

# **Internationally Qualified Nurses Clinical Competence Assessment Handbook**

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# Introduction

The Nursing Council of New Zealand (the Council) is the regulatory authority responsible for the registration of nurses in Aotearoa New Zealand. The Council's primary function is to protect the health and safety of members of the public by ensuring that nurses are competent and fit to practise. A key element of this process is the registration of all nurses, both domestic graduates and internationally qualified nurses (IQNs). The [Health Practitioners Competence Assurance Act \(HPCA\) 2003](#) (HPCA Act) outlines the role and responsibilities of the Council.

In 2023, the Council introduced a new process for those IQNs who require a test of competence before being registered. IQNs applying now to the Council will, at the direction of the Council, undertake the following tests of competence:

- a. an online theoretical examination
- b. a clinical competence assessment.

This handbook provides detailed and essential information for eligible candidates who have passed the online theoretical examination and have been invited to complete the clinical competence assessment.

## Clinical competence assessment

The clinical competence assessment includes:

- a. a two-day orientation and preparation course, and
- b. an Objective Structured Clinical Examination (OSCE).

### Orientation and preparation course (OPC)

This course develops awareness of specific characteristics of nursing practice in Aotearoa New Zealand and builds on content introduced in the preliminary online learning course. The course will:

- introduce you to the specific and unique aspects of nursing practice in Aotearoa New Zealand, such as cultural safety, relational and whānau-centred care, and tikanga,
- provide an overview of the Aotearoa New Zealand health system and the legal requirements when working as a nurse in Aotearoa New Zealand,
- enhance your skills in communicating and escalating nursing issues effectively,
- provide you with an important opportunity to become familiar with the clinical equipment and the format of the OSCE.



# Objective Structured Clinical Examination (OSCE)

The OSCE is a well-established method of assessing competence and is used in internationally qualified nurse registration processes in multiple countries including Australia, Canada, and the United Kingdom. In Aotearoa New Zealand, it objectively assesses competence across the domains outlined in the [registered nurse scope of practice](#). The OSCE assesses the application of your clinical knowledge and skills in practice to ensure you can provide safe competent care as a nurse in Aotearoa New Zealand.

The OSCE:

- is designed to assess your ability to apply your nursing knowledge and skills in a simulated clinical setting,
- is set at the level of a registered nurse as they enter the profession,
- will not assess advanced nursing or specialist skills,
- will relate to current best practices in Aotearoa New Zealand.

This is a **regulatory** assessment. This means that:

- You will **not** receive any coaching, prompting, feedback or further explanations of the required knowledge and skills for nursing practice from the examiners before, during or after the OSCE.
- You must demonstrate the skills rather than just verbalise your actions.

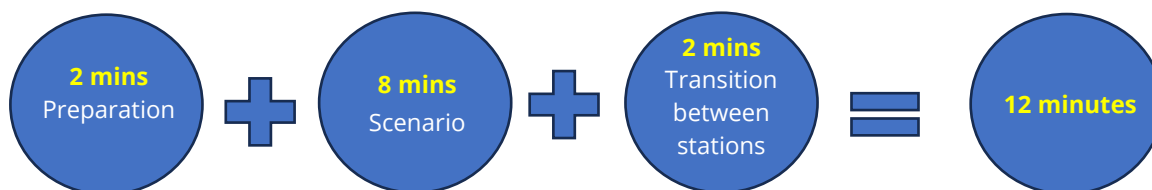
## OSCE stations

You are required to complete ten (10) OSCE stations. Each station will cover a scenario representing current nursing practice in Aotearoa New Zealand. The stations are listed below:

- A. Mental health assessment
- B. Physiological assessment
- C. Specific physiological assessment
- D. Professional responsibility
- E. Emergency management
- F. Clinical skills
- G. Medication administration
- H. Communication and teamwork
- I. Planning nursing care
- J. Managing the deteriorating patient



Each OSCE station lasts 12 minutes, divided into a 2 + 8 + 2 minutes format. You will be given two (2) minutes to read the candidate instructions, followed by eight (8) minutes to complete the scenario for each station and two (2) minutes to move to the next station.



