

Using Objective Structured Clinical Examinations (OSCEs) in Speech and Language Therapy Pre-registration Clinical Education

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Introduction

Objective Structured Clinical Examinations (OSCEs) are planned and structured assessments of clinical competence and established practice in medicine and nursing (Alinier, 2003). As performance assessments, they focus on what students can do rather than on theoretical knowledge (Harden, 1988). Students are expected to practice relevant clinical skills throughout placement, and are subsequently assessed on these in designated 'stations' demonstrating clinical competence in a specified time. This paper describes our approach to OSCEs in the assessment of clinical skills in pre-registration speech and language therapy (SLT) education.

Aim

To develop a series of OSCEs for pre-registration SLT students.

Outline

Potential OSCE tasks include communication with patients (simulated or real), physical examinations problem solving skills (Harden 1988) and also clinical skills such as specimen analysis, blood pressure measurement and safe techniques (Selby et al 1995, Humphrey-Murto and MacFadyen 2003). There is value in using standardised patients with SLT students (Hill et al 2013) with a moderate to high degree of replicability and accuracy in a range of clinical case history scenarios. We identified measurable clinical skills applicable to SLT, leading to the development of four OSCEs. These were piloted and rolled out to 2nd year undergraduate SLT students in 2015/16 and evaluated: (1) Professional manner / adapting communication to context; (2) explaining the steps involved in intervention; (3) clinical recording and reporting; (4) interpreting and evaluating clinical data. Workshop teaching was provided for each along with recommendations for practice during placement.

Summary of main outcomes

An actor with experience of role play in medical and social service contexts was employed for OSCE (1). Two clinical scenarios were developed – one of a parent of a child with speech difficulties, the other of a patient with early diagnosis of a progressive illness. Students were tasked to find out why the patient was seeking information about SLT services in a 10 minute conversation and to gather general biographical (not case history) information. In OSCE (2) students were to explain and demonstrate intervention suitable for either a child or adult case using provided materials. Students self-selected adult or child contexts for (1) and (2). This scenario was conducted by an experienced SLT with pre-planned errors to ensure consistency across all students. OSCE (3) required students to transcribe a video of a child completing the DEAP screening test and OSCE (4) consisted of a partially completed standardised assessment booklet that students completed using the manual.

Conclusion

Students provided feedback on their experience. They found the OSCES to be relevant, well divided into four discrete tasks, fair and reported that individual feedback given was constructive in relation to future learning. They particularly liked the choice of caseload in OSCEs (1) and (2).

Implications/ future directions

Ongoing refinement of OSCEs for SLT clinical education along with monitoring how students develop through their final years of study is taking place.

Impact

Students are able to demonstrate basic clinical competency in key skills through the use of OSCEs. This is supported through the establishment of fair and structured assessment.

Three key learning outcomes

1. SLT students benefit from structured evaluation of clinical skills
2. Careful assessment design encourages transparent and fair evaluation
3. OSCEs can be used to supplement and focus student learning of key clinical skills

Brief outline of submission (50 words)

This paper describes the incorporation of Objective Structured Clinical Examinations into the assessment of clinical skills in pre-registration speech and language therapy (SLT) education. Four key clinical skills are defined and described in the context of student learning and development. Student experience of this approach are reported.

Three key words

Clinical

Education

Examination

References

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