

**RANZCP Auckland Training Programme**  
**Mock Objective Structured Clinical Examination**  
**Station No. 2**  
**Sept 2008**

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**Introduction and Aims**

In this station the main task is to:

Manage a meeting with the father of an 8 year old boy with ADHD where the boy's parents are divorced and in some conflict.

The Main Aims are to evaluate the candidate's ability to:

- Interact appropriately with the parent of a child patient
- Provide information about the patient and about ADHD
- Manage issues of confidentiality
- Work with the child's father and manage conflict between the parents

These cover the CANMEDS domains of:

- Medical expert / clinical decision maker
- Communicator
- Collaborator
- Professional

**Station resource requirements:**

- Table and 2 chairs
- Actor for patient's father aged 30s-40s (male)
- Instructions for Candidate

## **Station 2: Instructions to Candidate**

**You have seventeen (17) minutes to complete this station after reading time.**

You are working in a Child and Adolescent community mental health service. You are about to meet with Mr Sharma, the father of an 8 year old boy, Sam, who is your patient and who has Attention Deficit Disorder with Hyperactivity (ADHD).

Sam has been seen across the past month at your clinic. You have seen him twice, and he has been seen by the team psychologist and paediatrician. You have also organised behavioural rating scales which were done by his mother Mrs Mita Prakash and his teacher. All of this has confirmed the diagnosis of ADHD without conduct disorder.

Sam is inattentive, somewhat impulsive and hyperactive both at home and at school. His school progress has been delayed and his teacher finds him "very hard work". His mother says that he is very frustrating to care for and "drives her to distraction". She says she tries to use "time out" but it doesn't work very well. He tends to get into squabbles with other children and she previously had to remove him from kindergarten as they said he was "too disruptive". He was always like this she says, and it has not changed in the last 3-4 years, except that it has become become more of a problem since he started school.

Sam's parents divorced when he was 4 years old and they have shared custody. Sam's mother remarried a year ago. His father has not formed another relationship. Sam mostly lives with his mother but stays with his father most weekends from Friday to Sunday. This is the soonest that his father has been able to meet with you, due to his work schedule in the insurance business. You have already met with Sam's mother three times, and have discussed the assessment and suggested treatment plans with her already. She wanted you to meet with Mr Sharma but said that he would not come in if she were there, saying that they have a difficult relationship and he tends to blame her for Sam's behaviour. She said that Mr Sharma complained that she was too soft with Sam and that all Sam needed was "a good hiding" like Mr Sharma's father used to give him when he was naughty, which led to another argument.

After discussion, the team you work with has decided to commence Sam on methylphenidate treatment so you want to explain the diagnosis and the treatment plan to his father and to get his father's consent and cooperation. Your consultant has suggested that Sam be treated just across the school week and that he has breaks from the medication at weekends, and his mother is keen to try this.

### **Your tasks are to:**

- **Interact appropriately with Mr Sharma and manage any issues arising during the meeting**
- **Gather relevant collateral information**
- **Provide information to Mr Sharma about ADHD**
- **Explain the proposed treatment plan and enlist Mr Sharma's aid with this. Do not address behavioural therapy options.**

## Station No. 2 - Instructions to Examiner

In this station, your role is to:

- Observe and evaluate the quality of the doctor-caregiver interaction according to the defined tasks and assessment aims
- You are not to interrupt the candidate during the examination - there are no prompts for time-keeping in this station. Candidates must ensure that they manage the required tasks

At the commencement the candidate may simply start the meeting, or you can indicate their chair and say: ***“Please proceed with your tasks as instructed”***

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If the candidate asks any other questions about their task, refer them back to the *Candidate's Instructions* by saying  
***“You have your instructions, please do the best that you can.”***

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If the candidate says they are finished and want to leave the room, say:  
***“You may leave the room, but please make sure that you have completed the tasks to your satisfaction, as you cannot come back in again.”***

### Station Operation Reminders – for Examiners

Prior to examination / between candidates: (3 minutes)

- Clear any used writing paper from last candidate into the rubbish bin
- Ensure that water & tissues are still available for candidate's use on table
- Ensure that the Candidate's tray/table has on it:
  - Laminated copy of 'Instructions to Candidate'.
  - Writing paper on clipboard, pen

During examination: (17 minutes)

- At the first bell, ensure fresh mark sheets are ready (candidate is now outside reading - so careful to keep any noise down in the OSCE room)

At conclusion of OSCE: (3 minutes)

- Retrieve writing paper clipboard and pen from the candidate (don't let them carry these off) and clear away used notes pages into bin
- Complete marking and get a fresh mark sheet ready for next candidate
- Ensure room is set up again for next candidate (as above)

## Station 2: Instructions for Simulated Caregiver “Mr Sharma”

### Opening Statement:

Stand up when the candidate comes in and go to shake hands and introduce yourself – **“hello doctor – I’m Sam’s father Mr Sharma”**. The candidate may ask what they should call you. Say **“I am Mr Sharma”** if so. You can give your 1st name if they press you for this, but look a bit awkward and not happy to be called by this. Don’t use the candidate’s 1st name even if they give this – keep calling them “Doctor” throughout the meeting.

