

**MRCPsych
Clinical Assessment of Skills and Competencies
(CASC)
Syllabus and Blueprint**

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Introduction

The MRCPsych Clinical Assessment of Skills and Competencies is a 16 station OSCE type clinical examination (Objective Structured Clinical Examination). Stations are not designed to simulate whole clinical encounters in psychiatric practice, but rather simulate specific elements of clinical encounters that can be realistically achieved in the time available.

Skills

The skills assessed relate to the High Level Outcomes (HLOs) in the 2022 Core Psychiatry Curriculum listed below:

- HLO1.1 Professional relationships
- HLO2.1 Communication
- HLO2.2 Clinical Skills
- HLO2.3 Complexity and uncertainty
- HLO3.1 Knowledge of legal and organisation frameworks
- HLO3.2 Working within NHS and organisational structures
- HLO4.1 Health promotion and illness prevention in community settings
- HLO5.1 Teamworking
- HLO7.1 Safeguarding
- HLO9.1 Undertaking research and critical appraisal.

There will be a focus on a specific clinical skill in each station. Each station will focus on either history taking, examination or patient management.

Communication skills will be assessed in every station.

Each main skill area is divided into subdivisions that are used in the blueprint to ensure an appropriate range and depth of coverage for each candidate taking the examination.

The skills need to be performed at a level appropriate to enter higher training in psychiatry.

Table 1 : Skills assessed in the CASC

Skill	Skill subdivision
History taking	Presenting complaint and psychiatric history
	Physical health history
	Developmental history
	Personal and social history
	Collateral History
Examination	Mental State (cognitive)
	Mental State (psychotic)
	Mental State (non-psychotic)
	Capacity Assessment
	Physical Examination
	Risk Assessment
Patient Management	Formulation
	Management (biological)
	Management (psychological)
	Holistic management plan
	Safety planning
	Legal and ethical management
Communication	Personalisation and respect
	Recognising and responding effectively to cues
	Empathy
	Providing clear and accurate information

Range of Clinical Scenarios

Candidates will be examined across a wide range of clinical scenarios that are encountered in psychiatric practice.

This could include, for example:

inpatient settings

- outpatient settings
- emergency care
- general hospitals
- community settings such as the patient’s home, care homes and day services

- criminal justice settings
- educational settings.

The simulated patients in the clinical scenarios may:

- be of any age or developmental ability
- be experiencing any disorder or condition relevant to psychiatric practice
- require assessment for such a condition.

'Any disorder' refers to any disorder listed in the International Classification of Diseases (ICD), and specifically may include:

- neurodevelopmental disorders
- schizophrenia or other primary psychotic disorders
- catatonia
- mood disorder
- anxiety or fear-related disorders
- obsessive-compulsive or related disorders
- disorders specifically associated with stress
- dissociative disorders
- feeding or eating disorders
- elimination disorders
- disorders of bodily distress or bodily experience
- disorders due to substance use or addictive behaviours
- impulse control disorders
- disruptive behaviour or dissocial disorders
- personality disorders and related traits
- paraphilic disorders
- factitious disorders
- neurocognitive disorders
- mental or behavioural disorders associated with pregnancy, childbirth or the puerperium
- psychological or behavioural factors affecting disorders or diseases classified elsewhere in the ICD
- secondary mental or behavioural syndromes associated with disorders or diseases classified elsewhere in the ICD
- sleep-wake disorders
- sexual dysfunctions
- gender incongruence.

The clinical scenarios may be set in any psychiatric specialty or sub-specialty area, including specifically:

- Child and adolescent psychiatry
- General psychiatry (includes liaison, rehabilitation and addiction psychiatry)
- Old age psychiatry
- Psychiatry of intellectual disability
- Forensic psychiatry
- Medical psychotherapy.

The station allocation for the different speciality areas is given in the blueprint.

Blueprint

Candidates will undertake 16 stations. All stations assess communication skills.

In the first (morning) session there will be **six** management stations, **one** history station and **one** examination station. These stations are **seven** minutes with **four** minutes reading time.

In the second (afternoon) session there will be **four** history and **four** examination stations. These stations are **seven** minutes with **90 seconds** reading time.

