

## **OSPE REPORT 2006(1)**

Minor changes should be noted for the next full OSPE.

Station 7 and 8 will be swapped around to give a logical order in procedure, with otoscopy and otostop placement prior to impression taking. This order also has the added advantage of non-greasy hands from impression material when performing otoscopy and using the otolight.

Stations 10 and 11 will continue as a double station. Station 10 will be totally dedicated to 'Pure Tone Audiometry without Masking' and Station 11 to 'Pure Tone Audiometry with Masking'.

In the past, the examination of the selected audiogram for masking encroached into Station 10. This has changed. The removal of the Uncomfortable Loudness Level test from Station 11 will now give candidates sufficient time to examine the selected audiogram, establish where there is the need for masking and perform the masking procedure within the Station 11 period.

A candidate who encounters a technical hitch during an OSPE station will, of course, be given extended time to complete that OSPE. However, in order not to disrupt the other candidates in trouble-free OSPEs, the exam will continue to the end of the planned OSPE period. Any correction of the technical hitch will create a delay while the candidate in the malfunctioning station catches up. The extra time will be absorbed in the break between OSPE stations and this should cause minimal disruption to the rest of the candidates. Then, and only then, will the signal be given for all to change to their next station.

### **Medical Aspects**

#### **OSPE station 1 Pass 85% Fail 15%**

Although most candidates used their time well there were still a few who finished the history part of this station well inside 4<sup>1</sup>/<sub>2</sub> minutes. They were usually surprised when they looked at the clock at this point. These candidates generally lost marks on empathy with the client. The station is designed to allow for a history to be taken comfortably within the time allowed without rushing.

Otherwise there were no particular problems with the majority easily establishing good rapport with the "client" and making the correct decisions.

Several candidates, after asking the "client's" name, then wasted time by enquiring for the "client's" address including the post code and also asking for the telephone number. They also invariably wanted the name and address of the general practitioner. Whereas this would be necessary information in practice, in the OSPE it is not the best use of time.

John Irwin and Val Newton

## **OSPE station 2    Pass 82% Fail 18%**

There were no consistent errors in this station. Most candidates seem to have learned that guessing wildly in this station is counterproductive.

The images were presented on a DVD this time (as opposed to Power Point last time) and this worked well. This station still has some theoretical as opposed to purely practical content and the examiners are looking at ways to avoid this. Everyone will be kept well informed of any changes.

John Irwin and Val Newton

## **DVD on errors in Audiometry**

### **OSPE Station 3**

A new DVD was presented to the candidates. The clarity and material of the DVD was well received but it became clear that for most candidates this station became a scanning exercise, with insufficient time to scan the lengthy list and pick out the appropriate error for each clip. For this reason the Chief Examiner and the Moderator decided to remove Station 3 from the master marking scheme.

Re-sit candidates were given the option to take the revised DVD on a trial basis and to feed back their comments to the Moderator.

The contents of the video clips in station 3 remained the same for the re-sits as in the previous exam. However, errors in ULL technique were excluded. The DVDs were re-mastered and contained 7 clips with 30 sec between each clip to allow for choice of answer. Three clips looked at errors in AC technique, 2 clips concentrated on BC errors and the final two clips showed masking errors. The answer grid contained only 10 choices for each clip. The six candidates interviewed after the re-sits unanimously agreed that the new DVDs were a great improvement and much fairer.

Gillian Booth and George Kirk

## **Hearing Aid Technology**

|                             |                  |                   |                  |
|-----------------------------|------------------|-------------------|------------------|
| <b>OSPE Station 5 and 6</b> | <b>Station 5</b> | <b>Pass = 96%</b> | <b>Fail = 4%</b> |
|                             | <b>Station 6</b> | <b>Pass = 98%</b> | <b>Fail = 2%</b> |

Candidates appeared to be very well prepared for this station which was reflected in the percentage that passed and achieved distinction.

In the first part of this double station, some candidates were over-complicating and looking for the given client by searching under multiple criteria and misusing the “equal to” drop down, so that they were unable to find the client.

The majority of candidates demonstrated good skill with data manipulation within Noah audiogram but some were not plotting masked bone results when requested.

'First fit' on hearing aids was completed without too much difficulty by the majority of candidates. Those candidates able to discuss additional features available on their chosen hearing aids scored extra points.

The second part of this double station was again dealt with well by the majority of candidates and they were able to demonstrate their ability to change and restore settings within their chosen hearing aid.

Only a tiny minority of candidates struggled to fit the required activity into the 10 minutes of each station.

Barry Downes and Karen Shepherd

### **Earmould Impressions**

**OSPE Station 7      Pass = 86.5%   Fail = 13.5%**

The quality of the finished impression was generally very good. Sadly, some candidates let themselves down in technique.

Some candidates had been taught to release the impression at the helix and then remove the earmould by twisting the helix and tugging the concha, which can result in a tear of the impression. Another method is to release any suction by gently pulling the pinna back and lifting below the tragus, then with the index finger at the bottom of the concha lift the impression out. Try it and see if this makes the removal easier. Thursday afternoon candidates were particularly poor. Marks were lost by using unsafe techniques such as standing whilst syringing, using two hands to hold the syringe, and pushing the syringe as deeply as possible into the ear canal. A few candidates used very poor bracing technique, or no bracing at all, one or two grasped the top of the head. It was very pleasing to note marked improvement at the re-sits.

