vulnerabilities. Danny shared his own experience where he successfully accessed exam content undetected in various settings. It was always possible to cheat in a way or another.
- **Backup Plans and Clear Instructions:** Prepared backup plans and clear exam instructions are vital, as stressed candidates may overlook or forget important details.

The purpose of this session is to gather input to develop an instructional manual that will accompany the new appraisal template for 2024.

14.05 – 14.10   Examples of what might go wrong during an exam *(Danny Mathysen)*

14.10 – 14.15   Instructions for the appraisals workshop *(Danny Mathysen)*

The delegates will be divided over five groups. In each group someone needs to be assigned to take notes and to speak on behalf of the group during the general discussion. Each group will be assigned two different topics on UEMS-CESMA appraisals. The new appraisals report template will be provided for the group discussions.

14.15 – 15.00   Group discussion on first topic *(supervised by UEMS-CESMA Executives)*

Group 1 – How to prepare for and conduct an appraisal?
Group 2 – How to appraise exam documents?
Group 3 – How to appraise an on-site exam venue?
Group 4 – How to appraise an online exam delivery platform?
Group 5 – How to appraise the structure of an exam?

Group 1 – How to prepare for and conduct an appraisal?

Mrs Sibravova presented the group's on preparing effectively for appraisals, stressing the importance of reviewing all relevant materials on the website and ensuring logistical details like signage, seating arrangements, and the presence of a statistician are in place. Danny supported her points, highlighting the value of thorough preparation for a smooth transition to exam delivery.

Additional input focused on refining the process. Dr Jaisaitiene suggested pre-meetings between appraisers and examiners, a step backed by Dr Durkan. Prof. Kusec mentioned that a standardized document would be helpful, especially for new appraisers, and Dr Durkan clarified that this refers to mandatory appraisal documents. Danny noted the application form could be improved by including details on the appeals process.

Dr Toma and others emphasized the importance of appraisers clearly understanding their evaluation criteria, proposing that new appraisers work with mentors and receive relevant documents in advance. Danny concluded by announcing plans to publish an updated template and guidelines on the CESMA website. Mr. Felice emphasized examining ETRs and eligibility, while Dr Barotsis recommended attaching the appraisal application to the report.

Group 2 – How to appraise exam documents?

Dr Spiteri from EUSEM highlighted the need for more comprehensive appraisal guidelines, proposing that documentation be organized into subtopics with clear endorsement and alignment with UEMS bodies. Key areas include defining exam ownership, governance (regulations, insurance, terms of reference), and question banking practices, such as tagging and securing questions. Governance should also clarify examiner insurance, eligibility criteria, conflict of interest policies, and fees. Dr Spiteri recommended the presence of a psychometrician to ensure exam integrity, along with clear handling of misconduct and the use of a reliable scoring algorithm.

Dr Durkan underscored the necessity of linking exams to UEMS bodies and addressed the need for legal support, especially around insurance to handle potential candidate challenges. Dr Jacobs and Dr Doyle stressed the importance of embedding protective language in regulations to prevent challenges.

Danny and others debated on selecting and training examiners, acknowledging the risks of bias from on-site, non-specialist examiners and discussing the possibility of reintegrating experienced internal examiners to improve assessment consistency. Patricia Peralta emphasized the structure behind examiner committees, while Prof. Fassina suggested clearly stating the exam's certification limits to avoid misleading candidates regarding legal recognition.

Group 3 – How to appraise an on-site exam venue?

Dr Azorin outlined essential factors for assessing on-site exam venues, including accessibility, minimal noise levels, clear signage, reliable electricity and internet, and a backup plan. Synchronization across all venue locations is crucial, as is conducting a comprehensive entrance check and accommodating special needs (e.g., for pregnant or breastfeeding candidates). There should be sufficient invigilators from the start, secure storage for phones, and clear instructions provided well in advance. It's also vital to ensure restroom accessibility, adequate food and beverages, and observance of timing protocols.

Prof. Mathysen and Dr Jaisatiene emphasized that invigilators and observers should refrain from answering candidate questions or interfering during the exam, solely observing and noting any issues. Timing concerns were raised, noting that starting exams early due to the candidate's presence led to missed instructions in a previous instance.

Prof. Fassina suggested DME as a possible exam venue; however, Danny pointed out the challenges of hosting varying candidate numbers, from small to large groups, in physical spaces. Dr Werker recommended a standardized checklist for venue preparation, while Dr Ghiordanescu highlighted the complexities of hybrid exams, which can introduce security and proctoring issues.

