NMC OSCE Preparation Materials and Mock Stations

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Looking for NMC OSCE preparation materials? Start with your field's official candidate handbook, marking criteria, station timings and mock OSCE. Then use the explanations and practice stations below to rehearse assessment, planning, implementation, evaluation and clear communication.

Exam-date update: The NMC's September 2026 announcement introduces revised nursing stations for candidates taking their first attempt on or after 26 October 2026. Earlier first attempts use the preceding materials. Check the NMC preparation page and your test centre for the version that applies to your field and attempt.

Prepare the professional basics with the NMC Code explained and WHO hand hygiene examples, then try our independent mock OSCE stations.

Which NMC OSCE preparation materials should I use first?

Choose the documents for your nursing field and exam version. Keep the official materials together so you can check a practice task against the relevant requirements.

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TABLE / OSCE materials and how to use them

Resource	Use it to
Candidate information booklet	Check the test-day process, identification requirements and centre instructions.
Field-specific marking criteria	Understand the assessed actions and safety expectations.
Station timings and supporting documents	Rehearse with the correct time allowance and charts.
Official mock OSCE and reading list	Understand the format and identify gaps in your knowledge.
Independent practice stations	Apply your learning, record errors and repeat a task after feedback.

Get the current documents from the NMC preparation library and read your centre's instructions, such as the University of Northampton candidate guidance. My Nursing Hub's mock stations are independent learning resources.

How can I practise without memorising a script?

Choose one station, identify its purpose, rehearse aloud, and ask a partner to note missed

actions. Explain why each action matters. Repeat with a different patient detail so you practise adapting to the situation. A fluent script is not evidence that an assessment is safe or complete.

Learning outcomes

- Understand OSCE as a practical assessment
- Describe a defensible assessment-to-evaluation sequence
- Identify safety-critical omissions
- Find official preparation and centre information

Free NMC OSCE mock stations: Learn, practise and review

Use our 10 original adult-nursing OSCE mock stations to study the theory, examine a worked example, complete a simulated station with a timer, review errors and follow official references. These are independent educational scenarios, not official NMC exam stations or confidential marking criteria.

- Respiratory assessment and deterioration (APIE: assessment)
- Person-centred respiratory care planning
- Implementation and escalation of respiratory care
- Evaluation of patient response
- Hand hygiene, PPE and aseptic safety
- Vital-signs assessment and escalation
- Supervised wound assessment and dressing safety
- Medication verification and administration safety
- Confidentiality and information-sharing ethics
- Evidence-based hand hygiene decisions

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Regulatory source: Check the NMC official preparation materials, current nursing station timings and marking criteria. The NMC announced further station updates in September 2026, so use the current field-specific material for your exam sitting.

- What the OSCE assesses
- Assessment is purposeful information gathering
- Plan, implement and evaluate
- Communication and consent
- Asepsis and infection prevention
- Common causes of avoidable errors
- Current centre arrangements and changes

1. What the OSCE assesses

The NMC describes the OSCE as the practical part of the Test of Competence. Stations may assess clinical assessment, planning, implementation, evaluation, communication and

nursing skills. Candidates must use the current field-specific materials for their assessment route. Exact station and marking information should be checked against the current official resources rather than reproduced from an outdated coaching video.

2. Assessment is purposeful information gathering

A simulated patient's presentation should guide focused questions and observations. Introduce yourself, verify identity as appropriate, seek consent, use accessible language and consider pain, mobility, cultural needs and environmental safety. Distinguish reported symptoms from measured observations.

3. Plan, implement and evaluate

Planning identifies priorities and desired outcomes with the patient. Implementation must remain within competence, prescription and local policy. Evaluation asks whether the intervention achieved its goal and whether findings require revision of the plan or escalation. Documentation captures the actual observations and actions undertaken.

4. Communication and consent

Use plain language, check understanding, respond to concerns respectfully and protect confidentiality. Consent is a continuing process, not a single scripted phrase. If a patient declines, do not treat the station as permission to ignore their decision.

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5. Asepsis and infection prevention

Expect hand hygiene and task-appropriate PPE to be evaluated across many stations. Choose equipment and patient preparation based on the scenario. Avoid contaminating clean key parts or sterile equipment. Stop and correct a break in technique according to the station and institutional guidance.

6. Common causes of avoidable errors

Errors include unverified identity, missing consent, failure to explain a procedure, unsafe equipment handling, inaccurate documentation and not escalating abnormal findings. A candidate who works quickly but omits risk recognition may be unsafe. Practise with observation-based feedback rather than self-awarded marks.

7. Current centre arrangements and changes

NMC information reviewed for this guide lists the University of Northampton, Ulster University and Leeds Teaching Hospitals NHS Trust as approved OSCE providers; earlier Oxford Brookes and Northumbria centres closed during 2026. The list, booking route and published preparation documents may change.

