# Running head: PARTICIPANT PERSPECTIVES OF PRACTICE SIMULATIONS

The Value of Practice Simulations and Objective Structured Professional Assessments

(OSPAs) for School Psychology Training: Participant Perspectives

Sandra Dunsmuir\*a Cathy Atkinson<sup>b</sup>, Jane Langa, & Sarah Wright <sup>c</sup>

<sup>&</sup>lt;sup>a</sup> Doctorate in Educational and Child Psychology, Educational Psychology Group, University College London, 26 Bedford Way, London WC1H 0AP. Emails: <u>s.dunsmuir@ucl.ac.uk</u> and <u>jane.lang@ucl.ac.uk</u>

<sup>&</sup>lt;sup>b</sup> Room A6.5, Ellen Wilkinson Building, University of Manchester, Oxford Road, Manchester, M13 9PL. cathy.atkinson@manchester.ac.uk

<sup>&</sup>lt;sup>c</sup> University of Southampton, Doctorate in Educational Psychology, Building 44a, Highfield Campus, SO17 1BJ. Email: <u>S.F.Wright@soton.ac.uk</u>

<sup>\*</sup> corresponding author

The Value of Practice Simulations and Objective Structured Professional Assessments

(OSPAs) for School Psychology Training: Participant Perspectives

## **Abstract**

This paper explores trainee educational psychology doctoral students' experiences of Objective Structured Professional Assessments (OSPAs), implemented at three UK universities and involving participation in a series of timed, simulated scenarios. Focus groups were audio-recorded, transcribed and subjected to thematic analysis. Themes linked with cognitions included identification of learning processes (reflection, discovery, reception) or practical constraints (authenticity and timing of scenarios). Statements of emotion included positive responses (containment, reassurance and relief) as well as more adverse reactions to the experience (anxiety and anger). Overall, the findings suggest that many students valued OSPAs as worthwhile and useful in developing professional competencies.

### Introduction

Within initial educational psychology training in the UK, the knowledge and skills that underpin professional competence as defined by the British Psychological Society (2019), is assessed by supervisors when a student is delivering services on placement in a local authority. However, findings from national and international surveys of practitioner psychologists indicate that assessment of professional competence on placement is adequate, but insufficiently specific (Scott, Pachana & Sofronoff, 2011; Woods, 2013). Evidence suggests that placement supervisors show bias based on relationship factors, which result in more lenient judgements being made about competence (Gonsalvez & Freestone, 2007). This can reduce opportunities for students to gain the focused guidance and detailed critical feedback that they need for professional development, and means that training providers may not always have an accurate picture of student capability. If supervisor reports are used as a basis for making judgements about student competence, it is important that they are free of bias. Yet it has been found that supervisors tend to rate trainees as 'above average' and rarely is anyone rated as unsatisfactory (Wilkinson & Wade, 2007). It has been argued that in order to standardise assessments so they are fairer, more reliable and more valid, an objective structured protocol could be introduced alongside supervisor judgement (Rao, 2005). Developing a standardised framework to assess professional skills, competence and performance in psychology training, following Miller's (1990) model of hierarchical learning, could provide this standardised framework.

Yap, Bearman, Thomas and Hay (2012) examined the potential application of the objective structured clinical examination (OSCE), which is commonly used in medical training, to improve methods used to assess the clinical skills of psychology students. They trialled OCSEs with nine students who reported that as an assessment method it was anxiety provoking, but was nevertheless perceived as valid, realistic and fair. Similarly, Gonsalvez et al (2013) developed and evaluated a method of assessment for psychology students in which standardised vignettes were used to assess clinical competence, concluding that this reduced rater bias.

OSCEs were introduced in the 1970s (Harden, Stevenson, Downie & Wilson, 1975) to increase fairness of assessment in medical training. They enable assessment of a wider number of skills than written examinations, increase the number of examiners and are marked against explicit criteria which are standardised. Procedural knowledge and competence is assessed within simulations involving an actor in the role of a patient, working to a predetermined script. In medicine and allied health professional training they have become extensively used (Nicol & Freeth, 1998; Clarke, Rainey, & Traynor, 2011). The assessment format involves students rotating around a number of 'stations' where they are required to demonstrate a particular professional skill (for example prescribing, data interpretation, communication of diagnosis). Each student is presented with a short written scenario at each station and responds to it in the presence of a simulated patient (an actor) trained for the role. The student is assessed in their performance against a checklist of criteria which relate to the various elements of the task. In addition to medical training, the OSCE format has been developed for use in other disciplines, e.g. electrical engineering (Alinier & Alinier, 2006) psychiatry (Hodges, Hanson, McNaughton & Regehr, 2002) and clinical psychology (Yap et al., 2012).