Prof. Ivanov noted noise unpredictability at venues, while Danny added advice on considering factors like air conditioning placement for optimal exam conditions. Dr Jacobs argued that while online exams are more eco-friendly, they increase cheating risks; open-book formats and multi-camera setups could help but are not always practical. Dr Durkan stressed the importance of a reliable IT team, including on-site support and backup equipment, to ensure seamless operation and contingency management.

Group 4 – How to appraise an online exam delivery platform?

Group 4 focused on evaluating the security, effectiveness, and reliability of online exam platforms. Key discussion points included:

1. **Question Security**: Limit access to question banking by splitting access among multiple people. Secure transfer methods are essential.
2. **Clear Instructions and Representation**: Ensure clear guidelines for candidates and society representatives, who should witness exams firsthand. Mock exams could help test security without exposing real questions.
3. **Effective Proctoring and Contingency Plans**: Sufficient proctors per candidate are essential, along with plans for health or technical issues. An issue-solving committee (society reps. and IT) is recommended.
4. **Feedback and Exam Committee Access**: Collect diverse candidate feedback post-exam and provide Exam Committee access for addressing concerns.
5. **Online vs. On-Site Exams**: While online exams offer flexibility, they raise security risks. Some societies may consider reverting to on-site formats for increased credibility.

This approach stresses the need for strong security measures, reliable proctoring, and adaptability in managing online exams.

Group 5 – How to appraise the structure of an exam?

Prof. Butt presented the essential aspects of evaluating exam structure, particularly for exams conducted in English and involving multiple-choice questions (MCQs), oral exams, and clinical components like OSCEs. Key points included:

1. **Question Quality and Structure**: Assess the clarity, credibility, and appropriate number of MCQs and clinical sections. Recycling questions should be limited to maintain rigor, and clear instructions for candidates are vital.
2. **Oral Exam Consistency**: Questions should probe reasoning beyond yes/no answers, ensuring fairness and consistency for all candidates. Language barriers were noted as a possible issue in oral exams.

3. **Handling Complaints and Quality Assurance**: A post-exam review process is crucial to recalibrate scores and assess question discrimination, ensuring exams accurately differentiate between stronger and weaker candidates.
4. **Optimal Exam Components**: Exam length, number of questions, and format should be customized based on specialty requirements and the syllabus, rather than a one-size-fits-all approach.
5. **Impact of Examiners**: The expertise and consistency of examiners can greatly affect exam quality. Regular feedback and quality control for examiners were recommended.
6. **Feedback and Patient Safety**: Examinations should prioritize patient safety and educational value over prestige. CESMA could support the development of guidelines and quality assurance tools to enhance exam impact.

This summary highlights the need for question credibility, fairness in oral exams, examiner quality control, and a focus on patient safety as central to high-standard exams.

16.15 – 17.00   Group discussion on second topic *(supervised by UEMS-CESMA Executives)*
> *Group 1 – How the appraise the organisational aspects of an exam?*
> *Group 2 – How to appraise exam meetings?*
> *Group 3 – What to ask in appraisal interviews?*
> *Group 4 – How to make a SWOT-analysis of an exam?*
> *Group 5 – How to make an action plan for an appraisal report?*

17.00 – 17.15   Summarizing conclusions on second session discussions

17.15 – 17.45 Plenary feedback from each group on second session discussion

Group 5 – How to make an action plan for an appraisal report?
Prof. Butt emphasized using a standard template for reporting. Notes should be written and recorded as needed, with a draft completed promptly—ideally within a few days to capture details accurately. Recommendations to the Exam Board should include clear rationale to support each suggestion.

Group 4 – How to make a SWOT-analysis of an exam?
Dr Ileana Ghiordanescu outlined key points for a SWOT analysis:
- **Strengths**: Consider timing for candidates, the Society's organization of the exam, platform readiness, and available resources.
- **Threats**: Potential risks include impacts on patient welfare, candidate numbers, use of EU candidates as a benchmark, competition, and the risk of online question leaks—especially relevant for online exams.

Danny added that having a single person manage the question bank could also pose a security risk in certain scenarios.

Group 3 – What to ask in appraisal interviews?
Group 3 outlined essential questions for different stakeholders to improve appraisal quality:
1. **For Examiners**: Questions on communication among examiners, selection of candidates, overall workload, and process clarity. Key areas include whether the Board listens to feedback, openness to changes, and examiners' motivations.
2. **For Candidates**: Questions should assess bias, alignment with curriculum, exam balance, and overall experience versus expectations. Asking successful candidates about appeals can reveal satisfaction levels.

