

OSCE Site Co-ordinator's Handbook



Who is this Handbook for?

Anyone acting as a Site Co-ordinator (SC) for an Objective Structured Clinical Examination (OSCE) for undergraduate medical and other healthcare students at the University of Aberdeen.

Aims and Objectives of this Handbook

The aim is to provide you with a broad understanding of your roles and responsibilities in the conduct of undergraduate OSCE assessments.

Once you have read this guide, you should have met the following objectives:

- Understand the role of the assessment office in the administration of an OSCE
- Know the difference between a site and a run
- Understand the principles of iPad making
- Know how patients and examiners are recruited
- Understand the preparations needed prior to an OSCE
- Know the responsibilities of different staff
- Know what resources you need and are provided with to run your site
- Understand the procedures to be followed in the event of a Patient Partner suffering an adverse event

What are my responsibilities?

As a site co-ordinator, you are responsible for ensuring that your site is properly operated, before, during and after an OSCE. Further details of what to do during an OSCE are described in the "OSCE Site co-ordinators exam day guide and check list".

Who is in overall charge?

The OSCE co-ordinator (OC), who should be your first point of contact for advice and support. Each exam has a different co-ordinator. Other staff can also help resolve problems as needed (e.g. lead site co-ordinator, assessment co-ordinator).

Where do OSCEs take place?

Most OSCEs for MBChB, PA and ANP courses take place in the Clinical Skills Centre on the first floor of the Suttie Centre and other rooms on the second floor if required.

Sometimes, Yr 4 and 5 MBChB OSCEs are also held in Inverness, in the Centre for Health Sciences.

When do OSCEs take place?

Please refer to the Schedule of Examinations for IEMDS.

What is a Site and a Run?

A single **site** is a venue for a complete OSCE for a group of students. There may be several sites; the questions at each site will be identical. Typically, in Aberdeen there are 3 - 4 "CSC Sites" per OSCE but this increases if there are relatively few stations.

A complete cycle of students through a site is called a **run**. There are typically 4 - 6 runs during the day; for each run the individual sites start and finish at the same time (except the extra time run for students with disability provisions – see below)

How many stations in a site?

This varies depending on the course and the year group of the students. There has been up to 15 x 5 minutes stations over 4 sites in the past. However, the OSCEs in 2020/2021 were also split into small “mini-OSCEs” (mOSCEs) of 3-4 stations to allow for social distancing. So, there is no “typical” structure at the time of writing.

Examples of station content include:

- Physical Examination of a Patient Partner / real patient/model
- Data interpretation
- History taking or Communication skills with a Patient Partner / actor (may be virtual)
- Practical procedures – only a limited list of procedures is now included in the OSCEs
- Clinical skills on model simulators

In MBChB Years 1-3, each station lasts 5 minutes. There is an interval of 1 minute between stations to allow candidates to move to the next station and read their instructions.

In MBChB Year 4 and 5, and PA exams, longer questions (8 mins) are used. Some stations are linked. There is an interval of 90 seconds between stations to allow candidates to move to the next station and read their instructions.

Students with Disability Provisions

Most OSCEs will feature one or more runs for students who have disability provisions as assessed and documented by the Disability Advisers.

Typically, these students require extra reading instructions before entering stations. Occasionally more complex arrangements, may apply.

Sometimes the extra time provisions apply to all sites on a run. Sometimes the extra time is just for a specific site (or sites). This should be made clear

by the OC before the exam.

Who organises the patients for the exams?

The assessment office and staff at the Clinical Skills Centre make most of these arrangements, including reimbursement for travel and booking of transport. A patient co-ordinator is present throughout the exam and is the first point of contact for patients with administrative queries.

Most patients are a combination of our volunteer Patient Partners, students and staff from other courses, and actors. Patient Partners may be allocated to

physical examination stations, or they may have been trained in providing a history and will be placed in history taking and communication stations. If patients are required with a particular pathology (e.g. cardiac murmur), the OSCE co-ordinator will organise this, or delegate this task to a suitable person.