It has been argued that advantages of OSCE style assessments include a greater level of examiner objectivity compared to supervisor and written assessments (Rushforth, 2007; Newble, 2004; Schuwirth & van der Vleuten, 2003; Watson, Stimpson, Topping & Porock, 2002), a greater range of skills tested (McKnight et al, 1987, Watson et al., 2002) and, because of the increased number of examiners, reduced level of examiner bias (Bartfay, Rombough, Howse & Leblanc, 2004; McKnight et al., 1987). In addition, clinicians have reported that OSCEs increase learning motivation (Bartfay et al., 2004) and are advantageous due to immediate feedback given on student performance (Biran, 1991, Hodder, Rivington, Calcutt & Hart, 1989; Harris & Miller, 1990, Black & Harden, 1986). However, it has been noted that the setting up and facilitating of OSCEs creates a heavy workload for teaching staff and can be costly in terms of resources such as payment to simulated patients, venue hire and staffing (Bartfay et al., 2004). Turner and

Dankoski (2008) state that success of this type of assessment depends on planning, co-ordination of resources and well-judged use of the assessment data.

In the evaluation of OSCEs, student perspectives are essential. Participation has consistently been demonstrated to be associated with high levels of anxiety (Clarke et al., 2011; Yap et al., 2012; Fidment, 2012), due to a range of factors such anticipatory stress, professional exposure, implications of failure and so on. Organizational aspects of OSCEs have been criticised by students (Troncon, 2004), who have also reported difficulties with time management at each station (Yap et al., 2012; Troncon, 2004). The process has been considered by students to be extremely time and effort consuming (Clarke et al., 2011; Troncon, 2004) and sometimes inconsistencies between examiners have been reported (Yap et al., 2012). However, many positive aspects have also been recognised by students, who report that the process of participating in OSCEs can be a valuable experience which supports and builds on previous learning (Clarke et al., 2011; Yap et al., 2012), provides immediate feedback (Yap et al., 2012) and aids the development of professional competence.

Within educational psychology, Objective Structured Professional Assessments (OSPAs) have been devised and developed (Dunsmuir, Atkinson, Lang, Warhurst & Wright, 2017) by school psychology educators at three universities. OSPAs consist of a set of calibrated, simulated scenarios designed to test the knowledge, skills, behaviours and attitudes required by trainee educational psychologists (TEPs) in order to demonstrate competent professional practice. The content for the OSPA scenarios was based around the competencies required for practice with young people aged between 16-25 years, the extended age range to which educational psychologists in the UK deliver services (Atkinson, Dunsmuir, Lang & Wright, 2015).

Decisions about the structure and format of the OSPAs were made in consultation with two medical practitioners, experienced in authoring and assessing OSCEs, who advised on the number of stations, timing, staffing requirements, venue requirements, scenario content and the role of the co-ordinator. One important distinction between the OSPA framework and medical OSCEs relates to the purpose of the assessments. OSPAs were designed to produce formative

feedback to enhance professional development, rather than to act as the basis for summative (pass/fail) judgements, as is the case with OSCEs. It was agreed that each student would take part in four, 10-minute OSPA stations, sampling different aspects of EP consultation: 1. Information Gathering, 2. Assessment and Explanation, 3. Action Planning, 4. Communication and Ethics. The content for the scenarios was based around real-life cases, produced by an OSPA steering group comprising experienced EP trainers and practitioners. Assessment criteria were calibrated against scenario objectives and content to ensure that criteria for assessment were explicit and fair. An example of an OSPA Communication and Ethics station can be viewed at this link: <a href="https://www.ucl.ac.uk/ospa-project/ospaexperience.html">https://www.ucl.ac.uk/ospa-project/ospaexperience.html</a>. Separate information packs for actors and assessors were produced and distributed several weeks before the OSPAs took place in order for them to prepare; additionally, training sessions were provided for assessors. Students were given their information pack (which comprised general guidance, aims and background information for each station) 24-48 hours before the assessment and were advised that extensive preparation was not necessary.

The structure of the OSPAs is described in detail by Dunsmuir et al. (2017). During the OSPA scenarios, assessors made judgements about student performance on to a calibrated mark sheet within five domains: communication skills, perspective taking, information gathering and synthesis, management and personal integrity. Assessment was formative – students either demonstrated competence or a development need was identified. All OSPAs were video-recorded and the assessor gave verbal feedback in the format of two strengths and one improvement suggestion, linked to domain of competence following the 10-minute scenario. The video recordings of the scenarios were assessed at a later date by an EP linked to one of the other universities involved in the project, an so unknown to the student. Formative feedback from the second assessor was delivered to students via a digital audio file to assist review and reflection on their learning through provision of detailed, individualized feedback, following the structured OSPA framework. There are a number of documented benefits of audio over written feedback (Merry & Orsmond, 2008), including increased depth, differentiation, applicability and quality of

information provided. In addition, participants were given the video recordings of their own scenarios enabling them to reflect on their video-recorded performance in the OSPA whilst contemplating the audio feedback.