3. **For Exam Board**: Inquiries on exam governance, protocol adherence, preparedness for disruptions, and response time to issues.

Prof. Messinis emphasized identifying strengths, weaknesses, opportunities, and threats. Danny and Maeve highlighted learning from candidates' feedback, including curriculum alignment, and asking candidates why they took the exam to understand motivations.

Group 2 – How to appraise exam meetings?

Group 2 discussed best practices for evaluating exam-related meetings:
1. **Observation Protocol**: Meetings, such as question selection, quality assurance, and post-exam reviews, should be observed without interference.
2. **Documentation**: Minutes or records are essential; their absence suggests the meeting may not have occurred.
3. **Purpose of Meetings**: These meetings cover distinct aspects like question standard-setting and quality control, reflecting core exam processes.
4. **Practicality and Encouragement**: Appraisers should ensure that these foundational procedures are consistently applied and practical for quality assurance.

Danny and Maeve emphasized that thorough and documented meetings are essential for upholding exam standards.

Group 1 – How the appraise the organisational aspects of an exam?

Group 1 discussed key aspects of evaluating an exam's organization:
1. **Candidate Perspective**: Consider the timing of announcements, application opening dates, potential threats, and fee consistency. The registration process, such as "first come, first served," should be reviewed.
2. **Exam Venue**: Ensure the venue is suitable and well-prepared for the exam.
3. **Communication**: Evaluate how results are communicated, along with the clarity and fairness of the appeal procedure.
4. **Candidate Feedback**: Gather feedback from candidates to assess their experience.
5. **Organizational Responsibilities**: Review the exam's title, authors, and delegation of responsibilities. Ensure proper manpower is allocated, invigilators are sufficient, and that procedures for question selection, transfer, and pass rates are in place. Question review should also be part of the process.

Dr Durkan highlighted the complexity of organizing an exam, noting that some elements are planned while others might be overlooked.

The CESMA President concluded the first day of the Spring meeting by praising the efforts of the Appraisal Officer, Danny Mathysen. Attendees were then invited to join for dinner.

20.00 – 23.00   Dinner at Grand Café "De Rooden Hoed"

Saturday May 4th, 2024 – Closed meeting
(Only for UEMS-CESMA delegates)

Chairs: Maeve Durkan and Albert Mifsud

08.30 – 09.00   Name badges and registration

09.00 – 09.10   Welcome and introduction *(Maeve Durkan)*

Dr Durkan opened the meeting, followed by a roll call. She emphasized the critical importance of ensuring patient care by confirming that those taking the exam are fully accountable for their responsibilities. Dr Durkan also highlighted the significance of standard setting in the exam process and the need to identify, through the examination, the "safe pair of hands" – those who are truly capable of handling the challenges of patient care; she called on reflection on 'Who is sitting your exam?"

09.10 – 09.30   President's and Secretary's report *(Maeve Durkan – Ambrogio Fassina)*

Prof. Fassina delivered the CESMA Secretary's Report, providing an overview of the UEMS structure and the newly created Thematic Federations (TFs). He explained the role of the EACCME and introduced its team, led by the Secretary-General. His goals for CESMA were outlined:
1. Unify CESMA and ECAMSQ as UEMS Bodies under EACCME.
2. Secure permanent secretarial support.
3. Establish CESMA as a structural body, with all sections organizing European exams required to adhere to and finance it.

Dr Durkan noted that the last UEMS Council meeting (26-27 April) extensively discussed CESMA's transition from a TF to a permanent UEMS body. Prof. Parigi elaborated on ECAMSQ's role and the pillars of UEMS, highlighting CESMA's similar functions. He stressed that the current TF definition is outdated for CESMA, which has grown into a distinct entity. He advocated for CESMA to lobby for the recognition of EU exams, including pursuing a professional card for EU candidates. The CESMA Treasurer further advocated that: In lack of a supranational authority recognizing specialist qualifications, CESMA/UEMS could be doing this: lobby that we are an organized body with a definite structure. We are scientifically sound and we could try to bring CESMA one step forward .

Dr Jacobs inquired about UEMS's connection to the EU, with Bertrand Daval (UEMS CEO) acknowledging UEMS's limited power due to member states' control, but emphasized ongoing lobbying efforts for ETRs and specialty recognitions.

Prof. Brittlebank pointed out that CESMA operates as a regulatory body without legislative backing, proposing that the focus should be on promoting excellence through qualifications rather than relying on legislation. Mr. Felice stressed the need for a multinational agreement to recognize qualifications, noting that fellows are underutilized, despite being crucial resources. He called for greater recognition of fellows, particularly within the UEMS.