Who organises the examiners for the exams?

The assessment office. They also arrange standby examiners. The allocation of the examiners to the stations is done by the OSCE Coordinator. External examiners are usually present during summative exams, and at the subsequent Exam Board.

What meetings should I attend?

A site co-ordinator meeting is held at approximately two weeks before each OSCE. This is used to discuss the running order of the examination, equipment list, and other administrative issues. During the 2020/21 diet of exams, this has not always been possible. Information has been sent round before the exam and a site coordinators briefing has been held on the morning of the exam before the first run.

A post-exam meeting may occur a few weeks after the examination, and is used to reflect on the conduct of the OSCE and make suggestions for future practice.

Details of other meetings (e.g. examiners' meeting) may be obtained from the assessment office.

All material required for each station will be delivered to the clinical skills centre the day prior to the exam. It is the responsibility of the site coordinators to make arrangements on who will be responsible for setting up each station/site.

Candidate papers will be divided in boxes for their respective CSC site. Each box will contain one envelope corresponding to one OSCE station.

Site co-ordinators should check the following:

- Contents of the envelope relate to the station named on the front
- Envelopes include:
 - Candidate instructions (x2)
 - Examiner instructions
 - Examiner feedback sheets
 - Laminates/ charts/ pictures/ results if needed
- There are no errors on the instructions (spelling, clinical detail, diagnosis in header when not appropriate,)

Paper checking is key stage in ensuring optimal running of all sites and runs

When should I set up my site?

You should liaise with the Clinical Skills Centre manager regarding the most suitable time for this, which is often the day before the exam. You should allow half a day to set up your site. The clinical skills technicians will, where possible, arrange the overall layout of each room in the OSCE sites (screens, beds, furniture, laminated site/ station numbers, orange bags and bedding). Site co-ordinators may need to assist with this and, when finished, will check each station is ready for an OSCE run.

What do I need to set up my site?

The assessment office will supply each site with a box containing the exam question envelopes:

- Questions
- Spare examiner
- "Props" and laminates for unmanned stations (e.g. ECG)

and the site coordinators pack:

- Candidate list for each run
- A summary grid of the running order with names of patients and examiners for each site and their respective stations.
- A site map, giving the location of each station

Are there any general principles when setting up a station?

Each station should have the following:

Outside: Station number

Set of candidate instructions

Chair

Hand cleaning materials, Orange clinical waste bag and alcohol swabs (if clinical station)

Box for completed papers (if unmanned station) **DO NOT FOLD**

Inside: Set of candidate instructions

Clipboard with examiner instructions (if clinical station) and examiner feedback sheet

2 sharp pencils with eraser / or pens

Working props as appropriate (e.g. ophthalmoscope)

Chairs / bed / trolley / table as appropriate

Answers to unmanned questions must be removed from the station and kept until the following day.

iPad Marking

OSCE exams use iPad marking. Examiners and OSCE Co-ordinators should have completed online training prior to the day of the exam. Co-ordinators have additional resources available, primarily on solving common iPad issues. <https://www.abdn.ac.uk/medical/assessment-central/medicine/osce-examiner/training-coordinators>.

On the day of the exam, members of Learning Technologies will be onsite for the examiner briefing and the start and end of the exam. Examiners have the opportunity to receive a brief demo of the iPad app at the examiner briefing.

A member of Learning Technologies will distribute a live iPad to each station and will double-check that examiners are set up correctly prior to the start of the exam.

After the morning or afternoon session the iPad the examiner should leave the iPad in the station. Ensure examiners do not leave their station taking the iPad away.

When should I arrive on the day of the exam?

You should aim to arrive at least one hour before the first run starts. Report to staff at exam reception desk on arrival where they will mark you as present and give you an ID badge. Check your site is ready and that all bells are working. Assist the reception desk directing patients to their stations and examiners to and from their briefings. You must inform the OSCE Coordinator or Assessment Secretary of any staff or patient changes at your site if you are required to make any swaps, as a master grid of staff and patients must be maintained.