### **Research Rationale**

The rationale behind the introduction of the OSPAs was to ensure that students were assessed in authentic, standardised scenarios and received feedback following calibrated protocols and criteria. To evaluate the OSPAs from the perspective of participating students, feedback was sought on:

- 1. *The OSPA experience:* strengths, development suggestions and wider application within initial educational psychology doctoral programs.
- 2. *Quality of Feedback:* both from the assessor immediately after each OSPA and audio feedback which they received at a later date.
- 3. *Assessment methods:* whether it would be appropriate to use OSPAs for summative as well as formative assessment in EP training.

### Method

# Design

Focus groups were held after the OSPAs at the three participating universities to gain insights into student perspectives. Focus groups are organised sessions where individuals gather to discuss their perceptions and views about a significant theme (Krueger, 2009). Social interaction amongst members of the focus group is key to the method and participants are able to interact with each other to ask questions, challenge, agree or disagree (Braun & Clark, 2013), thus eliciting a range of perceptions of the experience of preparing for, and undertaking, an OSPA. It is argued that within focus groups, participants are more likely to reveal their views openly than in an individual interview (Vaughn, Schumm & Sinagub, 1996). There are potential disadvantages of a focus group; they can be difficult to organise and manage and are time

consuming both for participants and for transcription of the data (Braun & Clark, 2013). The focus groups aimed to elicit participant perspectives on experience of participating in the OSPAs, views about feedback, how it was delivered and what considerations might need to be made if the OSPAs were to be used more systematically within the EP training program.

## **Participants**

Participants were 34 students from three universities who undertook the OSPAs during the second year of a three-year professional doctorate in educational psychology (University 1, n = 9, University 2, n = 12, University 3, n = 13). Participants were aged between 25 and 35 years; 7 were male and 27 were female.

### **Procedure**

Requests were made for volunteer students to participate in the organisation and running of the focus groups. Three focus group facilitators, one from each university, were selected from those that expressed an interest. Training in focus group facilitation was provided and students were paid for the time spent on OSPA related activities from the budget provided by the project funders. The focus group questions (see Appendix 1) were formulated in collaboration with the three program directors from the participating universities. The focus groups were carried out eight weeks after the OSPAs had taken place. Students took part in a focus group at their own university, which meant that they had experienced the same assessors and actors as other members of their focus group, which comprised colleagues on the same program. All focus groups were audio recorded and transcribed for analysis. Participants were assured that their participation in the focus group would be in confidence and any reference to names or identifying institutions was removed from transcripts by the transcriber, prior to the analysis.

## **Data Analysis**

The transcripts from the focus groups were subjected to thematic analysis using the qualitative data analysis software Atlas.ti (Friese, 2015). The data were scrutinised within the software following Braun and Clarke's (2006; 2013) six stages which included: transcription, reading and familiarisation to note points of interest, complete initial coding of the dataset, searching for themes, reviewing the themes, defining and naming themes, writing and finalising analysis. Initial codes were generated by the third author, after familiarisation with the data during transcription. These codes were collated into themes which were mainly descriptive and gave an account of the practicalities. After the initial thematic structure had been developed, the codes were reviewed by the first author to check the fit between the themes, and develop the thematic structure. Regular reviews took place, an iterative process that enabled discussion between authors of emerging conceptual explanations in order to reach agreement about the themes and sub-themes that accommodated the data most accurately and economically. This ongoing consultation served to establish the credibility of the thematic structure by reducing researcher bias and selective attention. Dependability (or auditability) was gained by the audio-recording and transcription of the complete interviews (Shenton, 2004).

A deductive method, utilising the learning processes identified in the Lancaster Learning Cycle (Burgoyne, 1992) was applied to identify themes relating to different aspects of the learning process (Binstead, 1980; Burgoyne & Stuart, 1976; Burgoyne, 1992). Three types of learning were identified within student statements; *discovery, reception and reflection*.

Discovery is linked with practice or experimentation and feedback, reception with watching, listening and reading and reflection involves individualising, integrating and gaining confidence in knowledge, skills and attitude. The preliminary findings were examined by the first author when refining the emerging themes and sub-themes. Additional themes were identified relating to practical aspects of the OSPAs and the emotions and cognitions reported by students reflecting on the OSPA experience.