**Background information for your role:** *(you don’t need to memorise it all, just try to be familiar with the main points. You’ll have this with you as a laminated sheet)*

**You are Mr (your own 1<sup>st</sup> name) Sharma, the father of Sam, aged 8.** You are aware that Sam is difficult to manage and your ex-wife (Mita) recently told you he has ADHD but you are not clear what this is as you and your ex-wife don’t get on well so didn’t discuss it in any detail. You are aware that Sam has been seen at the clinic and you are not very happy with this as you feel that he is not “mentally ill” at all, just badly behaved. You are in fact ashamed that he has been seen at a child mental health clinic and feel that your ex-wife has made a lot of unnecessary and embarrassing fuss.

**You and Sam’s mother divorced when Sam was 4 years old and you have shared custody.** You have not formed another relationship and are somewhat lonely but you will not talk about this. **Sam mostly lives with his mother but stays with you most weekends from Friday to Sunday. You work in the insurance business and are busy during the week.** You are well off financially. You tend to take Sam out at the weekends and encourage him to play football, as it’s better to let him run around and not have him inside too much.

You are aware that Sam is inattentive, somewhat impulsive and hyperactive when he stays with you but **you feel this is mostly bad behaviour and that he needs more discipline. You think that your ex-wife spoils Sam and that the discipline you try to give Sam at the weekends is undone during the week.** You also blame his behaviour on her getting married again a year ago as you feel that this has upset Sam. If pressed about this however you have no real evidence that Sam is upset about his mother remarrying **“well, it stands to reason that he’d be upset, doesn’t it!”** however you feel somewhat bitter about her remarrying and you blame her for the marriage break-up. If asked directly you will admit that you told Sam’s mother he just needed “a good hiding” like your own father used to give you when you were naughty. However, **you are adamant that you have never in fact hit Sam**, although you don’t agree with the new law that says parents cannot smack their children to discipline them – you think the Government has gone too far and this is “parents’ business”. You discipline him by telling him off and by making him go to his room or by taking away privileges. You may be asked if Sam gets upset/worse if you and your wife have an argument. Say that you have not noticed this if so.

It is unlikely that much about your own personal history will be asked, but you are originally from New Delhi and have lived here for 12 years. You and your wife emigrated together, and it was an arranged marriage but you began to have problems, with increasing friction and arguments until you divorced 4 years ago. She complained you worked too hard and were never home, but you feel that hard work is what a husband and father should do. You have some extended family here – 2 brothers live locally and you and Sam sometimes spend time with them and their families. Your parents and 2 sisters are still in India. **There is no family history of any mental disorder** that you ever heard about, and you never heard of any children having ADHD or unusual behavioural problems. Feel free to blame the ADHD on your ex-wife’s family – e.g. say **“her family - they’re all difficult, like she is”**.

### Things that you must say at some point:

You are suspicious about what your ex-wife has said about you. Ask the candidate about this:

**“I bet she said bad things about me didn’t she? What did she say? That it’s all my fault – did she?”** etc.

Hopefully the candidate will handle this and calm you down, but be prepared to assume the worst about your ex-wife at any stage and flare up again. If a family meeting is suggested you will refuse this.

**You will want to know what ADHD is**, and although you are a bit dubious about whether Sam really does have this, you will be prepared to listen, ask questions and get information. Although you are not sure about whether Sam really does have ADHD, you will be prepared to agree to a trial of medications, as after a while you do admit that his behaviour is quite a problem.

**Be a bit dubious about the medication at first, and ask what the side-effects are.**

**You will not be keen about the idea of drug-free weekends** and will see this as your ex-wife wanting to have Sam calmed down when she is with him, and to leave you with all the difficult behaviour at the weekend. Insist that you will only agree to a medication trial if he is on the medication all week initially so that you can see how it works as well. You will not raise the possibility of behavioural therapy as you are not aware of this option.

