

OSCE: Evaluate the first impression of the nursing's students about learning outcomes assessment method

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Abstract:

Objective This study aimed to evaluate the first impression of the nursing's students about OSCE attributes as well as exploring the strengths and weaknesses of this assessment tool as perceived by study subjects.

Methodology: The sample population consisted of two groups of participants: first and second year. A convenient sample of 151 who examine finally second semester. The mode of data collection utilized an interview questionnaire about OSCE .The study was carried out in the College of Nursing at Minia University.

Result: highest percentage of the samples were 21 years, there is no significant differences between the different ages of the student and their first impression about OSCE in relation to purposes, design, measuring (competency, performance, professional behavior, integration of skills and knowledge, and availability of appropriate resources.

Conclusion: there are highly significant difference between the studied sample's achievement and their first impression about OSCE as regards to purposes, design, and measuring competency versus measuring performance.

Recommendations: the students should be trained for this type of exam; the best time for training is to start earlier during the semester. To improve the OSCE, it is important to provide all resources for this type of exam.

Key Words: Impression, Learning outcomes, OSCE

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I. Introduction

Objective Structured Clinical Examinations (OSCE) is a based appraisal. Furthermore basic device around used to objectively assess that clinical ability done nursing calling (**Bayoumy & Yousri, 2012**). These examinations spread utilizing recreated clinical particular circumstances Concerning illustration An drive in directing summer assessments for trainee fortune (**Miller, 2009**).

OSCE is currently made concerning illustration a standout amongst the the vast majority good, dependable Also animated tests will metric amalgamation for grant What's more clinical expertness (**Austin et al. , 2003; Rentschler, et al. , 2007, Hamdy, 2006**), Also it may be deference Likewise a candescent Also exhaustive method for appraisement (**Al Omari & Shawagfa, 2010, Abed El-aty, 2017**).

Notwithstanding general acknowledgement from claiming this method, there is civil argument In the worth from claiming OSCE testing contrasted with more accepted systems. To utilize OSCEs to a substantial Furthermore dependable way, consideration must make paid to test content, test design, and execution factors, particularly The point when those outcomes will a chance to be utilized to high-stakes choice making. Therapeutic scholars today need aid tried once knowledge, attitudes, Also aptitudes over various settings What's more methods, which are frequently triangulated on achieve summer choices. Created should survey those complex thought of clinical competence, those OSCE employments different stations with. Examinees performing Different clinical errands In each station. Assignments might incorporate test interpretation, history taking, physical examination, tolerant education, request writing, or other exercises (**John et al. , 2008**).

OSCE needs aid examinations in which those learner may be obliged with perform particular abilities Furthermore practices for a mimicked clinical alternately tolerant forethought earth. (**Nulty et al. , 2011**) accentuated that OSCEs are a profitable methodology with evaluate clinical ability procurement Furthermore 'fitness will practice' Likewise long Likewise they are connected at those students' required level for clinical act. OSCE will be a system for learner evaluation clinched alongside which parts for clinical ability are assessed Previously, a comprehensive, reliable Also organized manner, for close thoughtfulness regarding the objectivity of the methodology (**Schuwirth et al., 2003**).

OSCE obliges every scholar with exhibit particular aptitudes and practices On An mimicked fill in earth (**Mitchell et al. , 2009, Rentschler et al. , 2007, McGrath et al., 2006**) accounted that those OSCE

stations furnished the system to surveying the student's requisition of learning and additionally as much alternately her psychomotor Furthermore interpersonal skills; the chance on be assessed ahead their meeting skills, critical thinking abilities, educating What's more evaluation skills; and reflect the thing that the scholar need been taught. Some test the individual's capability should do clinical skills, for example, such that aseptic technique, moving and taking care of techniques, estimation from claiming fundamental indications Furthermore correspondence skills; others might additionally inspect those underpinning clinical Furthermore hypothetical information identifying with those aptitudes tried (**Rushforth, 2007**).

To addition, through the consider about one assembly exhibitions looking into OSCE, territories from claiming qualities Also Shortcomings in the instructive projects have been identifier (**Rentschler, et al. , 2007**). OSCEs then again is, no doubt exorbitant and Labor intensive; the conveyance from claiming which may be unpredictable Also asset intensive, generally directing, including huge amounts of examiners, candidates, simulators Furthermore patients, and frequently all the occurring crosswise over parallel locales (**Pell et al. , 2010**).