## **Findings**

Two main themes emerged from the analysis - *Emotions* and *Cognitions*. These were organised into positive and negative sub-themes (see Table 1). Positive statements relating to *Cognitions* were organised into nested sub-themes: *Reception* (receipt of information - watching, listening, reading), *Discovery* (experimentation and feedback) and *Reflection* (integration, individualisation, gaining confidence of new skills). Negative statements categorised within *Cognitions* centred around two themes: *Authenticity* and *Time Pressures*. Statements categorised under the *Emotion* sub-theme captured the way in which OSPA participation affected students' feelings. Positive statements were organised into the following nested sub-themes: *Containment, Reassurance* and *Relief*. Negative statements about emotions centred on *Anxiety* and *Anger*.

### INSERT TABLE 1 ABOUT HERE

Table 2 provides illustrative quotations relating to sub-themes. Positive statements of cognition fell into three broad areas. The most commonly recurring of these (36.26%) were statements of *Reflection* on how the OSPAs were considered to have been a useful experience in terms of learning taking place. Many of the comments in this category were about how useful students had found observation by university tutors to be and how this had helped to facilitate learning. Participants recognised that the feedback was valuable as a way to either confirm that their practice was competent or to highlight areas for development. The two-way process of feedback given at the time of the OSPAs was also valued; the time for discussion helped to make them interpretable and relevant. Participants also talked about how the content of the OSPAs had highlighted curriculum content areas where they needed to further their knowledge.

The second most populated sub-theme relating to positive cognitions (32.16%) was Discovery: participants commented on how they appreciated the immediate, direct feedback. Regarding the 10-minute time frame, some students reported that they became attuned to the ospas. The third sub-theme *Reception*, included participants' comments on the preparation they undertook prior to the Ospas and how this had facilitated new learning and helped re-evaluate practice implications with a client population aged 16-25 years.

Negative comments within the *Cognition* theme included statements about the *Authenticity* of the assessment process and *Time pressures*. Some participants reported that they were unclear about the expectations of their performance during the 10-minute OSPA scenario. One participant stated that the assessment was unfair because of the artificiality of the situation, which was at odds with how they would perform in a real life situation. Some participants considered that the time allocated for each OSPA did not allow them to demonstrate their professional skills adequately. At one university, participants commented that the actor at one of the stations had made the consultation process difficult. Comments about *Time pressures* indicated that the 10-minute duration was considered by some to be too short for an in-depth consultation.

Statements relating to *Emotion* were also divided into positive and negative strands. Positive sub-themes were identified as *Reassurance*, *Containment* and *Relief*. Of all the positive statements in the *Emotion* theme, *Reassurance* was the most frequently cited (14.62%). Assessors that were known to the participants were felt to be reassuring and helped to dispel anxieties on the day. One participant commented that feedback was reassuring, structured and detailed, in contrast to the feedback received from their supervisor on placement. In terms of *Containment*, participants commented that the time boundaries, both in terms of preparation before the OSPA day and timings on the day helped to make it a positive experience. The *Relief* category captured the emotional response when the process was complete and the realisation that it had not, in most cases, been as difficult as anticipated.

Statements of negative emotion captured within the *Anxiety* sub-theme were linked to OSPA participation. Some students described anticipatory anxiety about the OSPAs, and some

felt anxious due to the fact that the OSPAs were video-recorded, which they considered afforded it a degree of permanence.

Other negative emotions were associated with *Anger* about *Anonymity*, *Consent* and *Feedback*. Some students questioned whether they had remained anonymous when their videos were appraised by the second assessor, and that negative views formed, could be detrimental to future career prospects. Some students were resistant to participating and expressed a belief that they should have been able to refuse to consent to participate in this form of assessment. Some students were critical of the quality of the audio feedback provided by the second assessor, on the basis that it was impersonal, lacking in consistency and remote. In addition, there was some confusion about whether the OSPAs were for summative, rather than formative assessment, despite the fact that students had been informed verbally and in writing that the purpose was formative.

Examples of the comments made by participants are shown in Table 2.

# INSERT TABLE 2 ABOUT HERE

## **Discussion**

Within educational psychology training, most assessment of professional competence occurs on placement, despite the leniency biases of supervisors (Gonsalvez & Freestone, 2007) and resultant reduced opportunities for students to receive constructive but critical feedback (Scott, Pachana & Sofronoff, 2011; Woods, 2013). To address this, a standardised assessment framework for professional competence was developed as a valuable alternative/addition to traditional assessment. Initial feedback from focus groups shows that students value aspects of OSPAs, finding that preparation and participation and the immediate feedback was helpful in discovering new areas of learning. This concurs with earlier studies that found the assessments

offer good learning opportunities of realistic scenarios (Yap et al, 2012; Alinier, 2003; Hodder et al, 1989).

Anxiety is recognised to be a key factor affecting some participants in OSCEs (Clarke et al., 2011; Fidment, 2012; Yap et al., 2012), a finding replicated in this study. Contributing factors that were discussed included the build-up prior to the assessment day, the experience being new and unknown, and the use of video recording. However, students also commented on the sense of relief and satisfaction after they had completed their assessments, and recognised that despite the pressure, they had had a useful learning experience. In line with previous studies that have highlighted difficulties with time management at each station (Yap et al., 2012; Troncon, 2004), some participants in the current study reported that completion of a consultation within 10 minutes was difficult to manage, although this was less marked as they progressed through the OSPA stations.