If the candidate is especially clumsy or brusque and makes you more irritable and upset, you can in the end refuse to agree to the treatment trial. However, in general if they relate to you reasonably you will agree to this.

**MARKSHEET**  
**Station 2**

**1.0 APPROACH AND MANAGEMENT OF PARENTAL CONFLICT**

**Did the candidate demonstrate an appropriate professional approach to the patient's father?**  
(Proportionate value - 30% )

Achieves the standard by managing the necessary tasks while maintaining a professional and supportive manner. Candidate is to demonstrate respect for the father's concerns and to engage with him, and to calm him if he becomes distressed or angry. Candidate must manage the father's angry questions about what his wife has said about him appropriately, without inflaming Mr Sharma.

Surpasses the standard if manages this interaction especially well, with a better than average balance between appropriate support while maintaining a professional attitude and clear boundaries.

Does not achieve the standard if – lacks sensitivity, is arrogant or dismissive or fails to engage and to get some cooperation and engagement from Mr Sharma. Or if fails to manage his level of distress and to calm him appropriately if he gets angry.

Category: Approach to patient's father	Surpasses Standard	Achieves Standard	Just below	Standard not Achieved
ENTER GRADE (X) IN ONE BOX ONLY				

**2.0 COLLATERAL GATHERING**

**Did the candidate adequately gather appropriate collateral information from patient's father?**  
(Proportionate value - 20% )

Achieves the standard by eliciting some details about Sam's behaviour when he is with his father and how Mr Sharma manages this. Must check that Mr Sharma is not hitting Sam so as to discipline him. Asks about the father's family history. Gets a sense of Mr Sharma's relationship with Sam and with his ex-wife. Any omissions are relatively minor.

A candidate who surpasses the standard will cover the aspects as above very well, including antecedents and consequences around Sam's behaviour. Must check that Mr Sharma is not hitting Sam, as above.

Does not achieve the standard if no or very little collateral is sought, or if there is no checking that Mr Sharma is not hitting Sam so as to discipline him.

Category: Collateral Gathering	Surpasses Standard	Achieves Standard	Just below	Standard not Achieved
ENTER GRADE (X) IN ONE BOX ONLY				

### 3.0 EXPLANATION AND EDUCATION

**Did the candidate adequately explain Sam's condition? (Proportionate value - 20% )**

Achieves the standard by a good coverage of ADHD symptoms, possible causes and prognosis, and how Sam's behaviour indicates that he has this disorder. Concepts and symptoms are described in clear and basic language so as to be easily understood.

A candidate who surpasses the standard will manage this very well, with clear explanations which do not upset Mr Sharma, or condescend to him. Questions will be well answered.

Does not achieve the standard if the explanation/information is not well handled - e.g. if the candidate uses technical language that is hard for a lay person to follow, or is condescending, or vague or disorganised.

Category: Explanation and Education	Surpasses Standard	Achieves Standard	Just below	Standard not Achieved
ENTER GRADE (X) IN ONE BOX ONLY				

### 4.0 DISCUSSION OF TREATMENT PLAN

**Did the candidate adequately negotiate the proposed management plan with the patient's father? (Proportionate value - 30%)**

Achieves the standard by managing this discussion reasonably with Mr Sharma. The medication trial needs to be discussed - methylphenidate specifically although precise drug doses are not required. Mention should however be made about titrating Sam onto the medication initially, e.g. according to his weight. Possible side effects need to be covered (e.g. reduced appetite and possibly weight, and insomnia). The possibility of drug-free weekends should be mentioned, but not persisted with when Mr Sharma opposes these. Any omissions should be relatively minor.

A candidate who surpasses the standard will manage this discussion especially well, with full coverage of the plan and good detail about the practicalities and titration regime. The issue of the drug-free weekends will be well-handled and will not add to conflicts between the parents. Side-effects will be well covered and risks-benefits weighed up.

Does not achieve the standard if the candidate does not explain the treatment plan clearly, or does not seem to know how methylphenidate would be commenced in such a case. The issue of the drug-free weekends may be clumsily handled and may further inflame Mr Sharma. Cooperation with the treatment plan may not be achieved.

Category: Negotiation of Treatment Plan	Surpasses Standard	Achieves Standard	Just below	Standard not Achieved
ENTER GRADE (X) IN ONE BOX ONLY				

### Global Proficiency Rating

Did the candidate demonstrate adequate overall knowledge and performance of the tasks?

<b>Circle One Grade to Score</b>	Definite Pass	Marginal Performance	Definite Fail
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