Prof. Parigi suggested listing UEMS fellows who have passed exams on the UEMS website to showcase their reach and credibility as examiners. Prof. Messinis acknowledged the challenges with recognizing exams outside of Europe, despite efforts by EBCOG.

09.30 – 09.40   Treasurer's report *(Gian Battista Parigi)*

Prof. Parigi presented the CESMA Treasurer's Report, outlining the current account balance of €26,176.65, but clarified that not all of this is available to CESMA. Partly will cover the current meeting expenses.

The CESMA Treasurer explained that last year, UEMS began an investment plan for a joint savings account, which CESMA agreed to join. He also noted the DME 6-year bond from July 2022, to which we participated with a total reserve of €8,000.

He provided an update on membership payments, thanking the UEMS Sections and Bodies that have been prompt and consistent in their contributions, while noting some misunderstandings between HQ and the Treasurer regarding payments. He then detailed the income and expenses breakdown, including €4,000 earned from appraisals last year.

Dr Durkan and Prof. Parigi thanked the UEMS Sections that signed up for direct debit payments (authorization of payment) and the latter presented the income/expense trends from 2017-2023. He pointed out that expenses decreased in 2020, and stated that CESMA remains financially viable.

09.40 – 09.50   Appraisal report – update *(Danny Mathysen)*

Prof. Mathysen offered an update on the workshop, and participants were thanked for their valuable contributions to the discussions. The UEMS-CESMA Core Appraisal Group has finalized a revised template for the appraisal report, which will be used for the appraisals scheduled this year and is valid for 2024. These documents are dynamic and will continue to evolve.

An overview of the UEMS-CESMA appraisals was presented, with a note that some reports are still under review due to limited manpower. These include:
- ICM
- Hermes
- EBSH
- Neurology
- Cardiology

The agenda for the 2024 appraisals was outlined:
1. **SMG complete examination** – all online, with appraisers Prof. Fassina and Brian Jacobs.
2. **OMFS** – Rome, September, with appraisers Ambrogio Fassina and Albert Mifsud.

It was emphasized that ideally, six months are needed for the application process to secure adequate manpower. Attention was also drawn to the limited availability of UEMS-CESMA Observers.

09.50 – 10.00   Formalising application process to CESMA as delegate *(Maeve Durkan)*

Dr Durkan encouraged observers to submit their notes promptly, as delays can make the process more difficult.
Prof. Brittlebank inquired about the application process and the associated costs. Danny explained that the application form is available on the CESMA website, and appraisers are required to submit a signed form with the necessary attachments. The cost is €3000 per appraisal, with half paid in advance and

the rest after the report is delivered. Additionally, exam organizers must cover the travel, accommodation, and meal expenses of observers.

Prof. Mathysen also addressed the need for new observers to meet CESMA standards and highlighted the importance of having professional appraisers. New appraisers will receive on-the-job training by experienced appraisers.

Dr Ramos asked about the process for appraising online exams. Danny emphasized the need for appraisers to have direct contact with exam organizers to understand the broader exam structure beyond the online platform, including question writing and pass-rate setting. Transparency is key.

Dr. Kusec praised the document as a product of months of work and the input of all appraisers, commending Danny for the quality of the work.

10.00 – 10.10   **Regularising attendance of providers** *(Maeve Durkan)*

Dr Durkan discussed the challenges of distinguishing between providers and clinicians during previous CESMA meetings, stressing the importance of transparency in how providers are invited. She outlined that providers who pay a 1- or 2-year subscription are allowed to present and attend CESMA conferences. New providers can also make joint presentations.

Dr Mifsud expressed concerns about CESMA aligning commercially with providers, but Maeve reminded him that this issue had already been voted on. Dr Noel clarified that providers are invited based on interest, not sponsorship, though there is a concern about the potential perception of CESMA endorsing certain providers.

Prof. Ivanov suggested that actively seeking providers could help generate revenue, and Maeve agreed, proposing that allowing providers to contact CESMA would strengthen relationships and improve selection. Dr Jacobs recommended providing a list of approved providers for CESMA members, and Prof. Brittlebank supported inviting providers based on CESMA's guidance.

Prof. Kusec raised the issue of donations, and Bertrand confirmed that CESMA does not accept donations with obligations. Mr Felice cautioned that donations could lead to conflicts of interest. Dr Jaisatiene suggested gathering feedback from Sections that have organized exams to share their experiences. Dr Durkan acknowledged the suggestion, and Dr Noel proposed noting in the Treasurer's Report that Section contributions are unrestricted grants.