There will always be at least:

- **one station** with a focus on risk assessment or safety planning
- **one station** with a focus on cognitive examination or capacity assessment
- **one station** with a focus on physical health history or physical examination.

There will also be at least one station focusing on each of the following specialty / sub-specialty areas:

- Child and adolescent psychiatry
- General psychiatry
- Psychiatry of intellectual disability
- Old age psychiatry
- Forensic psychiatry
- Medical psychotherapy
- Addiction psychiatry.

The following blueprint matrix gives further details, including the minimum frequency with which the different clinical skill subdivisions will be tested.

Table 2: CASC Blueprint Matrix				Stations and specialties																	
Skill	Number of stations	Skill subdivision	Minimum percentage of running orders	General psychiatry 1	General psychiatry 2	General psychiatry 3	General psychiatry 4	Child and adolescent psychiatry	Psychiatry of intellectual	Old age psychiatry	Forensic psychiatry	Medical psychotherapy	Addiction psychiatry	Any specialty	Any specialty	Any specialty	Any specialty	Any specialty	Any specialty		
History	5	Presenting complaint and psychiatric history	100																		
		Physical health history	50 ***																		
		Developmental history	50																		
		Personal and social history	50																		
		Collateral history	100																		
Examination	5	Mental state (cognitive)	75 **																		
		Mental state (psychotic)	100																		
		Mental state (non-psychotic)	100																		
		Capacity assessment	25 **																		
		Physical examination	50 ***																		
		Risk assessment	50 *																		
Management	6	Formulation	100																		
		Management (biological)	100																		
		Management (psychological)	50																		
		Holistic management plan	100																		
		Safety planning	50 *																		
		Legal and ethical management	100																		
Communication	16	Personalisation and respect	Emphasis 1 station																		
		Recognising and responding effectively to cues	Emphasis 1 station																		
		Empathy	Emphasis 1 station																		
		Providing clear and accurate information	Emphasis 1 station																		

- * At least one of risk assessment or safety planning in every running order
- ** At least one of cognitive or capacity in every running order
- *** At least one of physical health history or physical examination in every running order

Syllabus descriptors

Syllabus descriptors for the clinical skills subdivisions are provided in the tables below. They are primarily the relevant key capabilities in the 2022 Core Psychiatry Curriculum, with occasional minor changes.

Each syllabus descriptor / key capability references the HLO from which it is taken.

History taking

Skill subdivision	Syllabus descriptor
Presenting complaint and psychiatric history	Take a full and accurate psychiatric history from patients within a range of mental and neurodevelopmental disorders across the lifespan, in routine, urgent and emergency situations incorporating appropriate terminology. (HLO 2.2)
Physical health history	Thoroughly and accurately assess the general health of your patients, taking into account the interplay between physical health and psychiatric needs, considering nutritional, metabolic, endocrine, and reproductive factors, and the physical impact of substance use and addiction. This specifically includes health issues in relation to psychiatric treatment. (HLO 2.2)
Developmental history	<p>Take an accurate developmental history.</p> <p>Demonstrate an appropriate understanding of learning and behavioural stages of human development through the lifespan including awareness of normative as well as variations in presentations, for example with neurodevelopmental conditions and across cultures. (HLO 2.2)</p> <p>Demonstrate an in-depth understanding of human psychology, including the importance of early relationships, attachment styles, parenting, the impact of adverse childhood experiences, and traumatic events throughout life. (HLO 2.2)</p>
Personal and social history	<p>Take an accurate personal and social history.</p> <p>Demonstrate an understanding of individual variation and the impact of social, cultural, spiritual and religious factors, including effects of deprivation, discrimination and racism. (HLO 2.2)</p>
Collateral history	Take an accurate collateral history from a range of informants involved in patient care. (HLO 2.2)