Re-check all stations:

- Candidate/ patient/ examiner instructions
- Candidate instructions inside and outside station
- Supporting material and boxes for unmanned /written stations
- Equipment/ DVDs/ stop watches/ station material present and functional
- Pencils / eraser/ clipboards/ mark sheets (unless iPad marking)

- Hand gel/ alcohol swabs/ orange clinical waste bags outside as appropriate
- Inappropriate charts/ clinical material/ unmanned station answer sheets removed

The Reception Desk

In Aberdeen, there is one reception desk for examiners (1st or 4th floor) and another desk for patients which is located on the Clinical Skills Centre floor. Reception for candidates is usually in the Lecture Theatre (ground floor) Suttie Centre. All are manned by staff from the School of Medicine & Dentistry. Please check where reception areas are for Inverness.

Patients, examiners and candidates are all registered and directed to wait in an appropriate area.

Examiner and Candidate Briefings

The OSCE co-ordinator usually briefs all examiners, after which “lead examiners” for each question conduct a specific briefing in one of the OSCE sites. Patients are also invited to attend this lead examiner briefing.

Candidate briefings are done immediately prior to each run.

Site Co-ordinators Pack

There is a site co-ordinators pack for each CSC site. This contains the most recent versions of site specific OSCE grids and site maps, start stations for each candidate in all runs.

It also contains a checklist which may be a useful point of reference for new site co-ordinators.

Starting the exam

By 20 minutes before the start of the run, you should invite patients to their respective site stations to change clothing/ prepare as necessary.

By 15 minutes prior to the run direct all patients and examiners to the station briefing site for the lead examiner briefing. After the lead briefing, direct patients and examiners to their respective sites and stations.

For iPad marking, a member of Learning Technologies will distribute an iPad to each station and will double-check that examiners are set up correctly.

Please ensure that water is available for examiners and Patient Partners in the stations, and for students at rest stations and reading stations.

At 3 - 4 minutes before run starts check all examiners and patients are present and notify each room that students will be arriving shortly. Then signal to lead site manager that site is ready.

The exam cannot start until all patients and examiners are in position

Only after the site is ready to start should candidates be brought up from their holding area in their pre-determined order, sent to respective sites and placed at their starting position. It is **extremely** important that the candidates are placed at their designated starting position.

Once your site (and any adjoining sites at Clinical Skills) are ready to go, the exam starts with a bell. A designated person should act as timekeeper, not necessarily a site co-ordinator.

During the exam

You should ensure that candidates enter and exit the stations as directed, and move round the stations in the correct direction, particularly where they change rooms.

A bell is rung to mark the start of the reading time. At the second bell the candidate enter their first station. The bell is rung at the end of each station (after 5 minutes for short stations or 8 minutes for long stations), and at the end of the interval between stations (1 minute for short or 2 minutes for long stations), signifying the start of the next station.

During the 5 minute station time:

Please ensure that all students have entered their station. If no student is entering the station then notify patients/ examiners of their "gap".

During the 1 minute station change over:

Check students have left the station (NB unmanned stations) and guide students to their next station in correct sequence.

Please ensure that any refreshment areas (e.g. kitchen in patient area) are kept clean and tidy throughout the day. If your site has run out of refreshments, please inform the reception desk.

What happens if there is a problem?

The Site Coordinators should keep a record of all problems encountered at their site, the candidate number of the student involved and the solution made at the time. This list should be given to the OC at the end of the OSCE in case of further student complaint.

If either examiner or patient is not ready for the next candidate starting, the Site Co-ordinator should be notified immediately. The changeover time between stations can be held appropriately.

Mobile phones and pagers are highly disruptive and should be turned off before the start of the OSCE. They distract both the candidate from what they are doing and the examiner from observing the candidate's actions.

