

## **OSCE, Taiwanese experience**

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OSCE is widely used for the teaching and evaluation of the clinical performance competencies of the medical students and as a part of medical licensing examination in recent years. At National Taiwan University Hospital (NTUH), we try to extend its use to the teaching and evaluation of professional competencies of resident physicians. The selected professional competencies for our program include 1. Data gathering and interpretation skills, residents are expected to be competent in obtaining and evaluating clinical data and to set priority of clinical problems and working diagnosis. 2. Physical examination skills, residents should be competent to perform focused and relevant physical examination to a higher standard that to minimize patient's discomfort and confusion. 3. Doctor patient interaction and communication skills, doctors should be able to conduct constructive interview and be skillful in various situations such as revealing disease or clinical situation, imparting bad news, performing effective counseling and patient education, building good rapport, showing empathy, etc. 4. Clinical judgment and decision making skills. Residents should be able to identify and evaluate as many pertinent bio-psycho-social problems as possible and make thorough and reasonable interpretation for each of them. Better performance score is given to those who can identify the unique situations and establish related solving strategies while dealing with a seeming common case. There are five steps in the process of developing our resident OSCE program. 1. To establish a list of clinical competencies by a modified Delphi method. 2. to develop a reliable and valid assessment criteria for each clinical competence. 3. to develop and accumulate test cases, each case include a check list and a write up exam. 4. to establish a SP program and to conduct series of workshop for instructor to be familiar with case writing, test observation and providing feedback. 5. to announce the test schedule and purpose at the beginning of the training year and to develop a parallel clinical training program to ensure adequate training and continuous learning of clinical competencies to be tested. The most challenging part of this program is to obtain the consensus, motivation and cooperation of the clinical instructors.

There are unique features of our program: 1. to use senior resident as well as lay persons for SPs. 2. a parallel training program with several newly developed tools to improve clinical teaching and learning . 3.to use multi-media facilities for observation, recording, immediate feedback and personal review. 4. mentors are heavily involved in the routine clinical training. 5. each test case is evaluated for its check list, write up questions and criteria at least on 2 separate occasions before they are sued. Our future plan is to establish an advanced version of OSCE for more complicated problems and clinical situations.