The OSCE scenarios will assess your clinical competence, nursing knowledge and skills. This will include, (but is not limited to), the following:

- appropriate escalation of clinical concerns
- clinical documentation
- clinical reasoning and decision making
- clinical skills
- cultural safety
- direction and delegation
- infection control practices
- interpersonal communication
- interprofessional communication
- leadership
- managing nursing cares
- managing a patient in distress
- nursing assessment
- patient identification
- professional, legal, and ethical responsibilities
- safe medication administration (including drug calculation)

## Eligibility period

You will receive an invitation from the Council to enrol in the clinical competence assessment. You will have 18 months from the date of the Council's initial invitation to complete the OSCE. If you are unsuccessful after three (3) attempts, or the allowed 18-month timeframe from the Council's initial invitation has expired, your application for registration will close.

**Note:** If you are unable to meet that timeframe due to exceptional circumstances, please contact your Nursing Council case manager, as you may be eligible for an extension of time.



## Proof of identity

When attending the orientation and preparation course and OSCE, you must present primary and secondary identification.

Table 1 – Primary and secondary identification

Primary identification	The only accepted primary identification is your current passport which must <ul style="list-style-type: none"><li>• be government-issued</li><li>• have your name, photo and signature</li></ul> Note that the name used on application to the Council, needs to match your current passport ID.
Secondary identification	The secondary identification must have your name and signature OR your name and a recent recognisable photo. Examples are: <ul style="list-style-type: none"><li>• driver's license</li><li>• national/state/province identification card</li><li>• bank card (credit/debit/ATM)</li></ul>

**Note:** it is important the names on your two forms of identification match the name held by the Council. If these names do not match, your identity will not be verified, and you will not be able to attend the orientation and preparation course or undertake the OSCE.

**Note:** The Council manages any requested name changes before enrolment for the orientation and preparation course and OSCE. For the change to be processed, the Council will require one (1) document with your updated legal name, to be verified as a true copy and then uploaded to your MyIQN portal. Please visit your [MyIQN portal](#) for further details.

## Provider

The Nurse Maude Association (Nurse Maude) is the Council-accredited provider that subcontracts the orientation and preparation course to the University of Canterbury. [Nurse Maude](#) is a non-profit organisation that is a trusted and longstanding provider of healthcare services.







Photo: Nurse Maude Simulation and Assessment Centre

The OSCEs will be held at the Nurse Maude Simulation and Assessment Centre (NMSAC), and the orientation and preparation course at the University of Canterbury, both are located in Christchurch, New Zealand. [Christchurch](#) is the largest city in the South Island of Aotearoa New Zealand and has an international airport.

## Booking and costs

Upon successful completion of the online theoretical examination, an invitation will be extended to you by the Council to enroll in the clinical competence assessment. Please refer to the [NMSAC website](#) for detailed booking instructions. Remember to consider [Aotearoa New Zealand public holidays](#) and time differences between Aotearoa New Zealand and the country where you currently live when booking for your clinical competence assessment.

Booking the orientation and preparation course is included in the first clinical competence assessment booking. Payment covers the two (2) components of the assessment:





- 1) the orientation and preparation course and
- 2) the OSCE.

If you need to re-sit the OSCE, repeating the orientation and preparation course is highly recommended but not required. You may repeat the course at your discretion and cost.

The current fees for the clinical competence assessment are detailed on the [Nursing Council website](#).

## Refund

There will be no refund (except for approved extenuating circumstances) for the orientation and preparation course or the OSCE for any reason, including but not limited to:

- a. failure to reschedule and/or cancel a scheduled booking.
- b. failure to appear for a scheduled booking (excluding approved extenuating circumstances).

## Non-attendance

Failure to attend an OSCE is considered a failed attempt. This will be counted as one (1) of the three (3) attempts allowed. Fees for failed attempts are non-refundable.

## Late arrival

Arriving late may result in missing your OSCE appointment. If you arrive late and the OSCE has commenced, you will NOT be allowed to enter to undertake the OSCE. If you arrive late and it is before the OSCE has commenced, the NMSAC staff will decide if you may enter or not. The NMSAC staff will consider factors that include, but are not limited to:

- the time of your arrival,
- how many of the pre-examination processes have already commenced and/or been completed,
- how disruptive your late entry may be to other candidates.

The decision made by the NMSAC staff is final.



## Changes to the scheduled booking

You can reschedule your OSCE date if appropriate notice is given (see table 2 below) or if the reason for rescheduling is due to extenuating circumstances (refer to the section on extenuating circumstances).

If you need to change your booking, please visit the [NMSAC booking portal](#). Please note that all changes are non-refundable.