Those OSCE conforms of the third indicates how level of Miller's pyramid which keeps tabs with respect to evaluation about execution for particular aptitudes over An regulated setting (**van der Vleuten 2003**). OSCE survey not best propelled clinical act abilities as well as student's elucidation from claiming patient's discoveries. (**Jéssica et al., 2015**).

Nursing act is complex, comprising of a blend for separate competency segments. Some, for example, specialized foul skills, would key to protected practice, would promptly quantified utilizing institutionalized instruments, same time others require that's only the tip of the iceberg qualitative approach (**Malecan & Ain Alahi, 2010**).

Aim of this study was:

To evaluate the first impression of the nursing's students about OSCE attributes as well as exploring the strengths and weaknesses of this assessment tool as perceived by study subjects.

Subjects and Method:

Study design:

A survey design was utilized to elicit data pertaining to the current research.

Setting:

The study was carried out in the College of Nursing , Minia University ; Egypt.

Samples:

The study sample consisted of two groups of participants: first and second year .A convenient sample of one hundred and fifty one students (n.=151) who examine finally second semester OSCE of academic year 2014-2015 were recruited for the current study. They constituted almost 25% of students in the first and second academic year.

Tool:

One tool used for data collection, an interview questionnaire sheet: was designed to include the following elements: Data of the respondents such as age and student's achievement as well as the following tool to evaluate student's impression regard OSCE characteristics designed by the researchers after reviewing extensive literature.

It includes seven items as following :

1. Purposes of OSCE exam
2. OSCE design
3. Measuring competency
4. Measuring competency versus measuring performance
5. Measuring professional behavior
6. Measuring integration of skills
7. Staff availability of appropriate resources.

Tool with rating scores between strongly agree and strongly disagree

Scoring System:

Each right answer was given one score and wrong answer was given zero.

Methods of data collection:

1. Administrative approval:

Official permission was obtained from the Vice dean and Dean of Minia faculty of nursing to conduct the study, the aim of the study was explained to them to obtain their cooperation.

2. Validity:

Tool was developed after review of relevant literature & was tested for content validity by 5 expertise's from nursing staff, modifications were done accordingly then the tools were designed in its final format

3. Ethical consideration:

The study was approved by an institutional ethics committee, student's consent for participation in the study was obtained and the purpose and nature of the study was explained. The researcher initially introduced themselves to all students and they were assured that the collected data were absolutely confidential. They were informed that participation is voluntary.

4. A pilot study:

A pilot study was conducted on 10 % (15) of students to evaluate the applicability and clarity of tool. According to this pilot study, the required modifications were made and those students who were involved in the pilot study were included in the study.

5. Data collection:

The data were collected over a period of finally second semester OSCE of academic year 2014-2015.

procedure:

The researcher interviewed the students individually and took their oral consent to participate and each student was asked to answer interview questionnaire sheet. the assessment interview questionnaire sheet of the student was done and recorded. Each students interview taking between (20 - 30) minutes

Statistical analysis:

Data analysis was carried out using the SPSS statistical package version 18. The obtained data were coded, analyzed and tabulated. Descriptive, parametric and nonparametric statistical analysis was carried out accordingly. Qualitative analysis was done through a form of content analysis by identifying themes in participants' responses and grouping responses according to thematic content.

Results: The total study sample was comprised of 151 students. Students' first impression about (OSCE) was assessed.

Table (1): Distribution of samples according to age (n=151):