The immediate feedback from assessors on the day was valued, and the fact that it was from university tutors known to, and trusted by, the participants, added to this. As other researchers have found, the interpretable, relevant and interactive nature of the verbal feedback was appreciated, and considered by students to aid the learning process (Yap et al., 2012; Biran, 1991; Hodder et al., 1989; Harris & Miller, 1990; Black & Harden, 1986). In contrast, the audio feedback received after the event was described by students as impersonal and lacking in consistency. This is in contrast to the findings of Merry and Orsmond (2008) who reported positive student responses to audio-file feedback, as it was judged to be easier to understand, more in depth, detailed and personal. The audio-file feedback in the Merry and Orsmond study was delivered by tutors familiar with the participants, whereas audio file feedback in this study was delivered by assessors unknown to the students.

An increase in confidence and learning, specifically in working with 16-25 year olds was reported by a significant number of participants. This corresponds with views of participants in a study of student nurses, by Clarke et al., (2011), who reported that their students viewed the

OSCE as a valuable learning experience, which consolidated previous learning and aided competence.

As a formative assessment method, students were reassured by the observation and feedback provided by the tutors known to them which, as reported in previous studies, helped to facilitate learning (Clarke et al., 2011; Yap et al., 2012) and dispel anxiety. However, when asked to what extent they thought OSPAs to be appropriate for summative as well as formative assessment, participants expressed concerns, as the summative process leads to higher stakes outcomes (pass or fail). This suggests that while students consider OSPAs to be useful for formative assessment, there is something either about the format, content, or process which would cause concern were this to be a summative assessment. This concurs with evaluations of medical OSCEs, which highlight the need for consistently applied, reliable and valid summative assessment schemes when using a method with such high stakes (Turner & Dankoski, 2008).

A major concern regarding use of the OSCE, and by extension the OSPA, has been the issue of authenticity and whether a short simulated encounter with an actor simplifies the process so much that validity is questioned. Although interestingly, within general practice, studies have found that doctors cannot distinguish standardised patients played by actors from real patients (Norman, Tugwell & Feighter, 1982; Rethans, Drop, Sturmans & van der Vleuten, 1991) which might suggest that it is unlikely that educational psychology doctoral students would either. In the current study, however, authenticity was one of the negative themes, with participants questioning whether scenarios were genuine and some feeling that their performance was being assessed, rather than their professional skills and knowledge. Other limitations of this study relate to the design. We sought the perspectives of students, but this information was not corroborated, nor compared with data from other sources, such as the views of assessors or actors. Although participant anonymity and confidentiality was assured in the production of the focus group transcripts, individuals may have had concerns that their statements would render them

identifiable. The impartiality of the focus group student facilitators may have had an effect on the dynamic and led to bias, for example in the dominant representation of certain views. It is important to bear in mind the relationship between the assessor and student and the influence that this has on receptivity to feedback. There were some indications that audio feedback provided by an unknown second assessor was dismissed by some students. As leniency biases are demonstrated by placement supervisors due to their relationships with students (Gonsalvez & Freestone, 2007), this study suggests that the form of objective feedback most likely to be useful, well-received and acted on is provided by assessors known to the students, involved in evaluating competence during live observations using OSPA frameworks. Further research should investigate this in more detail.

To conclude, most students value many aspects of the OSPA and would welcome their use within initial training as a formative evaluation tool. However, no individual assessment will meet all assessment needs, so perhaps what OSPAs offer is an additional method, which when used in conjunction with supervisor feedback, has the potential to support learning if used formatively, and evaluate learning if used summatively. Given we know, from the considerable work within medicine, that reliability is strongly related to the number of stations and the testing time (Swanson & van der Vleuten, 2013) we need to consider how we can ensure that the OSPAs are as reliable as possible if we are to consider using them as part of a wider summative assessment.