Examination

Skill subdivision	Syllabus descriptor
Mental state - cognitive	Perform a skilled Mental State Examination (MSE) focusing on cognitive symptoms and signs, on patients within a range of mental and neurodevelopmental disorders across the lifespan, in routine, urgent and emergency situations incorporating appropriate terminology. (HLO 2.2)
Mental state - psychotic	Perform a skilled Mental State Examination (MSE) focusing on psychotic symptoms and signs, on patients within a range of mental and neurodevelopmental disorders across the lifespan, in routine, urgent and emergency situations incorporating appropriate terminology. This specifically includes examination of delusions, hallucinations, formal thought disorder, thought alienation, and passivity phenomena. (HLO 2.2)
Mental state - non-psychotic	Perform a skilled Mental State Examination (MSE) focusing on non-psychotic symptoms and signs, on patients within a range of mental and neurodevelopmental disorders across the lifespan, in routine, urgent and emergency situations incorporating appropriate terminology. (HLO 2.2)
Capacity assessment	Assess capacity accurately in patients within a range of mental and neurodevelopmental disorders across the lifespan, in routine, urgent and emergency situations incorporating appropriate terminology. (HLO 2.2)
Physical Examination	Conduct a thorough and accurate physical examination, undertaking or ordering relevant physical investigations and take responsibility for acting on your findings in a timely fashion. (HLO 2.2)
Risk Assessment	Accurately assess the risk of self-neglect, self-harm, suicide, risk to others as well as other risks. (HLO 2.2)

Patient management

Skill subdivision	Syllabus Descriptor
Formulation	<p>Clearly and concisely present the history, mental state examination, diagnosis and differential diagnosis, and findings of the physical examination using appropriate classification systems to other professionals. (HLO 2.2)</p> <p>Use an appropriate formulation framework to devise a safe, systemic, effective, collaborative and co-productive management</p>

	<p>plan to ensure continuity of care in the immediate, short and longer term. (HLO 2.2)</p> <p>Demonstrate an understanding of subconscious and unconscious processes, including transference, countertransference, projection and splitting and the impact of these on yourself and others. (HLO 2.3)</p> <p>Critically appraise research and understand generalisability of findings to different groups in the implementation of research findings in your clinical practice. (HLO 9.1)</p>
Management (biological)	<p>Formulate an appropriate management plan incorporating biological interventions.</p> <p>Where appropriate, safely prescribe evidence-based pharmacological treatment referring to relevant guidelines. (HLO 2.2)</p> <p>Apply knowledge of the pharmacodynamics, pharmacokinetics, efficacy, tolerability, interactions, and short and long-term side effects of medication. (HLO 2.2)</p> <p>Demonstrate an understanding of how Electro-Convulsive Therapy (ECT) and other physical treatments can be used for the treatment of mental disorders and apply this under supervision. (HLO 2.2)</p>
Management (psychological)	<p>Formulate an appropriate management plan incorporating psychological interventions</p> <p>Demonstrate appropriate psychotherapeutic capabilities. (HLO 2.2)</p>
Holistic management plan	<p>Use an appropriate formulation framework to devise a safe, systemic, effective, collaborative and co-productive management plan to ensure continuity of care in the immediate, short and longer term. (HLO 2.2)</p> <p>Demonstrate a working knowledge of the roles and responsibilities of, and the interface between, multidisciplinary team members. (HLO 5.1)</p> <p>Demonstrate working knowledge of local health and social care services, national health and care services and regulatory authorities through your interactions with them, both routinely and in unforeseen circumstances. (HLO 3.2)</p> <p>Promote mental well-being and prevention of mental disorders within the context of societal change and social technology, identifying and challenging stigma and discrimination against people experiencing mental disorder. (HLO 4.1)</p> <p>Manage increasing levels of uncertainty safely under supervision. (HLO 2.3)</p> <p>Observe, absorb, contain and reflect on complex clinical/non-clinical situations to develop a balanced response. (HLO 2.3)</p> <p>Review treatment and management plans of patients when the outcome is not as expected or hoped for. (HLO 2.3)</p>