OSCE skills and assessment priorities

Concept	Meaning	Key distinction
Assessment	Gather relevant history and observations	Recognise immediate safety risks
Planning	Prioritise care and agree outcomes	Explain rationale
Implementation	Deliver authorised simulated care	Protect asepsis and identity
Evaluation	Review response and update plan	Escalate concerns
Documentation	Record accurate observations and actions	No fabricated entries

How to rehearse and review an OSCE station

Sequence for safe reasoning and preparation

Applied case: A candidate notices a break in aseptic technique while setting up a simulated dressing.

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The safer demonstration is to acknowledge the contamination and correct it using the centre's guidance, rather than conceal the error to finish more quickly.

Regulatory caution: My Nursing Hub is an independent educational resource and is not affiliated with or endorsed by the UK Nursing and Midwifery Council. Requirements, fees and exam arrangements may change. The current NMC website is authoritative.

OSCE station format and preparation examples

The 10-station pattern

The current NMC nursing OSCE consists of four linked APIE stations (assessment, planning, implementation and evaluation), four skills stations arranged as two pairs of two, and two additional stations examining professional values, behaviours and evidence-based practice. The candidate's field of nursing matters and approved station sets are refreshed over time. Station timings and marking schemes should be taken from the NMC's current nursing field-specific materials, not a generalised sheet circulated by a training provider.

APIE: a coherent clinical episode, not four unrelated scripts

In the assessment station, gather pertinent information, recognise relevant changes and respect consent. Planning converts findings into prioritised, person-centred goals and appropriate care choices. Implementation demonstrates a safe, authorised intervention with

communication, identification checks and aseptic principles where relevant. Evaluation reviews the person's response, remaining problems and appropriate handover. A weak candidate may appear technically fluent yet fail to link assessment findings to the proposed care.

Skills stations and standardised assessment

The practical stations can include skills and procedures selected by the NMC for the relevant field. Learners should understand indications, patient preparation, suitable equipment, hazard control, consent, observations after the procedure and documentation. A high-fidelity manikin or simulated patient enables safe supervised practice, but a checklist alone is not evidence of competence. Prioritise the NMC's official sample stations, equipment list and marking criteria. Avoid publishing claims that a station is guaranteed to appear.

Values and evidence-based practice: how to answer

Professional-values scenarios test how candidates reason about privacy, safeguarding, honesty, discrimination, unsafe practice and communication. Evidence-based practice questions require interpreting a short piece of evidence or clinical information and applying it appropriately. Describe the immediate risk, actions within role, when to escalate, and how to document or evaluate the outcome. Avoid robotic repetition of phrases when the problem requires a concrete professional judgment.

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Important 2026 maintenance changes

The NMC publishes updates to OSCE assessments and materials as part of regular test maintenance. The nursing preparation page includes January 2026 adult nursing station changes and March 2026 changes for children's and mental health nursing, with accompanying updated marking criteria. It also publishes September 2026 announcements. Dates and applicability may depend on the nursing field and the candidate's sitting. A serious preparation provider checks this page immediately before advising candidates; older screenshots of station lists can be misleading.

Planning a simulation and debrief

Use a short, realistic patient story and an official current blueprint to set a supervised station. Debrief against five dimensions: safety, clinical reasoning, communication, documentation and responsiveness to changing information. Record the error and the principle it demonstrates. Repeating a memorised paragraph is less useful than reconstructing why the person needed that action and what findings should change the plan.

Reference table: verified details and exceptions

Station component	Number	Main purpose
APIE linked scenario	4	Assessment, planning, implementation, evaluation
Skills	4	Applied clinical capability
Values and evidence	2	Professional reasoning and evidence use
Total	10	Check current nursing-field marking and timings

Worked scenario: where students commonly go wrong

A learner contaminates the simulated sterile field. The competent response is to recognise and disclose the breach, stop the unsafe action, re-establish an appropriate clean or sterile setup and communicate with the assessor or team as the official station criteria require. Concealing a breach is not an acceptable workaround.

Three questions answered

Does the NMC OSCE always have 10 stations?

The current nursing Test of Competence OSCE is described as a 10-station exam.

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Can any published station appear?

Candidate content is refreshed; review the current official field-specific documents and announcements.

Are these My Nursing Hub mock stations official?

No. They are independent educational scenarios, not endorsed or supplied by the NMC.

Key official sources for this expanded content

- NMC nursing OSCE: 10 stations and centres (accessed and reviewed October 2026)
- NMC preparation materials and 2026 updates (accessed and reviewed October 2026)
- NMC Code (accessed and reviewed October 2026)

Study-note status: Editorial research verification completed 10 October 2026. This page is published as an educational study note. Clinical accuracy and suitability have not yet been independently reviewed. Faizan’s editorial review is pending. This independent resource is not affiliated with the NMC.

References and verification

- NMC OSCE guidance
- NMC Test of Competence resources
- NMC Code

Editorial review: Prepared 10 October 2026 for review by Faizan. Content has not been independently clinically peer-reviewed; review current standards before practical use. MCQs: Questions belong in the separate Nursing general Nursing Practice Mode (chapter-specific questions being developed), not within these lessons.

Source: https://mynursinghub.com/uk-nmc-preparation/nmc-osce-preparation-clinical-stations-for-nursing/

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