## References

- Atkinson, C., Dunsmuir, S., Lang, J. & Wright, S. (2015). Developing a competency framework for the initial training of educational psychologists working with young people aged 16-25. *Educational Psychology in Practice*, doi:10.1080/02667363.2015.1004038
- Alinier, G. (2003). Nursing students' and lecturers' perspectives of objective structured clinical examination incorporating simulation. *Nurse Education Today*, 23(6), 419-426. doi:10.1016/S0260-6917(03)00044-3
- Alinier, G. & Alinier, N. (2006). Design of an objective assessment tool to evaluate students' basic electrical engineering skills: the OSTE. *Journal for the Enhancement of Learning and Teaching*, 3(1), 57-63.
- Bartfay, W. J., Rombough, R., Howse, E., & Leblanc, R. (2004). Evaluation. The OSCE approach in nursing education. *The Canadian Nurse*, *100*(3), 18-23.
- Biran, L. A. (1991). Self-assessment and learning through GOSCE (group objective structured clinical examination). *Medical Education*, 25, 475-479. doi: 10.1111/j.1365-2923.1991.tb00100.x
- Black, N. M. & Harden, R. M. (1986). Providing feedback to students on clinical skills by using the Objective Structured Clinical Examination. *Medical Education*, 20, 48-52. doi: 10.1111/j.1365-2923.1986.tb01041.x
- Braun, V. & Clarke, V. (2006). Using thematic analysis in psychology. *Qualitative research in psychology*, 3(2), 77-101. doi:10.1191/1478088706qp063oa

Braun, V. & Clarke, V. (2013). Successful Qualitative Research, Sage Publications.

Binstead, D. (1980) Design for learning in management training and development: a view.

\*Learning and Management Training, 4(8), 2-32. doi:10.1108/eb002352

British Psychological Society (2019). Standards for the Accreditation of Doctoral Programmes in Educational Psychology in England, Wales & Northern Ireland.

Leicester: BPS. Accessed on 25 February 2019. Retrieved from:

https://www.bps.org.uk/sites/bps.org.uk/files/Accreditation/Educational%20Accreditation%20Handbook%202019.pdf

Burgoyne, J.G. (1992) Frameworks for understanding individual and collective professional development. *Educational and Child Psychology*, 9(2), 42-52.

Burgoyne, J.G. & Stuart, R. (1976) The nature, use and acquisition of managerial skills and other attributes. *Personnel Review*, *5*, 53-58. doi:10.1108/eb055318

Clarke, S., Rainey, D., & Traynor, M. (2011). Using the Objective Structured Clinical Examination (OSCE) to assess orthopaedic clinical skills for the registered nurse.

International Journal of Orthopaedic and Trauma Nursing, 15(2), 92–101.

doi:10.1016/j.ijotn.2010.11.003

Dunsmuir, S., Atkinson, C., Lang, J., Warhurst, A. & Wright, S. (2017). Objective Structured Professional Assessments for Trainee Educational Psychologists: an Evaluation. *Educational Psychology in Practice*, *33*(4), 418-434. doi:10.1080/02667363.2017.13.52490

Fidment, S. (2012). The Objective Structured Clinical Exam (OSCE): A Qualitative Study

Exploring the Healthcare Student's Experience. *Student Engagement and Experience Journal*,

1(1), 1–11. doi:10.7190/seej.v1i1.37

Friese, S. (2015) Atlas.ti 7 User Manual, Scientific Software Development GmbH, Berlin.

Gonsalvez, C. J., Bushnell, J., Blackman, R., Deane, F., Bliokas, V., Nicholson-Perry, K., Knight, R. (2013). Assessment of psychology competencies in field placements: Standardized vignettes reduce rater bias. *Training and Education in Professional Psychology*, 7(2), 99–111. doi:10.1037/a0031617

Gonsalvez, C. J., & Freestone, J. (2007). Field supervisors' assessments of trainee performance:

Are they reliable and valid? *Australian Psychologist*, 42(1), 23–32.

doi:10.1080/00050060600827615

Harden, R. M., Stevenson, M., Downie, W. W., & Wilson, G. M. (1975). Assessment of clinical competence using objective structured examination. *BMJ*, 1(5955), 447-451. doi: 10.1136/bmj.1.5955.447

Harris, I. B., & Miller, W. J. (1990). Feedback in an objective structured clinical examination by medical students serving as patients, examiners, and teachers. *Academic Medicine*, 65, 433-434. doi: 10.1097/00001888-199007000-00002

Hodder, R. V., Rivington, R. N., Calcutt, L. E., & Hart, I. R. (1989). The effectiveness of immediate feedback during the objective structured clinical examination. *Medical Education*, 23, 184-188. doi: 10.1111/j.1365-2923.1989.tb00884.x

- Hodges, B., Hanson, M., McNaughton, N., & Regehr, G. (2002). Creating, monitoring, and improving a psychiatry OSCE. *Academic Psychiatry*, 26(3), 134-161. doi: 10.1176/appi.ap.26.3.134
- Krueger, R. A., & Casey, M. A. (2009). Focus groups: A practical guide for applied research.