	<p>Understand the limits of your clinical capabilities, seeking timely support and supervision when appropriate. (HLO 2.3)</p> <p>Demonstrate flexibility, leadership, use of initiative, prioritisation, and adaptability, effectively managing your time and resources and using new technologies as appropriate. (HLO 1.1)</p>
Safety planning	<p>Ensure an appropriate safety plan is in place to manage risks of self-harm, suicide, risk to others as well as other risks. (HLO 2.2)</p> <p>Demonstrate knowledge of the individual and systemic factors contributing to the vulnerabilities and safeguarding concerns in people of all ages. (HLO 7.1)</p>
<p>Legal and ethical management</p> <p>Candidates are not expected to have knowledge of specific mental health or capacity laws (as these vary depending on the jurisdiction) but they will be expected to demonstrate knowledge of the principles involved in involuntary admission and treatment under mental health law and a patient's capacity to make decisions about treatment.</p>	<p>Apply knowledge of the current legislation governing the care and treatment of people with mental disorders. (HLO 3.1)</p> <p>Balance the duty of care to the patient and the protection of others with the restriction of human rights when considering the use of legal powers. (HLO 3.1)</p> <p>Work within legislative frameworks and local procedures to raise and report safeguarding and welfare concerns in a timely manner and contribute to safeguarding processes. (HLO 7.1)</p> <p>Consistently demonstrate a person-centred holistic clinical approach to patients that is honest, empathic, compassionate, and respects their dignity while maintaining therapeutic optimism and boundaries. (HLO 1.1)</p> <p>Demonstrate knowledge of ethical frameworks and research methodologies when carrying out or appraising research. (HLO 9.1)</p>

Communication

Skill subdivision	Syllabus descriptor
Personalisation and respect	<p>Consistently demonstrate a person-centred holistic clinical approach to patients that is honest, empathic, compassionate, and respects their dignity while maintaining therapeutic optimism and boundaries. (HLO 1.1)</p> <p>Understand, recognise, validate and actively address systemic and structural inequalities, intersectionality, and their impact on clinical outcomes for patients and carers of all ages and on working relationships with colleagues. (HLO 1.1)</p> <p>Work collaboratively with patients, families, their carers of all ages and colleagues respecting their autonomy, diversity and valuing their contribution. (HLO 1.1)</p> <p>Consistently demonstrate effective communication approaches with patients and relevant others, including those with neurodevelopmental disorders making reasonable adjustments</p>

	<p>and adaptations where appropriate, including the use of new technologies. (HLO 2.1)</p> <p>Demonstrate an inclusive approach which considers all aspects of communication, language, sensory and cognitive needs, as well as the ethnic, social, and cultural, context of a patient. (HLO 2.1)</p> <p>Assess patients from a range of different cultural, spiritual, and religious backgrounds, including asylum seekers and refugees, and demonstrate an understanding of how protected characteristics may impact on clinical presentation. (HLO 2.2)</p> <p>Demonstrate an understanding of the inherent power imbalance between doctor and patient, particularly for those with protected characteristics, which can result in barriers to clinical effectiveness. (HLO 2.2)</p>
Recognising and responding effectively to cues	Demonstrate an understanding of individual variation and the impact of social, cultural, spiritual and religious factors, including effects of deprivation, discrimination and racism. (HLO 2.2)
	Demonstrate an appropriate understanding of the ways in which you, as well as patients and others communicate both verbally and non-verbally, and respond appropriately. (HLO 2.1)
Empathy	<p>Consistently use active listening skills and empathic language which respects the individual, removes barriers and inequalities, ensures partnership and shared decision-making and is clear, concise, non-discriminatory and non-judgemental. (HLO 2.1)</p> <p>Demonstrate effective communication and shared decision making with patients, taking into consideration their ideas, values, concerns and expectations. (HLO 2.1)</p>
Providing clear and accurate information	Accurately explain the outcome of assessment, treatment and management to patients, families, carers of all ages as well as relevant others in a clear and understandable way. (HLO 2.1)

Further information

There is further information about preparing for the CASC on the College website, including:

- [Preparing for CASC](#) – links to information on the CASC exams
- [The CASC guide for candidates](#)
 - Candidate guide for CASC – describes the way that a CASC station is structured and the marking domains and mark allocations
 - MRPsych CASC pass mark – criteria for scoring a pass mark and examples of history, management and examination marksheets
 - CASC exam criteria – explains what the examiners will be looking for when evaluating:
 - Professional attitude and behaviour
 - Consultation management
 - Communication skills

- Applied clinical knowledge
- Clinical assessment skills
- Clinical management skills
- CASC grade descriptors – explains what the different marking grades mean.