Four candidates used Steramould; only one managed to remove the impression before time, and stated that normally they would have left this for another few minutes. Following discussion with the Chief Examiner, two candidates were brought back at the end of the session, and took the opportunity to retake the impression using Detax Flexitime.

**It was agreed that, due to time limits, 'Steramould' should be removed as a choice of material.**

Conversely, the hot weather produced a quick setting time effect on Starkey Precise 3R.

The percentage of each impression material used: 5% – Steramould; 25% – Starkey Precise; 70% - Detax Flexitime.

The Perspex domes needed to be polished with tissues between candidates and at the end of each session with impression material residue being deposited by the sweaty palms of nervous candidates

## Otoscopy and Otoblock placement

**OSPE Station 8 Pass = 90% Fail = 10%**

Most candidates were of an adequate standard, however the following were points of note:

- A medium otoblock is not always suitable.
- *Relevant* questions should be asked.
- Description of the ear following otoscopy tended to be weak. 'okay' or 'safe to continue' is insufficient for good marks.
- The ear is generally pulled upwards *not* downwards in adults.
- Hygiene must not be forgotten if the candidate uses bite blocks to demonstrate.
- It was good to see candidates offering wipes to the client to clean their hands before giving them a bite block.

Maryanne Maltby

## Pure Tone Audiometry

**OSPE Station 10 and 11**

**Station 10 Pass = 99% Fail = 1%**

**Station 11 Pass = 86% Fail = 14%**

It was noted that candidates made better use of the time available with a more positive approach to performing pure tone audiometry.

Generally the standard was good, although marks were lost again in the rhythmical presentation of the tone. Most re-sits came from Station 11 - pure tone audiometry with masking.

A different audiogram was at hand for each session. Candidates showed a good understanding on the rules of masking, however more reading up on the latest wording to Rule 3 is advisable.

One of the large schools is teaching their candidates a masking technique that starts with 3 rhythmical tone presentations at the previous threshold. If the client does not respond to 2 then the tone goes up 5dB with a further 3 rhythmical presentations until the client hears all.

The 5dB steps make the procedure lengthy; allows the client to anticipate tone presentation and could possibly be tiring for elderly clients. Although the examiners accepted that this method does obtain threshold, the HAC Code of Practice looks for dispensers to follow the BSA recommended procedures, which conforms to the Hughson-Westlake technique. It is advisable that this method is adopted.

The Uncomfortable Loudness Level test was performed well.

Gillian Booth, Tony Gunnell and Robert Rendell

## **Retubing of earmoulds**

### **OSPE Station 12**

**Pass = 83% Fail = 17%**

Most candidates made a reasonable attempt at the ear impression errors but it would be extremely difficult to pass the station unless both parts were completed to a satisfactory standard.

Two sets of identical ear moulds (left and right) were ordered for the re-sit exam and each candidate was provided with one mould and one tubing threader.

There are still candidates who are unable to tube an ear mould successfully. For example, the wrong tubing was used, tubing was not tapered and/or the tubing was left at the wrong angle, thus making the mould unusable. Several of the ear moulds were also broken by the candidates' attempts.

Helen Belcher and Maryanne Maltby

## **Hearing Aid Technology**

### **OSPE Station 13 Pas = 86% Fail 14%**

The large majority of candidates had clearly prepared well for this two-part OSPE Station and this was reflected in the high pass rate.

Those candidates who scored lower than average marks generally had greater difficulty with the second part of this OSPE Station which requires candidates to examine examples of three common faults with hearing aids. Candidates then have to select from a multiple choice question sheet both the cause of the fault and its most likely effect on the hearing aid's performance. Candidates with the lowest scores simply didn't identify the faults correctly which made it unlikely that they would still score marks for correctly stating the effect of the fault.

The provision, in some instances, of more than one example of the same fault together with a notice requesting that all the hearing aids be handled with care eliminated any problems resulting from hearing aids being damaged whilst being inspected.

Barry Downes and Karen Shepherd

## **Communication Techniques**

### **OSPE 14 Pass = 98% Fail = 2%**

Candidates had a better understanding on what the series of DVD clips was about. Last year many candidates complained about the material, but this year it ran smoothly which is shown in the pass mark

## OSPE RE-SITS

Some 47 candidates attended a morning or afternoon session on 1<sup>st</sup> August for the re-sit examination. Of the 47 candidates, 23 sat only one station, 20 sat 2 stations and 3 sat three stations. One candidate required a full re-sit and also failed the theory, therefore could not be offered an early full re-sit.

The 47 offered selected re-sits fared as follows:

| <b>Station Number</b> | <b>1</b> | <b>2</b> | <b>5</b> | <b>6</b> | <b>7</b> | <b>8</b> | <b>10</b> | <b>11</b> | <b>12</b> | <b>13</b> | <b>14</b> |
|-----------------------|----------|----------|----------|----------|----------|----------|-----------|-----------|-----------|-----------|-----------|
| Number offered re-sit | 7        | 8        | 4        | 2        | 13       | 8        | 1         | 11        | 17        | 2         | 2         |
| Number passing        | 7        | 7        | 4        | 2        | 12       | 5        | 1         | 10        | 12        | 2         | 2         |
| Number failing        | 0        | 1        | 0        | 0        | 1        | 3        | 0         | 1         | 5         | 0         | 0         |

### **In conclusion**

Of the 47 candidates who re-took part of the OSPE, 77% passed