  Sage. doi: 10.2307/3172912
- Merry, S. & Orsmond, P. (2008). Students' Attitudes to and Usage of Academic Feedback Provided Via Audio Files. *Bioscience Education*, 11. doi:10.3108/beej.11.3
- McKnight, J., Rideout, E., Brown, B., Clieska, D., Patton, D., Rankin, J., & Woodward, C. (1987). The objective structured clinical examination: An alternative approach to assessing student clinical performance. *Journal of Nursing Education*, 26, 39-41.3029351.
- Miller, G. E. (1990). The assessment of clinical skills/competence/performance. *Academic medicine*, 65(9), S63-7. doi: 10.1097/00001888-199009000-00045
- Newble, D. (2004). Techniques for measuring clinical competence: objective structured clinical examinations. *Medical Education*, *38*(2), 199-203. doi: 10.1111/j.1365-2923.2004.01755.x
- Norman, G.R., Tugwell, P. & Feighter, J.W. (1982). A comparison of residents' performance on real and simulated patients. *Journal of Medical Education*, *57*, 708-715. doi: 10.1097/00001888-198209000-00008
- Nicol, M., & Freeth, D. (1998). Assessment of clinical skills: a new approach to an old problem.

  Nurse Education Today, 18(8), 601–609. doi:10.1016/S0260-6917(98)80056-7

Rao, R. (2005). OSCEs in Psychiatry. Springer Science & Business.

- Rethans, J.J., Drop, R., Sturmans, F. & van der Vleuten, C. (1991). A method for introducing standardized patients into general practice consultations. *British Journal of General Practice*, 41, 94-96.
- Rushforth, H.E. (2007). Objective structured clinical examination (OSCE): Review of literature and implications for nursing education. *Nurse Education Today*, 27, 481-490. doi: 10.1016/j.nedt.2006.08.009
- Scott, T. L., Pachana, N. A., & Sofronoff, K. (2011). Survey of current curriculum practices within Australian postgraduate clinical training programmes: Students' and programme directors' perspectives. *Australian Psychologist*, 46(2), 77-89. doi:10.1111/j.1742-9544.2011.00030.x
- Schuwirth, L. W., & Van der Vleuten, C. P.M. (2003). The use of clinical simulations in assessment. *Medical Education*, *37*(s1), 65-71. doi: 10.1046/j.1365-2923.37.s1.8.x
- Shenton, A.K. (2004). Strategies for ensuring trustworthiness in qualitative research projects. *Education for Information*, 22, 63–75. doi:10.3233/efi-2004-22201
- Swanson, D.B. & van der Vleuten, C.P.M. (2013) Assessment of Clinical Skills With

  Standardized Patients: State of the Art Revisited. *Teaching and Learning in Medicine: An International Journal*, 25:sup1, S17-S25, doi:10.1080/10401334.2013.842916
- Troncon, L. E. D. A. (2004). Clinical skills assessment: limitations to the introduction of an "OSCE" (Objective Structured Clinical Examination) in a traditional Brazilian medical

school. São Paulo Medical Journal = Revista Paulista de Medicina, 122(1), 12–7. doi:S1516-31802004000100004

- Turner, J. L., & Dankoski, M. E. (2008). Objective structured clinical exams: A critical review. *Family Medicine*, 40(8), 574–578.
- Vaughn, S., Schumm, J. S., & Sinagub, J. M. (1996). Focus group interviews in education and psychology. Sage. doi:10.4135/9781452243641
- Watson, R., Stimpson, A., Topping, A., & Porock, D. (2002). Clinical competence assessment in nursing: a systematic review of the literature. *Journal of advanced nursing*, *39*(5), 421-431. doi: 10.1046/j.1365-2648.2002.02307.x
- Wilkinson, T. J., & Wade, W. B. (2007). Problems with using a supervisor's report as a form of summative assessment. *Postgraduate Medical Journal*, 83(981), 504-6. doi: 10.1136/pgmj.2007.058982
- Woods, K. (2013). 'In This Together': Developing University-Workplace Partnerships in Initial
  Professional Training for Practitioner Educational Psychologists. In O. McNamara, J. Murray
  & M. Jones (Eds.) Teacher Learning in the Workplace: widening perspectives on practice and policy. Part 2: Insights from practice across professions and nations. London: Springer. doi: 10.1007/978-94-007-7826-9
- Yap, K., Bearman, M., Thomas, N., & Hay, M. (2012). Clinical Psychology Students'
  Experiences of a Pilot Objective Structured Clinical Examination. *Australian Psychologist*,
  47(3), 165–173. doi:10.1111/j.1742-9544.2012.00078.x

#### PARTICIPANT PERSPECTIVES OF PRACTICE SIMULATIONS

## Appendix 1

Focus Group Questions

- 1. Without giving away specific information, please can you tell me briefly about your experience of working with 16-25 year olds prior to undertaking the OSPA project.
- 2. What were your views about the OSPA day held at (your university)? (prompts: What went well? What could have been improved?)
- 3. What are your views about the tutor feedback delivered on the day? (prompts: How it was delivered, How useful it was, How it made you feel)
- 4. What are your views about the audio feedback received remotely from an external assessor? (prompts: How it was delivered, How useful it was, How it made you feel)
- 5. With regard to the feedback, to what extent do you feel that this is an assessment method that could be potentially used in other areas of the training program?
- 6. If training programs were to adopt the use of OSPAs more systematically, what other considerations might need to be made? To what extent do you think OSPAs are appropriate for summative as well as formative assessment?
- 7. To what extent has participating in the OSPA project helped you to develop your competence in working with young people aged 16-25?
- 8. Is there anything you would like to say about your experience of undertaking the OSPAs?