Age	No. (n= 151)	%
- 19 years	50	33.1
- 20 years	48	31.8
- 21 years	53	35.1

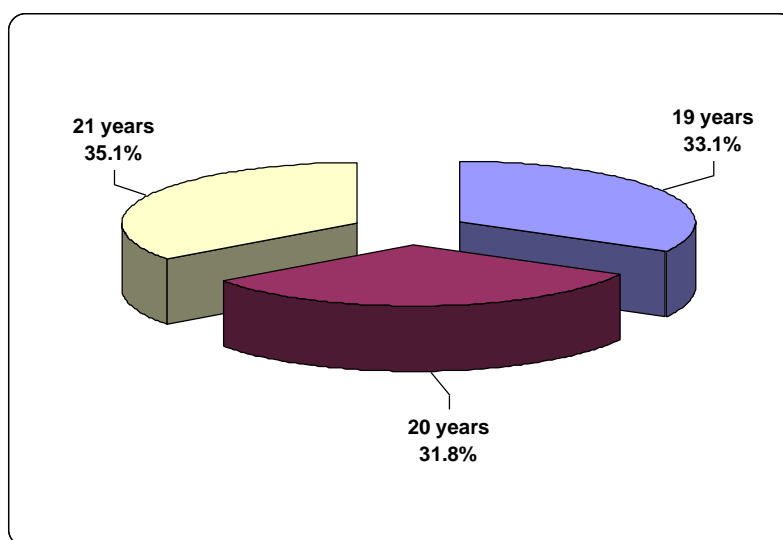


Fig (1): Distribution of samples according to age

Table (1): in this table shows the percentage of the distribution of the study group as regards the age, half of the sample were age 19 years. The highest percentage of the samples were 21 years.

Table (2): Distribution of samples according to student's achievement in the previous year

Student achievement	No. (n= 151)	%
- Good	38	25.2
- Very good	46	30.4
- Excellent	67	44.4

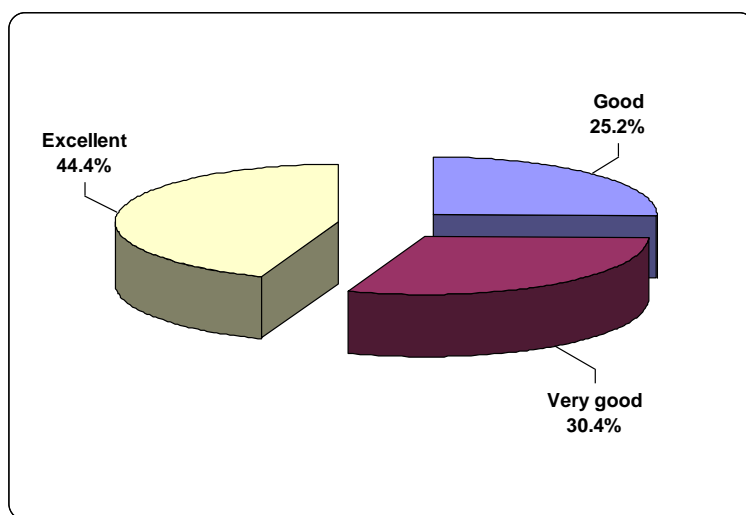


Fig (2): Distribution of samples according to student's achievement in the previous year

Table (2) & Fig (2): in this table illustrates the achievement in the previous year of the study sample, the results represents that, 44.4 % among them graded as excellent, 30.4 % were very good and 25.2 % were good.

Table (3): Distribution of samples according to student's impression about the purposes of OSCE exam:

Purposes	Strongly agree		Agree		Disagree		Strongly disagree	
	No.	%	No.	%	No.	%	No.	%
1. It provides standardized clinical assessment	37	24.5	70	46.4	30	19.9	14	9.3
2. Assessing your competency such as critical thinking, problem solving, interpersonal skills and decision making:	37	24.5	79	52.3	18	11.9	17	11.3
3. Able you to view skills as whole	40	26.5	75	49.7	19	12.6	17	11.2
4. It apply your clinical knowledge	37	24.5	78	51.7	18	11.9	18	11.9
5. It measures aspects of clinical performance	42	27.8	75	49.7	17	11.3	17	11.2

Table (3): this table reported that, students' first impression about the purposes of OSCE exam. Near half of the students (46.4 %) agreed and 24.5% of students strongly agreed that it provides standardized clinical assessment, while the impression of (9.3 %) of them that of it didn't provide standardized clinical assessment.

As regards to OSCE can assess the competency, most of them (52.3 %) agreed, (24.5 %) strongly agreed and (11.9 %) were didn't agree. In relation to purpose of the ability of OSCE to make the students view skills as whole, half of them (49.7 %) agree about this purpose, and (26.5 %) of them were strongly agree although there of them were strongly disagree.

In relation to purpose of the ability of OSCE to make the students view skills as whole, half of them (49.7 %) agree about this purpose, and (26.5 %) of them were strongly agree although there (11.2%) of them were strongly disagree.