10.10 – 10.25   **MD and not MD at CESMA – going forward** *(Maeve Durkan)*

10.25 – 10.40   **Appraising exams that include non-MD** *(Maeve Durkan)*

Dr Durkan addressed the issue of appraising exams for non-MD professionals, explaining that UEMS is based on MD qualifications and delegates are expected to have an MD. This raised concerns, especially regarding non-medical doctors, such as embryologists. The Section of Laboratory Medicine requested clarifications on this matter. The CESMA President clarified that non-MDs, if endorsed by a UEMS body, such as in the case of Embryology under EBCOG, can participate in CESMA appraisals. She emphasized that as long as the exam is endorsed by a UEMS Section, it can be appraised. The Embriology exam in on the CESMA agenda and will be appraised.

Dr Jacobs questioned whether CESMA would only recognize exams for MDs, as this could cause confusion for patients. Maeve reiterated the exception for UEMS-endorsed bodies. Prof. Messinis and Mr Felice defended the inclusion of non-MDs, pointing to examples like ESHRE and Transplant Surgery, which involve non-doctors but are still recognized. Prof. Messinis clarified that Embryology is a division of EBCOG; explained that ESHRE has also doctors, not only embryologists; he pleaded in their favour.

Prof. Parigi: scientific societies not affiliated with UEMS, seeking a CESMA appraisal, must obtain endorsement from the relevant UEMS Body; the corresponding UEMS Section should always provide this endorsement. There are instances where a Section organizes its own exam while a separate scientific society conducts another, which could potentially lead to conflicts of interest. Giamba referenced the case in Ophthalmology, where ophthalmology technicians sought an appraisal, which could have granted them authority over medical specialists.

Dr Ramos mentioned that herself, as an embryologist, views this matter somewhat differently: I do not claim to be a doctor; we are specialists in our field, working with embryos—the future of human life. We are scientists who treat embryos with the utmost care. If we fail in our duties, the embryos we work with could become future patients under your care. Maeve acknowledged her perspective, stating that our aim is to operate within the framework established by UEMS. Regardless of the professional background, as long as the specialty is endorsed by UEMS, there is no ambiguity on this matter.

Prof. Kusek expressed concerns regarding the recognition of Embryology, questioning whether CESMA should appraise a profession that is not based on basic medical training or an ETR, as embryology is a non-regulated field. She raised concerns about the competencies involved and asked what kind of certification would be issued in such cases. Dr Durkan clarified that the appraisal of the embryology exam had been agreed upon, CESMA will appraise the exam of our Embryology colleagues.
Mr Felice suggested that the issue could potentially be addressed by incorporating these specialties as modules within a broader specialty. Maeve acknowledged the point and assured that efforts were underway to resolve the matter.

10.40 – 11.00   News from UEMS *(Bertrand Daval)*

The UEMS CEO, Mr Bertrand Daval, presented an overview of the UEMS membership, including 31 full members (National Medical Associations), 5 associate members, and 5 observers, providing a detailed introduction to the organization and its structure.

Mr Daval provided an update on the UEMS Council (26-27 April 2024) and the new IT platform. He emphasized the importance of involving UEMS Thematic Federadions (TFs) in CESMA, suggesting criteria for: inclusivity, diversity, equality, medical etchics, as well as green and sustainable medical practices.
He also outlined UEMS's key initiatives, which include:
1. European Training Requirements (ETRs), along with the *MaMOMs* project for specialty mapping and matching
2. The European Exams
3. Accreditation of training centres
4. Accreditation of LEEs and ELSs through EACCME

Additionally, Mr. Daval presented the UEMS House (*Domus Medica Europaea*) and the updated organizational structure, noting the expansion of the team from 5 to 18 members.

11.00 – 11.30   Coffee break

Saturday May 4th, 2024 – Open meeting
(Open to UEMS-CESMA delegates and Providers)

Chairs: Maeve Durkan and Gian Battista Parigi

11.30 – 11.50   Awarding CESMA appraisal diploma's
(Maeve Durkan – Danny Mathysen)