Only in very exceptional circumstances should an examiner leave their station mid-candidate. The Site Co-ordinator and OSCE Exam Co-ordinator should be notified immediately. Such circumstance may include -

Candidate nerves

The OSCE is an emotionally stressful time for candidates. Examiners should try to put candidates at ease. If the examiner feels the student is experiencing significant anxiety to the point where they are unable to complete the OSCE or the candidate breaks down, they should notify the Site Co-ordinator who will then involve the OSCE Co-ordinator. The candidate may be temporarily removed from the examination and given time to compose themselves before re-entering the run at a later time. The OSCE coordinator will decide if they can repeat missed stations.

Equipment failure

All equipment should have been checked prior to the OSCE by the set-up team. Despite this there can be technical problems during the exam. The examiner should decide whether equipment issues can be quickly sorted or not. There is usually a second spare piece of equipment nearby. If the

situation cannot be readily resolved, the examiner should notify the site coordinator as soon as possible.

Candidates should not be disadvantaged. The Site Co-ordinator may extend the rest period at the next changeover to allow the candidate the appropriate time to complete the station or may arrange for the candidate to repeat the station after the OSCE run has finished.

iPad Marking problem

If the examiner experiences a problem with the iPad, they should make notes on the paper provided and notify the Site Co-ordinator during the candidate changeover. **An examiner should not discard a candidate's marks without approval from the Site Co-ordinator or member of Learning Technologies.**

If an examiner enters a candidate number that has already been used, the Site Co-ordinator should provide the examiner with a spare iPad to record their marks on (from their paper notes) and advise the Learning Technologies team member attending the full details of what has happened and the candidate numbers involved.

A list of solutions to many common iPad issues is available at <https://www.abdn.ac.uk/medical/assessment-central/medicine/osce-examiner/training-coordinators/common-ipad-issues>.

Additional bell

An additional bell may be mistaken by candidates (and examiners) for the end of the station signal. In this situation, the candidates should be invited to continue their examination. Candidates must be given appropriate time to complete the station. The Site Co-ordinator will be able to confirm with the time keeper how much time has elapsed in the station.

Technical issues with the synchronous bell

A bell will always be used to signal the changeover point. If there are any technical issues with the synchronous bell system, a manual hand bell will be used.

Bell not heard by candidate

Sometimes the layout of each site makes it difficult for candidates to hear the bell or to see when other candidates are entering their respective stations. The examiner may well have assumed there is a gap in the run and not looked for the candidate. If the student is more than 1 minute late, the examiner should ask the student if the Site Co-ordinator is aware of the problem. If they are aware, the station should be conducted as normal. If not, the Site Co-ordinator should be informed immediately.

The Site Co-ordinator will notify the time keeper and the next station changeover will be extended. This allows the candidate the full amount of time allocated to that station and ensures they are not disadvantaged. The Site Co-ordinator would then instruct the examiner and candidate not to finish at the next bell and will give separate instruction when to conclude the station.

What happens after the exam?

After each run (double bell), candidates should be guided swiftly to the exit. Candidates should be encouraged to report any issues immediately to the SC or OC so that any action can be taken if required.

Run Changeover

After each run in the morning *or* afternoon:

- Notify examiners and patients of break and when to return for next run.

- Check mark sheets (for unmanned stations) and sharp pencils are in place and equipment replenished (e.g. blood tubes) for the next run.

- Ensure all patients and examiners return before starting the next run.

Additionally, between the morning and afternoon runs:

- Check all stations have been re-set (as per "Pre-OSCE" checklist) and change the bed linen for clinical stations.

- Replace any examiner/ patient instructions that have been removed using the spare copy in the station envelope.

- Swap any clinical skills props (models inserts, images, etc).

After the final run of the day, all instructions / documentation, ophthalmoscopy slides and other props (apart from clinical skills centre equipment) used in the exam should be placed in the site co-ordinator box for return to the assessment

office. Laminated station numbers, clipboards, pencils, erasers and clocks should be collected and returned to the appropriate CSC box and the site should be tidied up.