Regarding to the impression of students about applying the clinical knowledge when using the OSCE exam, there were (51.7 %) of them agree, (24.5 %) of them were strongly agree but (11.9 %) of them were strongly disagree. The results view that (49.7 %) most of students agree that OSCE exam highlighted areas of measures aspects of clinical performance and 11.2 % of them were disagree with this impression

II- OSCE design:

Table (4): Student's impression about the objectives of OSCE exam (n=151):

Objectives of OSCE exam	Strongly agree		Agree		Disagree		Strongly disagree	
	No.	%	No.	%	No.	%	No.	%
1. Using exactly the same stations with other students:	81	53.7	57	37.8	8	5.2	5	3.3
2. You have with the same marking scheme with other students:	87	57.6	62	41	1	0.7	1	0.6
3. Clinical skills more objectives rather than subjective:	47	31.1	63	41.7	24	15.9	17	11.3

Table (4): reveals the student's impression about the objectives of OSCE exam. Concerning the using exactly the same stations with other students, it was found that 53.7% of students strongly agree for this objective. There was 5.2%, and 3.3 of them were disagree and strongly disagree respectively about that objective.

In relation to the same marking scheme with other students, the students were strongly agreed and agree with this objective by (57.6% and 41% respectively), 0.6% of them were strongly disagreed with this objective. Regarding to clinical skills more objectives rather than subjective; the students were strongly agreed and agree with this objective by (31.1% and 41.7% respectively), 15.9.% of them were disagreed with this objective.

Table (5) Student's impression about the structure of OSCE exam (n= 151):

Structure of OSCE exam	Strongly agree		Agree		Disagree		Strongly disagree	
	No.	%	No.	%	No.	%	No.	%
1. Stations in OSCE have a very specific target	57	37.7	64	42.4	7	4.6	23	15.2
2. Stations with simulated procedure	48	31.8	69	45.7	26	17.2	8	5.3
3. Detailed scripts are provided (all information give same to all students)	48	31.8	80	53.0	14	9.3	9	6.0
4. Instructions are given in written way and very specific task to complete:	68	45.0	63	41.7	14	9.3	6	4.0
5. OSCE include parts from all elements of the curriculum	53	35.1	67	44.4	24	15.9	7	4.6
6. OSCE include a wide range of skills	40	26.5	79	52.3	21	13.9	11	7.3

Table (5): illustrates the student's impression about the structured of OSCE exam. (42.2%) of the students agreed that the stations in OSCE have a very specific target; while the impression of (4.6%) of them disagree with it

As regards to stations with simulated procedure; near half of them (45.7%) agreed, (31.8%) strongly agreed and (17.2%) didn't agree with this structure. In relation to instructions are given in written way and very specific task to complete; the students view this structure as 45%, and 41.7% of them strongly agreed, agreed respectively, although there (9.3%) of them were disagree.

It is clear from this table, there are 44.4% of the students were agree with that OSCE include parts from all elements of the curriculum but there (15.9 %) of them disagreed , (4.6%) of them were strongly disagree with this structure. The results view that (52.3%) of students agree that OSCE **include a wide range of skills** while (13.9%) of them were disagree and (7.3%) them were strongly disagree with this structure

III- Measuring competency

Table (6): Student's impression about measuring competency of OSCE exam (n= 151):

Measuring competency of OSCE exam	Strongly agree		Agree		Disagree		Strongly disagree	
	No.	%	No.	%	No.	%	No.	%
1. The exam obtains a holistic prescriptive competence:	46	30.5	72	47.7	23	15.2	10	6.6
2. The OSCE in a complex combinations of knowledge, skills, attitude and values:	48	31.8	73	48.3	17	11.3	13	8.6

Table (6): shows the student's impression about measuring the competency of OSCE exam. In relation to the exam obtains a holistic prescriptive competence, the students were strongly agreed and agree with it by (30.5 % and 47.7% respectively), 15.2% of them were disagreed and 6.6% of them strongly disagreed with it. Regarding to the OSCE in a complex combinations of knowledge skills, attitude and values; near half (48.3%) of the students agreed with this criteria but (11.3%) of them disagreed with it.