10 CESMA Appraisal diplomas were awarded:
- European Diploma Examination in Regional Anaesthesia and Acute Pain Management
Paris, 4-6 September 2023;
- European Diploma in Paediatric Neuroradiology
Vienna, 19-20 September 2023;
- European Diploma in Head and Neck Neuroradiology
Vienna, 19-20 September 2023;
- European Diploma in Neuroradiology
Vienna, 19-20 September 2023;
- European Diploma Examination in Obstetrics and Gynaecology
Lisbon, 19-20 November 2022;
- European Diploma in Radiology
Paris, 20 October 2023
- European Board of Dermato-Venereology Diploma Examination – EBDVD
Frankfurt, 29 September 2023
- Examination of the European Board for Physical and Rehabilitation Medicine, EBPRM
Bern, 26 May 2023
- General Surgery Fellowship Examination- UEMS EBSQ
Dublin, 13-15 September 2023
- European Diploma of Pain Medicine, EDPM
March 30th and September 8th 2023

11.50 – 12.20   Appraisals as a formative feedback system; appraisal standards
(Danny Mathysen – Albert Mifsud)

Danny acknowledged the enthusiasm displayed in yesterday's discussions and expressed appreciation for the valuable input shared by participants. He highlighted that historically, the diverse backgrounds of CESMA appraisers and observers have led to variations in appraisal reports. To address this, he outlined the following initiatives:

- Continuing the work of the Core Appraisal Group.

- Developing a guidance document for UEMS-CESMA observers, drawing on participant insights.

- Aiming to reduce variability in appraisal reports and enhance standardization.

He noted the delegates' request to arrange future training sessions for appraisers and to establish stronger connections with relevant professional bodies. He suggested a potential need for a formal document to support these objectives (see slide).

Dr Albert Mifsud continued the presentation with an overview of the UKAS accreditation process for ISO15189:2022 standards, covering key distinctions between accreditation and certification. He outlined the UKAS accreditation stages:

1. **Application**: Submission of comprehensive documentation.

2. **Contract Setup**: Defining the accreditation scope.

3. **Pre-assessment**: Involves appointing an assessment manager and decision-maker, planning an assessment visit, identifying non-conformances, and agreeing on remedial actions. Improvement actions are detailed in an Improvement Action Report (IAR).

4. **Surveillance**: Ongoing oversight to ensure standards are maintained.

5. **External Evaluation of UKAS**: Continuous review of UKAS itself.

Assessments are conducted by both volunteer peer assessors and contracted assessors. Prof. Brittlebank added that an element involving the Care Quality Commission (CQC) could enhance checks and balances in this process.

13.10 – 13.30 Providers – updates and presentations

Televic

Bart Sagaert from Televic presented their exam platform, which has been in the market since 2007 and supports 25 languages. Current version is AI-enabled; Televic's platform focuses on three pillars: time-saving, digital exam accessibility, and ensuring secure, objective assessments. Key features include:

- **AI Distractor Generator**: Automatically generates answer distractors, with exam authors selecting the most appropriate ones.

- **Oral Exam Module**: Launched a pilot in June, enabling seamless digital administration for both written and oral exams.

In response to questions, Mr Sagaert explained Televic's security measures, including anonymized grading to prevent bias. He noted that all exam interactions are recorded to maintain objectivity, especially during oral assessments. While Televic does not directly provide proctoring, they partner with proctoring providers and are exploring AI solutions for enhanced monitoring.

Know it Now

Klas van Hoeck, founder of Know it Now, introduced his newly established company, which streamlines exam creation to be fast, standardized, and efficient. The platform facilitates seamless content management, allowing users to set difficulty levels for questions in advance and adopt a holistic approach to exam content preparation. Key features include:
- **AI-Generated Distractors**: Enhances question complexity.
- **Exam Creation Matrix**: Automatically organizes exams into chapters that align with the course syllabus, ensuring comprehensive coverage.
The platform is also scalable for large candidate volumes. In practice, however, dr Ghiordanescu noted that only around 20% of questions could be effectively labeled by difficulty, with the platform allowing users to set thresholds for failure and difficulty rates as needed.

Contact for Know it Know: Klaas Van Hoeck klaas.vanhoeck@knowitnow.be
Website Know It Now

13.30 – 13.45 Developing partnerships with professional bodies
(Maeve Durkan)

Dr Durkan discussed CESMA's approach to forming partnerships with professional bodies, emphasizing that CESMA maintains control over the appraisal process, directed by the President and key leaders, herself and Danny. While the CESMA President may rotate, consistent leadership is essential to ensure continuity. Ideal partners should be academic professionals who complement rather than subordinate CESMA's role.

To meet growing needs, CESMA is exploring collaboration with HPAC (Health Professions Accreditation Consortium), a respected group in health professions education, particularly in assessments and exams. A partnership with HPAC could address CESMA's challenges from the past year, including an extensive backlog and limited appraiser availability. Danny highlighted the strain of managing multiple appraisals, suggesting that having a designated CESMA appraiser paired with an HPAC expert per exam could improve efficiency.