Please ensure that Learning Technologies have collected the iPads from the rooms before they are dismantled so they are sure they have the correct number of iPads for each site.

University of Aberdeen

Health & Safety of Patient Partners in the Suttie Centre

Rarely, Patient Partners may come to harm when they are on the Foresterhill site. You should read and be familiar with the following guidance notes.

Patient Partners are an integral part of the healthcare teaching and exams (they are also used for postgraduate exams).

There is always the possibility that, when on site in the above capacity, patients sustain injuries from accidents (e.g., tripping/falling, slipping on water, etc) or inadvertently even from students during physical examinations (e.g., breathlessness due to numerous chest examinations or Peak Flow measurements in patients who already have a respiratory symptom, etc).

All occurrences that result in or could have lead to unintended or unexpected harm to a patient or actor should be reported. This will allow appropriate measures to be taken to reduce the likelihood of a similar occurrence happening again. An incident form should be filled and submitted and these can be found on the intranet. Furthermore, where the occurrence has resulted in the patient sustaining an injury, they may wish to pursue this through a formal complaint. The following aims to clarify the procedures for this.

Adverse Events

If a Patient Partner or Actor has an incident in relation to their involvement as described above then the following steps should be taken:

1. Ensure Patient Safety

- Respond to the immediate needs of the patient, ensure their safety and offer first aid or any other assistance as required. During MBChB exams (OSCEs), the Site Co-ordinator (medical) or their deputy will be the 'Lead'.
- A First Aid room is available in the Clinical Skills Centre on the first floor of the Suttie Centre. This room is never locked and is located near the Patient Partner waiting area.
- Where an emergency situation exists dial (9) 999 and ask for an ambulance. If required, begin resuscitation. **Resuscitation equipment and defibrillator should only be used by those trained to use the equipment and is located in the Clinical Skills Centre.**

NB: Should the next of kin need to be contacted, please contact the patient partner Team immediately to contact. Those details are only held by that team for confidentiality.

2. Reporting of Incidents

If any incident, including a near miss event, then this should be recorded on the University of Aberdeen Incident Reporting Form. A supply of these forms will be kept in the First Aid room Clinical Skills Centre (first floor Suttie Centre) and can be found on the intranet.

- At the time of the incident, the member of staff supervising the teaching/examining or who is responsible for the patients' presence at the site (e.g., during OSCE exams, the Site Co-ordinator) should complete the form and forward it to the CSC Manager.
- The CSC Manager will investigate the incident and take any appropriate action. S/he will also ensure that the completed form is sent to University of Aberdeen Health and Safety Department for investigation. The most important outcome from occurrence recording is to move away from blaming individuals and to facilitate organisational learning. To encourage open, fair and frank reporting no patient or staff details are entered into the central database.
- The completed form also needs to be copied, for information, to the Patient Partner Programme Manager.

In addition to completing the standard Incident Reporting form, it may be necessary to inform additional people/departments, depending on the type of incident. For example, if a patient slipped on ice outside the Suttie Centre, the Estates Department should be informed (preferably by the CSC Manager), whereas clinical incidents should be reported to the relevant specialist by the staff member/supervisor.

The CSC Manager will present annual analysis of incidence to the CSC Management Group.

Complaints

Complaints in the first instance should be brought to the Patient Partner Programme Manager's attention. If not resolved then should be brought to the Director of Clinical Skills Centre in the second instance.

Legal Responsibility

Liability would usually lie with University of Aberdeen:

Useful telephone numbers

Clinical Skills Centre (Manager)	7733 (from University extensions) (76)7733 (from extensions starting with a 5) (43)7733 (from external numbers)
Clinical Skills Centre (Technician)	7713 (from University extensions) (76)7713 (from extensions starting with a 5) (43)7713 (from external numbers)
Assessment Office	7929 (from University extensions) (76)7929 (from extensions starting with a 5) (43)7729 (from external numbers)
Patient Partner Team	7887 (from University extensions) (76) 7887 (from extensions starting with a 5) (43) 7887 (from external numbers)

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