Table (7): Student's impression about measuring competency versus measuring performance in OSCE exam (n= 151):

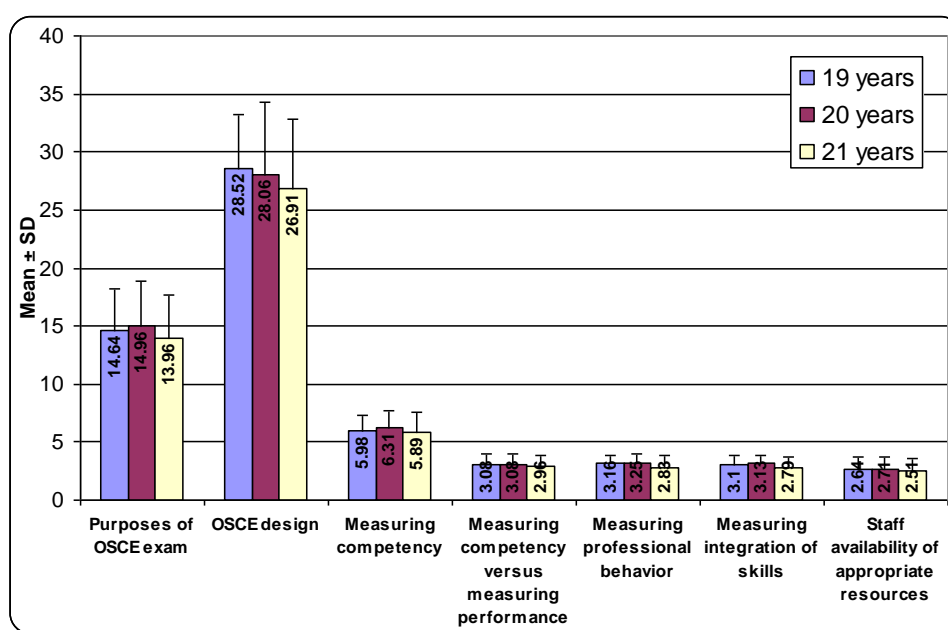
Measuring performance in OSCE exam	Strongly agree		Agree		Disagree		Strongly disagree	
	No.	%	No.	%	No.	%	No.	%
1. The exam encourage the student to behave in a socially desirable manner:	51	33.8	67	44.4	21	13.9	12	7.9
Measuring professional behavior: Apply clinical skills in safe practice	49	32.5	74	49.0	18	11.9	10	6.6
2. Measuring integration of skills: The stations situation enable you to integrate arrange of knowledge and skills:	42	27.8	77	51.0	22	14.6	10	6.6
Staff availability and appropriate resources: There are enough equipment and facilities to hold your exam:	38	25.2	47	31.1	36	23.8	30	19.9

Table (7): shows Students’ first impression about measuring competency versus measuring performance in OSCE exam. (44.4%) of the students agreed and (33.8 %) of students strongly agreed that it encouraged the student to behave in a socially desirable manner, while the impression of (13.9 %) of them that it didn't encouraged the student to behave in a socially desirable manner

As regards to measuring professional behavior by applying the clinical skills in safe practice; near half of them (49.0%) agreed with this criteria, (32.5%) strongly agreed and (6.6%) were strongly disagree. Concerning **to the station's situation enable student to integrate, arrange of knowledge and skills;** the students as (27.8%, 51%) strongly agreed and agreed respectively about this criteria, although (14.6%) of them were disagree and (6.6%) of them were strongly disagree. **Regarding** to the impression of students about **availability of appropriate resources**, there were (31.1%) of them agreed, (25.2%) of them were strongly agree but (23.8%) of them were disagree.