Table 2 - Changes to bookings and fees

Changes	Costs
≥ 6 weeks before the booked OSCE date	No additional cost
>7 days to 6 weeks before the booked OSCE date	Administration fee
≤ 7 days before the booked OSCE date	No change permitted except for extenuating circumstances

If NMSAC experiences exceptional circumstances requiring changes to your booking or the cancellation of the OSCE, you will promptly receive a written notification and the reason for the booking change or cancellation. You will also be offered another OSCE appointment ideally within two (2) weeks of the original booking or at a mutually agreed time at no extra cost.

## Extenuating circumstances

You may apply to the Council for approval of extenuating circumstances if you cannot attend or complete your scheduled OSCE due to an accident, sudden illness, bereavement, or similar emergency.

For example:

- acute illness or injury (such as hospital admission, onset of serious illness)
- loss or bereavement (such as the death of a close family member)
- hardship or trauma (such as being a victim of crime, severe disruption to domestic life)
- natural disaster

An application for extenuating circumstances must be submitted in writing to the **Council** up to seven (7) days after a booked OSCE. An application for extenuating circumstances may be considered after you provide evidence that you could not attend or complete your scheduled OSCE due to circumstances beyond your control. The supporting documentation provided must include sufficient detail to assist the **Council** with its decision-making, for example:

- a medical certificate (must explicitly state that you were not fit to undertake the OSCE and must specify the actual date/s)
- a police report



- a statutory declaration.

If the Council approves your application for extenuating circumstances:

- a. you can rebook for a further OSCE attempt at no additional charge,
- b. your original booking will not be considered a failed attempt.

**Note:** If you decide not to proceed with the clinical competence assessment due to extenuating circumstances, please advise the Council in writing. You may be eligible to receive a refund (minus an administration fee).

## Useful resources

To prepare for your OSCE, the Council recommends you familiarise yourself with the following:

### Professional resources:

- [Competencies for registered nurses](#)
- [Code of Health and Disability Services Consumers' Rights](#)
- [Code of Conduct for Nurses](#)
- [Health Practitioners Competence Assurance Act \(HPCA\) 2003](#)

### Nursing Practice:

- [Basic Life Support algorithm](#)
- [ISBAR handover framework](#)
- [World Health Organisation five moments of hand hygiene](#)

## Day of the OSCE

Please familiarise yourself with the location of the NMSAC and allow plenty of travel time as traffic can be busy and lead to delays. Arriving late could result in missing your OSCE appointment. You will not be allowed to enter the OSCE after it has started.

Please do not enter or contact (unless in an emergency) NMSAC prior to the day of your OSCE.

Friends or family members, including children, are not permitted to wait for you in or outside the building while you take the OSCE. However, there are several cafes, restaurants, and a shopping centre within a short walking distance from the NMSAC, where they can wait comfortably.



## OSCE day registration

Please wait outside in the NMSAC assembly area until you are collected by the NMSAC staff to begin registration. **You must remain outside the building.** Please note any candidate found in another area of NMSAC without the permission from the NMSAC staff may be in breach of the Council's misconduct policy and be ineligible to undertake the OSCE.

The NMSAC team will guide you and the other candidates from the assembly area outside the building. You will be required to provide the following:

- a. Valid and current passport as primary identification
- b. Secondary identification as listed in the 'proof of identity' section

**Note:** The name in your primary and secondary identification must match the name held by the Council. If the names do not match, your identity will not have been verified, and you cannot attend the orientation and preparation course or undertake the OSCE. You will forfeit the fee, and this will also be counted as your first attempt to complete the OSCE and recorded as a fail.

## Fitness, consent and confidentiality declaration

As part of the registration process, you will be required to sign a fitness, consent, and confidentiality form to declare that:

- a. you are physically and mentally fit to undertake the OSCE,
- b. you consent to a video recording of your performance during the OSCE
- c. you will keep all OSCE content and related information confidential
- d. you have read and understood the instructions in the candidate handbook
- e. you will act in a professional manner at all times while undertaking the OSCE
- f. you may be asked to leave the OSCE venue if your behaviour is considered unprofessional.

**Note:** If you are unwell on the day of the OSCE (and you declare this) or suffer a medical event during the OSCE, you may be eligible to apply for extenuating circumstances (refer to the extenuating circumstances section).