Table 1
Themes Emerging from Focus Group Transcripts

Positive	No. (%)	Negative	N. (%)
Statements re Cognitions			
Reception	11 (6.43)	Authenticity	33 (24.63)
Discovery	55 (32.16)	Time pressure	15 (11.19)
Reflection	62 (36.26)		
Statements re Emotions			
Containment	10 (5.85)	Anxiety	35 (26.12)
Reassurance	25 (14.62)	Anger - anonymity	5 (3.73)
Relief	8 (4.68)	Anger - consent	11 (8.21)
		Anger - feedback	35 (26.12)
Total	171 (100)	Total	134 (100)

## Table 2

Illustrative Examples of Statements Relating to Sub-themes

# Statements re Cognitions

# Reception

- 'The preparation stage made me look up a few things that I now know that I didn't before.'
- 'I think some of the information that we were provided with as part of the process was helpful, so in terms of signposting us to certain resources or papers and things like that was useful.'

# Discovery

- 'because it was instant feedback, they had picked up on some of those things which I would have let go and when they said it as well I thought, no this is something that I need to work on, so I found that instant feedback helpful while it was fresh in my mind. We are not going to get those opportunities very often, so that's why I thought it was useful.'
- 'I didn't do any preparation really, I just turned up and that's how I work best, but in the first one I tried really hard to focus on those bits and my feedback was that because I had been focusing on those bits I'd missed some of the other bits and I wasn't as person-centred as I should have been. So in my next three, they were far better, I could see a big difference and I forgot about that and followed the person and just went with it.'

### Reflection

- 'I actually got a feedback point that I hadn't had before, which I quite liked as well, because it's definitely something that I need to address. So I found it really useful because I've never had it pointed out to me before.'
- 'I think it highlighted an area of need requiring further knowledge and attention, an EP's role, particularly I found the ethics scenario in the role of mental capacity and working with that element of 16-25s, that is a gap in my knowledge definitely so that was highlighted as part of the OSPAs.'

## Authenticity

- 'I just found the mum was so hard to deal with. I don't know if I've just had nice parents so far, but she was so stroppy it was maybe a little bit over the top.'
- 'I don't think it should be summative feedback and I think that your interactions with someone you know is an actor, I think kind of your performance on that day depends on how good an actor you are and I don't think I should be judged on how good an actor I am or not'

## Time pressure

- 'it was completely unrealistic, it would never ever be a 10-minute consultation and I didn't see how I could achieve a whole lot in 10 minutes.'
- 'one of the issues for me and one that I have raised is that for me in terms of timing of the year it wasn't particularly well timed. Already my stress levels were quite high so I don't think it was necessarily the process itself that made me worry but it was kind of cumulative effect of it. So I think I was more concerned about it than I necessarily had to be and so I think the timing of it rather than the actual process itself.'

### Statements re Emotions

### Containment

• 'Yes, there were clear expectations set down in terms of the timings and things and how it would look so you knew what you were going to be doing'

### Reassurance

- 'I came away feeling pretty good about myself and feeling I've got a lot of skills and I can do this.'
- 'I found it useful because I get very, very little feedback on placement so actually to have some feedback at all was reassuring because I think I am out there most of the time doing the job hoping that it's all right, so to get some real feedback was good.'

#### Relief

• Massively relieved that it wasn't anywhere near as bad as I thought it would be.'

### Anxiety

• 'I had deliberately told myself to not get wound up about it because I wasn't being assessed - having said that, that actual day, I did feel wound up about it. As we were sat in the room I think we were all feeling a bit stressed about it.'

### Anger - Anonymity

• 'Maybe because it was being videoed and they sent somebody that I didn't know and that I might meet in the future in relation to EP work and it could be anything like that and it really stressed me out.'

#### Anger – Consent

• 'And, I don't know about everyone else, but feeling like you were being forced into it. I think that was a big thing for me'

# Anger - Feedback

- 'I was under the understanding, which I am pretty sure is correct, that there were six areas that they marked us on in each of the consultations and you were going to get two lots of feedback from each person, what I would have really liked was a breakdown of what those scores looked like.'
- 'In some of the feedback, they said that you could have asked some of these questions... and it's like well, you can only do so much in 10 minutes.'