Table (8) The relationship between the age of studied sample and their first impression about OSCE:

Variables	Age			P-value
	19 years	20 years	21 years	
	Mean ± SD	Mean ± SD	Mean ± SD	
1. Purposes of OSCE exam	14.64 ± 3.54	14.96 ± 3.89	13.96 ± 3.69	0.347
2. OSCE design	28.52 ± 4.72	28.06 ± 6.20	26.91 ± 5.87	0.441
3. Measuring competency	5.98 ± 1.39	6.31 ± 1.43	5.89 ± 1.68	0.434
4. Measuring competency versus measuring performance	3.08 ± 0.88	3.08 ± 0.87	2.96 ± 0.94	0.771
5. Measuring professional behavior	3.16 ± 0.71	3.25 ± 0.73	2.83 ± 0.99	0.077
6. Measuring integration of skills	3.10 ± 0.79	3.13 ± 0.67	2.79 ± 0.97	0.167
7. Staff availability of appropriate resources	2.64 ± 1.08	2.71 ± 1.05	2.51 ± 1.09	0.637



Fig(3):The relationship between the age of studied sample & their first impression about OSCE

Table (8): reveals the relationship between the age of studied sample and their first impression about OSCE. The results view that there is no significant differences between the different ages of the student and their first impression about OSCE in relation to purposes of OSCE exam, OSCE design, measuring competency, measuring competency versus measuring performance, measuring professional behavior, measuring integration of skills and knowledge, and availability of appropriate resources.

Table (9) The relationship between the achievement of studied sample and their first impression about OSCE

Variables	Student achievement			P-value
	Good	Very good	Excellent	
	Mean ± SD	Mean ± SD	Mean ± SD	
1. Purposes of OSCE exam	12.16 ± 4.23	14.65 ± 3.51	15.73 ± 2.84	0.000*
2. OSCE design	25.63 ± 6.28	26.61 ± 5.69	29.87 ± 4.47	0.000*
3. Measuring competency	5.71 ± 1.86	6.07 ± 1.34	6.24 ± 1.39	0.400
4. Measuring competency versus measuring performance	2.71 ± 1.06	3.02 ± 0.86	3.24 ± 0.76	0.037*
5. Measuring professional behavior	2.79 ± 1.07	3.15 ± 0.73	3.18 ± 0.74	0.216
6. Measuring integration of skills	2.82 ± 1.01	3.00 ± 0.70	3.10 ± 0.80	0.358
7. Staff availability of appropriate resources	2.26 ± 1.20	2.83 ± 0.88	2.67 ± 1.08	0.072

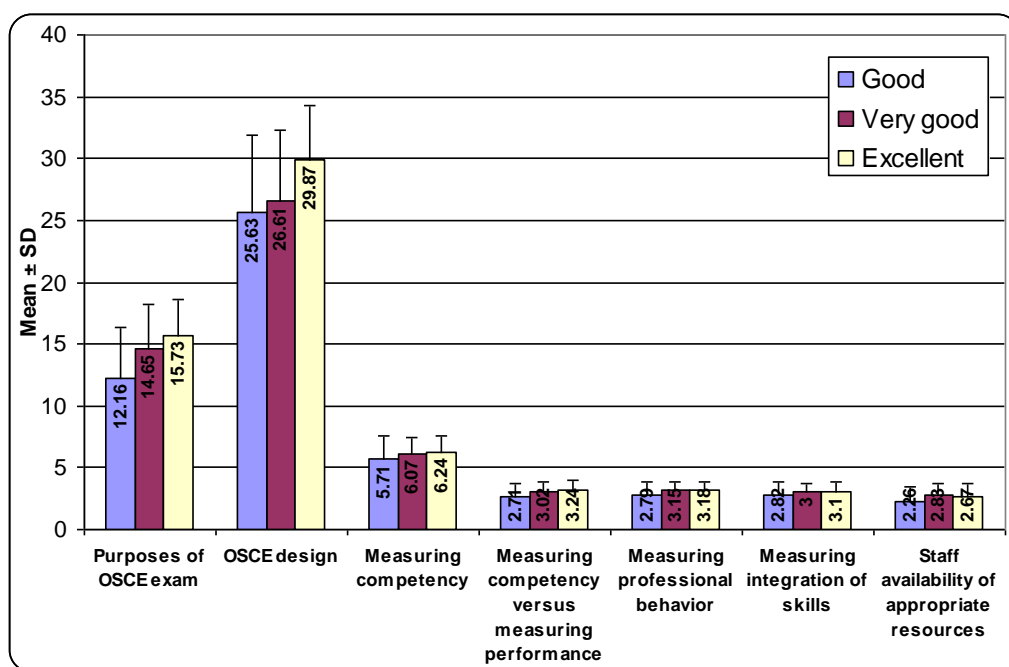


Fig (4) The relationship between the achievement of studied sample and their first impression about OSCE

Table (9): illustrates the relationship between the achievement of studied sample and their first impression about OSCE. It is clear from this table that there are highly significant difference between the studied sample's achievement and **their first impression about OSCE** as regards to purposes of OSCE exam, OSCE design, and, measuring competency versus measuring performance, while there are no significant differences in relation to measuring competency, measuring professional behavior, measuring integration of skills and knowledge, and availability of appropriate resources.