### Confidentiality

The OSCE is made available to you as a candidate solely for the purpose of your assessment. You **must not** disclose, publish, reproduce, or transmit any details in whole or in part, in any form or by any means, including visual, verbal, written, electronic or mechanical, for any purpose. If you do so, this may result in severe consequences, including disqualification from the OSCE, subsequent re-sit, future registration, and potential legal action.



## Personal belongings

You must only bring essential items with you to the OSCE. Personal items are not allowed inside the OSCE circuit. Upon registration, you must hand over all personal belongings including identification documents, phones, tablets, pagers, smartwatches, and other electronic devices. Please ensure all electronic devices are turned off before the NMSAC team stores them. Access to your belongings will not be permitted during the OSCE. You can collect your belongings at the end of the OSCE as you leave the NMSAC. Your belongings will be stored securely but Nurse Maude and the Council take no responsibility for any lost, damaged, or stolen belongings.

**Note:** Please do not bring your travel suitcases to the NMSAC.

## Special requests

If you have specific medication or medical devices necessary for your health, some are permitted inside the OSCE circuit. Special requests must be made at least 21 days before your scheduled OSCE and are made to the NMSAC. Any special request not approved will not be permitted during the OSCE. You will receive the decision at least seven (7) days before the OSCE. If you have not had your special request approved, you will not be permitted to bring your medication or medical devices into the OSCE circuit.

General principles for special requests are:

- you must be fit and well enough to sit the OSCE,
- you must be able to self-manage throughout the OSCE,
- special requests must be safe and have no impact on other candidates,
- special requests must not compromise the integrity of the OSCE,
- clinical assessment standards are not adjusted as a result of the special requests,
- extra time is not permitted in the OSCE.

Table 3 - Council approved special requests

<b>Accepted OSCE supports</b> <ul style="list-style-type: none"><li>• <i>As declared at reception, you may use your usual medical devices/prescriptions and/or assistive technology to maintain overall health and well-being during the OSCE.</i></li><li>• <i>All assistive devices and medications are inspected on entry to the NMSAC.</i></li><li>• <i>Undeclared items are not permitted.</i></li></ul>	
<b>Medications and food</b>	<ul style="list-style-type: none"><li>• Prescribed medication (and necessary associated delivery equipment)</li><li>• Glucose tablets (does not include hard candy)</li><li>• Eye drops – box must be removed.</li><li>• Nasal drops or spray – box must be removed.</li><li>• Lozenges and cough drops</li></ul> <p><b>Note:</b> All medications must be unboxed and unwrapped. Additionally, medications should not be in a bottle or container, unless the original packaging <u>explicitly</u> states</p>



	<p>that they must remain in it (for instance, Nitroglycerine/GTN tablets due to sensitivity to air). Medications will undergo inspection by the NMSAC team.</p> <p>All medications are carried with you in a transparent plastic bag and handed to the examiner when entering each OSCE station.</p>
<b>Assisted devices</b>	<ul style="list-style-type: none"> <li>• Continuous Glucose Monitor (CGM) **</li> <li>• Medic alert bracelet **</li> <li>• Hearing aids</li> <li>• Prescription glasses</li> </ul> <p>Medical devices must be attached or remain close to your body and remain inaudible throughout the OSCE.</p>
<p><b>**Note:</b> You are not permitted to bring any devices that require being plugged into a computer. If the medical device includes an accompanying external remote-control device, including a cell phone, the remote-control device will not be allowed in the OSCE circuit.</p>	

## Dress code

You must wear professional clinical attire throughout the entire OSCE. Should you have any special dress code requirements, please seek approval from the NMSAC team. You can indicate your special dress requirements through the [NMSAC booking portal](#).

Table 4 – OSCE dress code

Dress Code	Do's	Do not's
Clothing	Professional clinical attire (i.e. uniform or scrubs)	Jeans Sportswear (i.e. tracksuits, pants or tops) Short skirts Long sleeved tops Sleeveless tops Low or revealing cut tops Ripped or torn clothing Coats Hats
Shoes	Comfortable shoes appropriate for a clinical setting	Open-toed shoes Boots High heels
Hair	Short hair: tidy Long hair: tied back in a bun, braid, or ponytail to comply with infection control guidelines	Short hair: Unkempt Long hair: down
Fingernails	Cut short in length (no nail extensions) No nail polish or powder	Long nails Nail polish or powder Nail extensions
Jewellery	No visible jewellery Plain wedding band ONLY	Any other visible jewellery
Others	Head scarf/turban  <b>Note:</b> If you wear a head scarf/turban, please ensure that it is appropriate in colour (plain)	



