Background: Clinical competence is a critical requisite of nursing education, yet new graduates are not adequately prepared for the transition to professional practice. Rapid changes to the healthcare landscape require educators to create and implement innovative strategies to facilitate, as well as, evaluate learning. Objective structured clinical examinations (OSCE) have been used in medical schools to facilitate assessment of clinical competency; however, there is limited use in undergraduate nursing programs (Salem, Ramadan, El-Guenidy & Gaifer, 2012). An OSCE requires students to demonstrate skills and behaviors in a simulated environment (Najja, Docherty & Miehl, 2016). With the limited use of OSCE’s in undergraduate nursing programs there is minimal understanding of the benefits of OSCE’s, as well as, best practice for facilitating success in undergraduate nursing students transition to practice.

Purpose: To explore the use of competency testing through objective structured clinical examinations (OSCE) in facilitating the transition to professional nursing practice.

Research Question: Does systematic integration of competency testing prepare the undergraduate nursing student for the transfer of knowledge to practice?

Methodology/implementation: Exploratory study. Nurse educators designed a series of OSCE’s as a final semester summative assessment for students in a baccalaureate nursing program. Clinical practice partners provided input and guidance on station design and evaluated testing criteria and processes. Station design was aligned with the state action coalition’s nurse competency model designed by nurse leaders in education and practice. Clinical scenarios that provided students an opportunity to demonstrate competency at patient management skills and identification of quality and safety concerns were included. Students were required to make clinical judgments based on assessments, initiate interventions, and demonstrate a professional, therapeutic relationship with the patient and/or family. Faculty evaluated each student on achievement of competencies using an objective evaluation tool; inter-rater reliability was maintained through consistent trained evaluators and the use of Panopto technology to record all stations. Student demographics and data from competency scores, participant feedback and NCLEX –RN results from more than 65 students was obtained.

Results: A chi-square test was performed to assess the relationship between competency testing stations, the ATI Pharmacology standardized assessment and NCLEX passage. The results for the ATI standardized assessment (1, N=65, = 6.08, p<.05), the clinical decision making competency station (1, N=65, = 4.4, p<.05), and the quality and safety station (1, N=65, = 4.69, p<.05), were significant. No significance was found with the delegation, patient assessment, or medication administration stations. Student and faculty feedback indicate that the OSCE effectively and fairly evaluated clinical competencies and judgment skills. Students suggested that the use of OSCE’s be integrated early in the curriculum to reduce stress level and promote improved accountability for best practice and maintenance of clinical competency. The lack of a reliable and valid tool for competency assessment was a limitation of the project.

Conclusion: The association between preparedness for practice and competency development has implications for nursing. Including competency testing throughout the curriculum, specifically testing that requires clinical decision-making is vital for safe transition to practice. The use of OSCE’s at key points in the educational process can assist in evaluating student performance, identifying the need for remediation opportunities prior to graduation, and preparing students for the transition to practice.
use of Panopto video recordings of student testing provided opportunity for student reflection and self-assessment. Evidenced-based strategies that promote the use of competency testing and the integration of technology are essential for transference of knowledge into professional practice. Further research to evaluate student outcomes and develop a valid and reliable tool is essential in this process.

Title:
Competency Testing: Evaluating a BSN Student's Readiness for Transition to Practice

Keywords:
Competency Testing, OSCE and Transition to practice

References:


Abstract Summary:
Abstract Summary: Systematic use of competency testing fosters success in student transition to clinical nursing practice. Chi-square analysis found a relationship between standardized assessments, NCLEX passage, clinical decision making, and quality and safety competencies. Reliable assessments that support a safe transition to practice are essential in nursing education.

Content Outline:

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<th>LEARNING OBJECTIVES</th>
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<td>The learner will define the concept and use of competency testing in the form of objective structured clinical examinations (OSCE).</td>
<td>a. Discussion related to the association between preparedness for practice and competency development has implications for nursing. b. The history of the use of OSCE’s and competency testing in healthcare will be explored through power point and lecture, and review of current literature. c. Threading competency testing in the curriculum and</td>
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specific measurable outcomes that are achieved will be outlined through sharing existing rubrics and curricular mapping. d. Research regarding safe transition to practice, specifically testing that requires clinical decision-making will be explored. d. The use and research on deliberate practice to prepare nurses in the provision of safe care will be identified.

The learner will be able to evaluate reliable competency testing specific to curricular outcomes.

The learner will evaluate the usefulness of competency testing in the form of an OSCE in facilitating transition to practice for new nursing graduates.

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