II. Discussion

An objective structured clinical examination (OSCE) is a modern type of examination often used in health sciences (e.g. midwifery, occupational therapy, orthoptics, optometry, medicine, physician assistants/associates, physical therapy, radiography, rehabilitation medicine, nursing pharmacy, dentistry, chiropractic, paramedicine, podiatry, veterinary medicine, athletic training). It is designed to test clinical skill performance and competence in skills such as communication, clinical examination, medical procedures / prescription, exercise prescription, joint mobilisation / manipulation techniques, radiographic positioning, radiographic image evaluation and interpretation of results (Parks et al., 2006, Hosseini et al; 2011).

The present study about more than half of the samples were 21 years and the achievement in the previous year of the study sample, the results represents that, less than half among them graded as excellent, one third of them were very good and less than one third were good

Standardized:

According to the view of students toward the standardized clinical assessment of OSCE, less than one third of them agree strongly that it provides standardized clinical assessment. Near half of student believed that the score was standardized and reflected actual measure of essential clinical skills. These results in agreement with **(Raheel and Naeem, 2013)** they found that over half of student believed that OSCE was standardized and 41% of the student agreed that their performance on the examination was a true reflection of their clinical skills

The findings of this study is congruent with **(Bayoumy and Yousri, 2012)** who found the agreement of students on validity and reliability of the OSCE was high, more than half for being a true measure of clinical skills, less than half being standardized, more than half being practical and useful experience versus a disagreement of less than one third. This is in context with a study found that the OSCE is reliable and valid in the context of preclinical dentistry **((Mohammad et al., 2013)**

Comprehensive:

In relation to purpose of the ability of OSCE to make the students view skills as whole, half of them agree about this purpose, and less than one third of them were strongly agree although there little of them were strongly disagree. On the same line with **(Issenberg et al., 2005), Awaisu, Mohamed and Al-Efan, 2007)**, in a cross-sectional survey conducted on a 41 students to assess perception of students in Malaysia on the use of objective structured clinical examinations, revealed almost similar results. Seventy-eight percent of students agreed that OSCE exam was comprehensive, one third agreed that it was well administered, overwhelming proportion of the students two thirds believed it was fair.

Applying the clinical knowledge:

Regarding to the impression of students about applying the clinical knowledge when using the OSCE exam, there were more than half of them agree, less than one third of them were strongly agree but little of them were strongly disagree. On the same matter, Considerable number of students more than one third agreed that OSCE highlighted areas of weaknesses in skills and knowledge while less than one third disputed this fact in the study of **(Ward & Willis, 2006), Bayoumy & Yousri, 2012).**

Measures aspects of clinical performance:

It was worth noting that half of the students view that OSCE exam highlighted areas of measures aspects of clinical performance and little of them were disagree with this impression. This congruent with **(Malecan & Ain Alahi, 2010).** illustrated that majority of the students were sure that OSCE was an acceptable method to assess practical clinical skills for undergraduate medical students. **(Bayoumy & Yousri 2012)** also reported that both students and examiners felt that the OSCE was indeed a true measure of clinical skills being evaluated. These findings are in line with previous research studies **(Takasaki et al., 2007; McWilliam & Botwinski, 2010).**

OSCE design:

Concerning the using exactly the same stations with other students, the results reveals that more than half of students strongly agree for this objective. In relation to the same marking scheme with other students, more than half of the students were strongly agreed and less than half of them were agree with this objective. This is in agreement of findings of the study of **(Parks et al., 2006)** who mentioned that in OSCEs that use several circuits of the same stations the marking is repeatedly shown to be very consistent which supports the validity that the OSCE is a fair clinical examination.