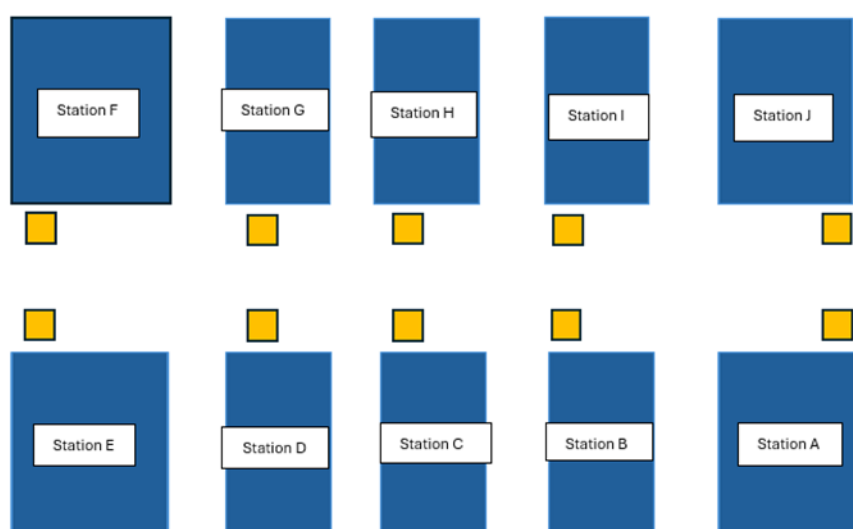


black or navy), and it must be tucked into the collar of your uniform or scrubs.

## OSCE circuit

There are ten (10) OSCE stations, which will be clearly identified alphabetically from one (A) to ten (J). At registration, you will be assigned a letter corresponding to your starting station. For example, if you are assigned number B you will start at station B, progress to station C, then D and so on to station J, and finish at your tenth station, A. You are required to complete all ten (10) stations.

The NMSAC staff will guide you to your starting position. Please sit on the chair provided outside each station and wait for the announcement signalling the start of the two (2) minute OSCE reading time. You will start and finish the OSCE scenarios simultaneously with the other candidates and move through each station in sequence.



## Notepad

Outside each OSCE station, there will be a notepad available to you. During the two (2) minutes allocated for reading, feel free to utilise the notepad for taking notes, plan your approach to the scenario, or list the key skills you need to demonstrate. Remember to leave any notes related to the scenario with the OSCE examiner before you exit the room.

## Candidate instructions

You will receive written candidate instructions before entering each OSCE station. The candidate instructions serve as a guide for you to understand the requirements for each clinical scenario and what you will be assessed on. You will be given two (2) minutes to read the candidate instructions and any supporting clinical documentation e.g. vital signs attached to the scenario. Carefully read the candidate instructions before entering each station. A laminated copy of the scenario will also be available inside the room. An example of a candidate instruction has been provided for you below.

Table 5 - Example candidate instructions

Please note that this is as an EXAMPLE ONLY.	
<b>Candidate instructions</b>	
<b>Practice setting:</b> You are a registered nurse working a morning shift in a general practice clinic.	
<b>Handover information</b>	
Identification	Your patient is John Dory, a 23-year-old, New Zealand European, male. Date of birth: 25-12-2000, National Health Index (NHI): IQN111
Situation	John has recently returned to Aotearoa New Zealand after studying overseas. He has recently been diagnosed with asthma and has been prescribed a salbutamol (Ventolin) inhaler.
Background	He has a history of allergic rhinitis, eczema, and hay fever. John has reported a family history of asthma, indicating that both parents have been diagnosed with the condition and are currently on inhalers.
Assessment	Another nurse has already taken John's vital signs, which are all within normal range.
Recommendation	Provide patient education on asthma management, including using an inhaler with a spacer.
You will be assessed on your ability to: a. provide patient education.	
<b>Note:</b>	
<ul style="list-style-type: none"><li>For this scenario, you are <u>NOT</u> required to retake the patient's vital signs.</li><li>A copy of John's most recent vital signs is attached.</li></ul>	



# Clinical documentation


Some candidate instructions will include clinical documentation that may be attached to the candidate instructions or found inside the station. Some forms will be marked, while others will serve as reference material. Examples of clinical documentation you may encounter during the OSCE include (but are not limited to) the following:

- Clinical notes
- Medication chart
- Neurological observations form
- Neurovascular observations form
- Nursing care plan
- Surgical consent form
- Vital signs form

The candidate instructions will specify which forms must be submitted to the examiner for marking. An example clinical form has been provided for you below.