- Dr Jacobs noted the current reliance on Danny, urging each Section to nominate specialty representatives, which Danny confirmed is in place. Additional support through training programs and possibly a UEMS-led online volunteer webinar were suggested to bolster appraiser expertise and alleviate the workload.

Lastly, the potential for administrative support from the UEMS Office was discussed, along with considerations for hiring external professionals. Maeve concluded that partnering with HPAC would ensure greater quality and timely feedback for CESMA appraisals.

- Patricia Peralta acknowledged Danny's extensive work and suggested that automating or standardizing the appraisal process, possibly through a structured questionnaire, could ease the workload and improve consistency. Danny agreed that CESMA's current manual methods limit efficiency, but he emphasized that any future automation would require professional collaboration and is not immediately feasible.
- Dr Toma warned that efficiency measures should not compromise CESMA's standards.
- Danny reiterated the importance of CESMA maintaining control, while Prof. Ivanov cautioned that blending paid and volunteer contributions could create inequalities. Dr Nica emphasized that there are sufficient volunteers willing to commit if adequately trained, which would support a non-commercial, science-driven approach.
- Prof. Parigi raised two main concerns: potential increased appraisal fees that might discourage participants, and the narrow academic focus of the six consultants from the UK, who may not align with the broader European standards. He noted that a stronger CESMA within UEMS would better serve their objectives.

13.45 – 14.15 Organisation of exams *(CESMA Executives)*

The issue of question writing for exams was discussed, highlighting that creating a large bank of 150-200 questions for a single exam is challenging. In some cases, questions from one section may end up being shared with another unintentionally. This can create problems if question writers intended for those contributions to be specific to their section but inadvertently support others, potentially compromising the original section's question pool.

One attendee expressed the view that exam question writers should focus exclusively on their assigned exams, as overlaps can lead to conflicts. Prof. Brittlebank questioned if, hypothetically, a colleague from Neurology wished to contribute to the Psychiatry Board Exam, would that be discouraged? Maeve confirmed that such cross-section contributions are generally advised against.

Dr Jacobs suggested this approach might seem overly controlling, while Dr Mifsud argued that successful multi-disciplinary exams (like MJC Infectious Diseases) benefit from broader collaboration,

and being overly strict might limit possibilities. Maeve responded that while views differ, the significant task of producing hundreds of secure, unique questions warrants careful handling.

Organisation of Exams
Dr Durkan provided an overview on organizing exams, focusing on aligning exam types with specific needs. Key considerations included defining the purpose of the exam—whether it assesses competency, training level, or the significance of holding an EB credential. She highlighted that fact-based multiple-choice questions (MCQs) evaluate primarily knowledge, while other MCQ formats can assess deeper skills.
Prof. Parigi also discussed terminology differences in diploma naming, noting variations between EU and non-EU candidates, which could affect clarity in credentialing.

Time and cost dvp
MCQ/Oral/OSCE
The formats of MCQ, oral, and OSCE exams were discussed. MCQs are generally easier to deliver, whether onsite or online. Oral exams are more complex, involving multiple logistical factors and significant costs. OSCEs are even more challenging in terms of setup and expense.
For both onsite and online exams, proctoring options are available. Maeve emphasized that CESMA partners with providers who offer proctoring solutions to ensure exam integrity.

AI infiltration
Prof. Butt shared an experience with proctoring, highlighting inconsistent messages from proctors. For example, when a candidate asked if they could go to the toilet, they were denied, but when they asked for a cup of coffee, the request was allowed. Dr. Ramos pointed out that the issue stemmed from the invigilators, not the proctors. PRM explained that in their case, UEMS delegates, who have direct contact with examiners in various countries, manage the invigilation process. The delegates are responsible for liaising with IT staff onsite at universities or hospitals to ensure the exams run smoothly. Maeve emphasized that such a system requires substantial manpower support, and NB added that their exams, conducted in 30 countries, are all connected to the same server, with each country delegate overseeing local coordination.