This result in agreement with **(Idris et al; 2014)** who mentioned that eighty percent of examiners and agreed that the OSCE is fair compared with traditional clinical exam. In the same context, other study **(Mater et al., 2014)** indicated that more than two thirds of students believed the time for each station was adequate and the majority of them sequence of the station was logic and appropriate. Also, **(Imani M. 2005)** showed that the majority of samples were overwhelming acceptance of the OSCE with respect to transparency and fairness.

Instruction and structure:

Findings of our study showed that more than one third of them strongly agreed that the instructions are given in written way and very specific task to complete. According to **(McWilliam and Botwinski, 2010),** added that the majority of students perceived sequence of stations as logical and appropriate further, stated that evaluation of nursing students' clinical competencies in a wide array of situations is essential to the educational process because students are exposed to various patient health issues in the clinical area.

The findings in current study are congruent with previous research on OSCEs which revealed that students were satisfied with OSCE as an assessment strategy and appreciated the learning experience. Majority agreed on all the positive aspects of exams instructions and organization, including perception of exam as well administered, well structured, fair, covering a wide area of knowledge and skills, allowed compensation of additional marks, minimized chance of failing and increased awareness of level of information needed.

III. Measuring competency

Concerning the assessing of student's impression about measuring competency of OSCE exam, In relation to the exam obtains a holistic prescriptive competence, one third of the students were strongly agreed and less than half of them were agree, less than one quarter of them were disagreed and little of them strongly disagreed with it. This is consistently is supported in study of (McWilliam and Botwinski, 2010) stated that the use of the OSCE has much to offer in evaluating clinical competencies because it reflects real-life tasks that nurses will face in the clinical arena. According to (Walsh, Bailey & Koren, 2009; Palese, et al., 2012) emphasized that OSCE can provide students with an opportunity to experience many more clinical situations than would be available in the natural clinical setting and receive feedback about their clinical performances with review of their strengths and weaknesses.

Regarding to the OSCE in complex combinations of knowledge skills, attitude and values; near half of the students agreed with this criteria but little of them disagreed with it. On the same line with (Ryan et al., 2007) also reported that the use of an OSCE ensured that all nurses were assessed using the same criteria and all examiners were confident that the variety of stations enabled an assessment of the nurses' level of competence in clinical assessment.

Concerning the relationship between the age of studied sample and their first impression about OSCE, The results view that there is no significant differences between the different ages of the student and their first impression about OSCE in relation to purposes of OSCE exam, OSCE design, measuring competency, measuring competency versus measuring performance, measuring professional behavior, measuring integration of skills and knowledge, and availability of appropriate resources.

Regarding the relationship between the achievement of studied sample and their first impression about OSCE, It is clear from this table that there are highly significant difference between the studied sample's achievement and their first impression about OSCE as regards to purposes of OSCE exam, OSCE design, and, measuring competency versus measuring performance, while there are no significant differences in relation to measuring competency, measuring professional behavior, measuring integration of skills and knowledge, and availability of appropriate resources.

Regarding to the impression of students about availability of appropriate resources, there were (31.1%) of them agreed, (25.2%) of them were strongly agree but (23.8%) of them were disagree. In congruent with our study, (Hosseini et al., 2011) who stated that the most (59.2 %) students viewed that, OSCE equipment and facilities were in a good situation. On the same line, the study was done by (Bahrei N. et al. 2003) revealed that 59.2% of the study subjects assessed a proper environment of the test.

IV. Conclusion

There are highly significant difference between the studied sample's achievement and their first impression about OSCE as regards to purposes of OSCE exam, OSCE design, and, measuring competency versus measuring performance, while there are no significant differences in relation to measuring competency, measuring professional behavior, measuring integration of skills and knowledge, and availability of appropriate resources.

V. Recommendations

1. The students should be trained for this type of exam; the best time for training is to start earlier during the semester.
2. To improve the OSCE, it is important to provide all resources for this type of exam.
3. To success OSCEs must be good planning, coordination of multiple resources, commitment to large-scale testing, and judicious use of assessment data.
4. Care must be taken to minimize the multiple sources of error and find validity evidence to justify OSCE use.
5. More research is needed about the best uses of the OSCE method and how to maximize reliability and validity.
6. Advocates of the OSCE method should continue to produce and disseminate evidence of the far reaching impact that is seen by students and educators.
7. All institutions should avoid the over reliance on any single evaluation method.

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