Figure 1 1 - Example clinical form


Please note that this is as an **EXAMPLE ONLY**.



**Te Kaunihera Tapuhi o Aotearoa**  
**Nursing Council of New Zealand**

Patient Name: John Dory  
Date of Birth: 25-12-2000  
NHI: IQN111

## Vital Signs Form

Date/ Time	Temperature (Celsius)	Pulse Rate	Respiratory Rate	Blood Pressure (mmHg)	Pulse Oximeter	Pain	Name & Designation	Signature
xx/xx/xx 1800	36.2C	62	16	110/70 <i>mmHg</i>	100 % <i>room</i> <i>air</i>	0/10 <i>No</i> <i>pain</i>	Jane Doe Registered Nurse #NUR2705	



## OSCE station set-up

After completing the two (2) minute reading time, you will be informed you may enter the room and begin the scenario. You have eight (8) minutes to complete the scenario. There will be an audible signal - bell or beep, at the six (6) minute mark. This signal means you have two (2) minutes left to complete the scenario. A second signal will be heard at the end of eight (8) minutes, signalling the scenario is finished. When you hear the second signal, you **must** stop what you are doing, leave the station and move to the next station.

**Note:** If you are unable to complete the scenario within the allocated eight (8) minutes, you will not be given extra time.

If you complete the station before the allocated eight (8) minutes, you must remain inside the station room until you hear the signal indicating the scenario is finished.

## Clinical setting

The OSCE scenarios will simulate different clinical settings. To address the patient's health issue, you may need to interact with patients, whānau/family and/or healthcare team members. The clinical settings will include (but are not limited to) the following: acute hospitals, aged residential care, community, and primary health clinics.

## Patient types

The OSCE will use a variety of patient types. During the scenario, you will interact with an actor (who will follow a script), a manikin or a task trainer.

### Actors

Actors simulate the role of a patient, whānau/family or other healthcare team members in the OSCE. As a patient they play a specific role, displaying predetermined behaviours, and engage with you in a standardised manner. These trained individuals undergo extensive briefings and rehearsals to effectively simulate clinical encounters during your OSCE.

### Manikin

A manikin is a life-sized anatomical human model in the role of patient. Unless otherwise specified, you should treat the manikins with the same care, respect, and professionalism as you would real patients.



## Task trainer

A task trainer is a model that represents a part or region of a human body, such as an arm, leg or abdomen.

## Equipment

You will have access to all the necessary equipment to complete the scenario effectively. The equipment will be conveniently displayed or accessible in the room. If you do not find specific equipment in the room, it means it is not needed for the scenario.

## Candidate assistance

If you need assistance during the OSCE, raise your hand, and a NMSAC team member will assist you promptly. Should you require an urgent bathroom break, a NMSAC team member will show you to the bathroom and escort you back to your station to resume the OSCE. The time limit will not be extended. If you miss the entire scenario, no time adjustments will be made, and the examiner will note your absence.

## Misconduct and cheating

Misconduct and cheating will be treated seriously by the Council. Misconduct means doing something that harms the fairness, safety, or reputation of the OSCE and its associated orientation and preparation course. Below, you'll find examples of what is considered misconduct and cheating.

- a. Failure to follow instructions
- b. Disruptive behaviour
- c. Unauthorised communication
- d. Violation of OSCE rules
- e. Unauthorised collaboration
- f. Cheating
- g. Impersonation

If there is evidence of misconduct or cheating, penalties will apply to you as a candidate. Serious misconduct could lead to immediate disqualification from the nursing registration process in Aotearoa New Zealand. Any criminal activities will be reported to the appropriate authorities. Levels of misconduct are outlined below.

