



Medical Education and Clinical Teaching: Simulation, OSCE and Workplace-Based Assessment



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Introduction:

Medical education in hospitals often depends on busy clinicians who were never shown how to teach: ward rounds become case presentations with no learning, trainees receive vague feedback, and progression decisions rest on impressions rather than observed performance. This Core Concept course equips clinical teachers, preceptors and programme faculty in medicine, nursing and allied health to teach at the bedside, run simulation with structured debriefing, build OSCE stations, use workplace-based assessment and support trainees in difficulty. Participants produce a Clinical Rotation Teaching and Assessment Plan for a case rotation.

Course Objectives:

- Apply adult learning principles to plan teaching moments on ward rounds, in clinics and during procedures
- Map a clinical rotation to competency-based outcomes and entrustable professional activities with defined supervision levels
- Deliver bedside teaching with the one-minute preceptor and SNAPPS microskills within normal patient care time
- Design and debrief simulation scenarios that build clinical reasoning, procedural skill and teamwork under psychological safety
- Construct OSCE stations, examiner checklists and global ratings, and set defensible pass marks
- Use mini-CEX, DOPS, case-based discussion and multisource feedback to give trainees specific feedback and document progression

Target Audience:

- Consultants and specialists who supervise residents and interns on wards, in clinics and in theatres
 - Nurse educators and clinical preceptors who orient and sign off nursing and midwifery trainees
 - Allied health clinical supervisors who oversee placements in pharmacy, physiotherapy, laboratory and imaging services
 - Programme and rotation directors who plan curricula, assessment schedules and progression reviews for trainees
 - Simulation centre and clinical skills faculty who run scenario-based sessions and OSCE circuits
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Course Outline:

Day 1: Adult Learning in Clinical Settings and the Trainee Journey

- Adult Learning Principles Applied to Residents, Interns and Nursing Trainees
- Experiential Learning Cycle on Ward Rounds, Clinics and Night Shifts
- Hidden Curriculum and Role Modelling in the Clinical Team
- Learning Climate Scan of a Hospital Rotation: Supervision, Workload and Safety
- Clinical Teacher Self-Review Against a Preceptor Behaviour Checklist

Day 2: Competency-Based Curriculum, Entrustable Activities and Rotation Outcomes

- Competency-Based Medical Education Principles and Milestone Progression
- Entrustable Professional Activities and Supervision Level Scales
- Rotation Outcome Map Linking Competency Domains to Clinical Encounters
- Spiral Curriculum Across Undergraduate, Internship and Specialty Training
- Assessment Programme Matrix: Formative Encounters Versus Progression Decisions

Day 3: Bedside Teaching, Simulation and Structured Debriefing

- One-Minute Preceptor Microskills for Busy Clinical Encounters
- SNAPPS Learner-Led Case Presentation Model
- Simulation Modality Selection: Task Trainers, Standardised Patients and High-Fidelity Manikins
- Scenario Script Design with Learning Objectives, Cues and Patient Deterioration Triggers
- Three-Phase Debriefing: Description, Analysis and Application with Psychological Safety

Day 4: OSCE Construction, Workplace-Based Assessment and Trainees in Difficulty

- OSCE Station Writing: Task, Timing, Simulated Patient Script and Examiner Checklist
- OSCE Pass Marks Using Borderline Regression and Modified Angoff Standard Setting
- Mini-CEX, DOPS and Case-Based Discussion Forms and Rater Calibration
- Multisource Feedback from Nurses, Peers and Patients on Professional Behaviour
- Early Identification and Remediation Plans for Trainees in Difficulty

Day 5: Role-Play and Build: Clinical Rotation Teaching and Assessment Plan

- Feedback Conversation Role-Play Using Ask-Tell-Ask and Reflective Questions
 - Difficult Conversation Role-Play with an Underperforming Trainee
 - Rotation Evaluation Design Using Kirkpatrick Levels and Trainee Surveys
 - Faculty Development Plan for Clinical Supervisors in a Department
 - Clinical Rotation Teaching and Assessment Plan Presentation and Peer Critique
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Skills You Will Gain:

- Bedside Teaching Microskills
- Entrustment Decision Making
- Rotation Outcome Mapping
- Simulation Scenario Scripting
- Simulation Debriefing
- OSCE Station Construction
- Standard Setting for Clinical Examinations
- Workplace-Based Assessment Rating

Why Attend This Course:

- Take back a Clinical Rotation Teaching and Assessment Plan built for a rotation you supervise
- Turn routine ward rounds and clinics into teaching without extending the working day
- Hold feedback and remediation conversations with trainees with more confidence after rehearsed role-plays
- Compare clinical supervision practice with physicians, nurses and allied health faculty from hospitals and academic centres in other health systems

Conclusion:

Clinical competence grows when trainees are observed, taught in the moment and assessed against clear outcomes. The week moves from adult learning in clinical settings, through competency-based curricula and entrustable professional activities, to bedside microskills, simulation and debriefing, then to OSCE construction, standard setting, workplace-based assessment and trainees in difficulty. The final day rehearses feedback and remediation conversations and produces a Clinical Rotation Teaching and Assessment Plan ready to discuss with a department education committee.