14.15 – 15.00   Artificial Intelligence (part 1)
14.15 – 14.30   AI in medicine – EU decision *(Gian Battista Parigi – Ambrogio Fassina)*

Prof. Parigi began the presentation by discussing the Pavia University Conference on Artificial Intelligence, where the opening speech was delivered by the Director of the AI Development Lab at Harvard University. The speech was well-received, and it was impressive that no one realized it was delivered virtually. Giamba then moved on to the EU AI Act, set to be finalized by April 19, 2024, and its implications for the future evolution of clinical research. He compared the nature of AI with the human brain, highlighting the differences: AI relies on unlimited data availability, data processed through predefined algorithms, and results validated by statistical analysis. In contrast, the human brain works with limited data (15 TB), processes information through unpredictable mental associations, and validates results through personal experience. Prof. Parigi pointed out that in the future, AI systems may be able to handle zetabytes of data, illustrating this with a slide featuring neon yellow graphics. He also mentioned the story of Youyou Tu (2015 Nobel Prize in Physiology or Medicine) and referenced historical figures like Archimedes to further explain AI's evolution. He then delved into AI's progression, from logical systems to machine learning and deep learning, focusing on the concept

of deep learning with neural networks, which involves multiple hidden layers and the interaction between input, hidden, and output layers.

Prof. Ambrogio Fassina delivered the second part of the presentation and spoke of the role of quantum mathematics.

14.30 – 15.00 Role of AI in question writing/answering with live demo

Chairs: Danny Mathysen and Ambrogio Fassina

15.20 – 15.40   Artificial Intelligence (part 2)

15.20 – 15.25   Role of AI and declaration in book writing *(Maeve Durkan)*

15.25 – 15.40   Threat of AI to 'off site exam' security: do we need to rethink how
we conduct exams? *(Maeve Durkan)*

1. Prof. Danny Mathysen led a live demonstration showcasing the use of ChatGPT for question writing and answering. He emphasized that AI is becoming an integral part of university students' daily lives, with half of them using AI regularly. The discussion focused on how AI could be used in exam creation and how to address security concerns related to its use.

Danny shared examples of exercises conducted for the European Society of Cardiology (ESC) and the final exit exam for medical students at the University of Antwerp. He introduced GPT (Generative Pre-trained Transformer), explaining that while ChatGPT 3.5 is free to use, version 4.0 costs $30 per month. However, in Finland, the university offers the paid version for free. Danny highlighted several major drawbacks of AI in exam creation, including quality differences between the free and paid versions, hallucinations (where AI generates false or inconsistent information), biases, plagiarism concerns, and limited creativity. He demonstrated how ChatGPT sometimes provided incorrect or misleading answers, even when prompted for multiple-choice questions (MCQs).

Danny called for an "AI for Dummies" session at the next CESMA meeting to address these issues more comprehensively. Risto Kontio raised concerns about the risk of ChatGPT copying directly from a single source, to which Danny acknowledged that sometimes the AI simply reproduces found content.

The live demo included a question posed to ChatGPT: "Write a single-best-answer MCQ with a clinical scenario featuring symptoms of cough, fever, and infertility (with a distractor)." The answer provided by version 4.0 was cystic fibrosis, though Maeve pointed out that some of the information seemed redundant, and delegates felt the question was too simple.

2. Another chat:

Danny asked ChatGPT to write an MCQ on poor diabetes control. The answer provided by ChatGPT 3.5 was considered more analytical. Prof. Butt commented that it typically takes an hour to write a high-quality question, suggesting that starting from scratch is the best approach. Danny echoed this, advising attendees to dedicate an hour to crafting well-designed, clinically valid scenarios.

Prof. Ivanov shared a similar experience at the EB Neurosurgery, where they tried using AI to write questions. Some of the questions were subpar and deleted, but out of 50, around 30 were deemed acceptable. This has led to serious consideration of asking AI to generate questions, although concerns were raised about the ethics of using AI for this purpose.

Maeve posed the question of whether candidates are already using AI in their own exam preparation. David Azorin noted that in the board exam's oral section, where candidates are required to submit essays, 10-15% of the submissions were found to be 100% AI-generated.

Ashraf Butt then shared a third example: a clinical scenario involving a 31-year-old pregnant woman with right upper quadrant pain and jaundice. The question was well-received, as it was based on a credible reference (National Library of Medicine).

Danny concluded by emphasizing that this marks the beginning of CESMA's engagement with AI in shaping future exam processes. Maeve thanked all participants for their insightful discussions, expressing gratitude to Danny for his exceptional work and for hosting the meeting in Antwerp, as well as to the Executive, UEMS Office, and all delegates, both new and returning.

15.40 - 16.00   ETR – the map to your exam – core competencies – EPAs in your program
              (Maeve Durkan)
This item was not addressed due to delays in the schedule.
16.00 – 16.30   Feedback from delegates

AOB
Next CESMA Meetings: December 6-7, 2024 – DME (UEMS Office), Brussels.