*Table 6 – Levels of misconduct*



Misconduct	Description	Level of seriousness	Penalty	Managed by
<b>Failure to follow instruction</b>	Not following the instructions provided by the NMSAC team	<b>Minor</b>	Warning to candidate by the <b>NMSAC team</b>	The NMSAC <b>The NMSAC team logs incident/outcomes in the record</b>
<b>Disruptive behaviour and/or disregard for rules/ people</b>	Behaviour that disrupts the OSCE environment or interferes with the performance of other candidates.	<b>Minor</b> (unintentional and quickly corrected)	Warning to candidate by the <b>NMSAC team</b>	The NMSAC <b>The NMSAC logs incident/outcomes in the record</b>
<b>Unauthorised communication</b>	Communicating with other candidates, external individuals, or using electronic devices to seek or provide assistance during the OSCE.	<b>Misconduct</b> (intentional and/or behaviour persists)	Disqualified from current OSCE attempt. <b>The NMSAC team manages incident, informs candidate, and reports incident to the Council.</b>	The NMSAC and the Council <b>The NMSAC reports the incident to the Council.</b>
<b>Unauthorised collaboration</b>	Actively participating in or facilitating the misconduct of another candidate. This could involve sharing answers, providing unauthorised assistance, or engaging in any behaviour that aids someone else in violating OSCE rules or ethical standards.	<b>Serious misconduct</b> (intentional / calculated and harmful to others/ OSCE) process and reputation)	Disqualified from current nursing registration application. <b>The NMSAC team informs the candidate and reports the incident to the Council</b>	The NMSAC and the Council <b>The candidate notified by the Council.</b>

## After the OSCE

### Marking the OSCE

Each OSCE station is assessed by an examiner who will be in the room. The OSCE examiner is a qualified and experienced healthcare professional, educator, or clinical expert who is responsible for administering the OSCE station and assessing your individual OSCE performance based on predefined assessment criteria specific to each station. Assessment criteria have been mapped to the [registered nurse competencies](#).

### Notification of results

Your results will not be available immediately after the OSCE as they need to be processed, calculated and verified by **the Council**. Feedback on your individual performance will not be provided.

You can expect to receive an email notification **from the Council** within **six (6) weeks** of completing the OSCE, informing you of your pass or fail status and outlining the next steps





you need to take. This notification will be sent to the email address you provided to the Council during your application process.

## Pass

If you are successful, the Council will send you an email detailing the next steps you need to take to apply for an annual practicing certificate (APC).

## Re-sits

If you are unsuccessful, you have two (2) further attempts to resist the OSCE (a total of three attempts). There is no mandatory stand-down period required between attempts. You must complete all ten (10) stations for every attempt. If you are unsuccessful after three (3) attempts, or the 18-month timeframe from the Council's initial invitation has expired, your application for registration will close.

## Procedural review

Only procedural matters are eligible for appeal. The Council does not accept appeals based on OSCE failure.

You may request a procedural review, within 7 days of receiving your OSCE result, if there is evidence that you were significantly disadvantaged if:

- the instructions and procedural requirements set out in the handbook are not being followed.
- the instructions and procedural requirements as specified in correspondence to the candidate are not being followed.

The following are not reasons for a procedural review:

- disagreement about the standards set by the Council for the OSCE
- disagreement by the candidate about the marking for any section or whole of the OSCE
- personal or other reasons that impacted on the candidate's ability to undertake or prepare sufficiently for the OSCE.



## Data retention

In the OSCE stations, there will be cameras and microphones recording your OSCE. NMSAC will securely store your OSCE data, including video and audio recordings. The recordings will be securely disposed within one (1) year from the date of your OSCE.

## OSCE candidate rules

1. You are not allowed to contact or attempt to contact NMSAC's staff before or after the OSCE for any reason except to:
  - a) make a special request regarding medication or medical devices necessary for your health,
  - b) seek approval for special dress code requirements,
  - c) advise of an exceptional circumstance that would impact your ability to attend your booked OSCE.
2. You are prohibited from entering the NMSAC building before registration. Unauthorised access to the NMSAC building before your scheduled OSCE will be considered misconduct.
3. You must adhere to the instructions provided by the NMSAC team. Failure to comply with such instructions will be regarded as misconduct.
4. You are strictly prohibited from attempting to obtain information about the OSCE from previous candidates who have completed the OSCE.
5. You are strictly prohibited from selling or attempting to sell any information associated with the OSCE. This includes but is not limited to details about the OSCE setup, the OSCE process, OSCE questions, and OSCE answers.
6. You must not bring any unauthorised material into the OSCE circuit, including but not limited to electronic devices, reference materials, and food (except by prior agreement, see special requests section).
7. You are strictly prohibited from copying OSCE items for any purpose. You must surrender any scenario-related notes to the OSCE examiner before exiting the OSCE station.
8. You are not allowed to seek help from any other party in answering items, whether in person, by phone, text, or email, during the OSCE, including during breaks.
9. You are not allowed to communicate, assist, or provide an unfair advantage to other candidates during the OSCE.
10. You are not allowed to remove any OSCE materials, equipment, or documentation from the NMSAC rooms/building; this includes any note paper.
11. Unauthorised recording of any part of the OSCE, including audio, video, or photographs, both inside and outside the NMSAC, and subsequently posting it on



social media or sharing it with others, is strictly prohibited. This rule applies to you and any individuals accompanying you to and from the OSCE.

12. Any conduct or behaviour that disrupts the OSCE process, compromises its fairness, or disturbs others is strictly prohibited. This includes but is not limited to bribing or attempting to bribe any staff associated with Nurse Maude, excessive noise, unprofessional conduct, cheating or attempted cheating, failure to follow instructions, the use of disruptive electronic devices, and any form of aggressive or threatening behaviour. Disruptive conduct not only disrupts the assessment process but also undermines its integrity and may result in disqualification from the OSCE.
13. You are prohibited from reconstructing OSCE items for any purpose after the OSCE. This includes using your own memory or relying on the memory of others who have taken the OSCE.
14. If you observe any irregular or unprofessional behaviour or misconduct that violates the OSCE candidate rules and regulations, you are obligated to report it to a NMSAC team member and fully cooperate with any subsequent investigation.
15. You are required to offer reasonable assistance to any investigation conducted by the Council concerning a suspected violation of the OSCE candidate rules or any other investigation deemed necessary.
16. Impersonation, where you attempt to take the OSCE on behalf of another candidate, is strictly prohibited. Both the person impersonating, and the candidate being impersonated can face severe consequences, including disqualification from the OSCE, subsequent re-sit, future registration, and potential legal action.
17. You must maintain strict confidentiality regarding all aspects of Nurse Maude and the OSCE, both during and after it. This encompasses not disclosing or discussing any information related to the OSCE, such as its setup, process, questions, or answers. This prohibition extends to various forms of communication, including verbal, written, online posting, or discussions on the internet and social media. You must refrain from sharing this information with anyone, including current or future candidates, colleagues, friends, family, and other organisations.



# Glossary

<b>Actor</b>	A person who simulates the role of a patient, whānau/family or other healthcare team members in the OSCE.
<b>Candidate</b>	A person who has received an invitation from the Council to enrol in and complete an OSCE.
<b>Candidate instructions</b>	A document provided to each candidate before they enter each OSCE station. It outlines essential information related to the scenario.
<b>Clinical competence assessment</b>	Refers to the orientation and preparation course and the OSCE.
<b>Examiner</b>	A qualified and experienced healthcare professional, educator, or clinical expert who is responsible for assessing and evaluate the performance of the candidates during the OSCE based on predefined assessment criteria from the Council.
<b>ISBAR</b>	A structured communication tool used for effective and concise communication during handovers or interactions involving patient care. ISBAR is an acronym for <b>I</b> dentification, <b>S</b> ituation, <b>B</b> ackground, <b>A</b> ssessment and <b>R</b> ecommendation
<b>National Health Index (NHI)</b>	NHI is a unique number that is assigned to each person who receives healthcare in Aotearoa New Zealand.
<b>OSCE circuit</b>	Consists of ten designated rooms, labelled numerically from one (1) to ten (10), with each room serving as an individual OSCE station. In the OSCE circuit, candidates will begin and finish the OSCE at the same time as the other candidates and move through each station in sequence.
<b>NMSAC team</b>	Nurse Maude Simulation and Assessment Centre staff who guide candidates through the OSCE.
<b>Patient</b>	An individual who actively seeks and engages in the process of obtaining healthcare services, products, or information for themselves or on behalf of others.
<b>Scenarios</b>	A clinical scenario makes the clinical relevance of the situation being assessed explicit. It ensures that candidates seek the necessary information from within the scenario (reflecting real-life practice) and apply their knowledge and skills to a particular situation rather than only recalling facts or relying on rote responses.
<b>Stations</b>	Stations represent the Council-approved topic and/or domain areas that must be covered for nursing competence to be properly assessed. The Council's registered nurse competencies inform the choice of stations used in the OSCE.
<b>Whānau-centred care</b>	Collaborative healthcare focused on meeting the needs, values, and desired outcomes of individuals and whānau/family.
<b>Tikanga</b>	Refers to values and concepts in the context of Māori culture.

