



Occupational English Test
Speaking sub-test
Test information

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General Information



Time Allocation

Approximately 20 minutes.

Test format and procedure

The Speaking sub-test is specific to each profession. You take this part of the OET using materials specifically for your profession – a nurse does the task for nursing, a dentist does the task for dentistry, and so on.

The Speaking sub-test is **face-to-face**. It is a simulated dialogue between a patient and a health-practitioner.

Candidates are required to participate in **two** different **role-play** situations based on typical workplace situations and the demands of the profession.

The details of each role-play are set out on two role-cards. Candidates take the role of the health professional while the interviewer takes the role of the patient or client.

This sub-test is in three parts:

1. **Warm-up conversation** (this is **not** assessed).

The purpose of the warm-up conversation is to explain the format of the test and to help the candidate to relax. The interviewer will ask about areas of professional interest, previous work experience, future plans, etc.

2. **First role-play** (assessed)

The interviewer hands the candidate a role-play card which the candidate reads carefully. Any questions are to be asked and answered before the role-play begins. The interviewer will finish the role-play after about five minutes.

3. **Second role-play** (assessed)

The above procedure is repeated with a **different** role-play.

The whole interview is recorded. It is important that the candidate and the interviewer speak clearly so that the assessor can understand everything that is said. Two role-plays are provided to ensure the assessment is fair. The assessment is based on both role-plays.

Assessment procedure

Your speaking performance is assessed by **two** qualified, experienced English assessors who have been trained in OET assessment procedures. The assessment is based on the following criteria:

- overall communicative effectiveness
- intelligibility
- fluency
- appropriateness of language
- resources of grammar and expression.

The Speaking sub-test recordings are assessed in Melbourne. **All** recordings are double marked.

Important: the interviewer on the day of the test **does not** assess your performance.

The sample materials

The sample materials consist of:

- role-play cards for 12 health professions
- 2 sample role-plays (recorded). One of the role-plays involves a doctor, and the other a nurse. It is not possible to provide examples of all professions, but these samples will give you a clear idea of the procedures used in the interview.

Role-play cards

You will have an opportunity to read through your role-card before starting each role-play. Each card is laid out in a similar way. At the top of the role-card is information about the setting (i.e. where the conversation is taking place). You receive information on each role-card, which you keep while you do the role-play. You may write notes on the card if you want to.

The card explains the situation and what you are required to do. If you have any questions about the content of the role-play or how a role-play works, you may ask for clarification before starting.

The top paragraph contains background information about the patient and his/her situation. It will be made clear if the interviewer is taking on the role of the patient or somebody talking on behalf of the patient (i.e., the patient's carer, parent etc.). The bottom half of the role-card contains information to assist you in what you need to mention during the role-play. Each card contains approximately 100-150 words (prompts/notes to guide you during the role-play).

Use the prompts/notes on the role-card to guide you through the role-play:

- What is your role?
- What role is your interviewer playing – patient, parent/son/daughter, carer?
- Where is the conversation taking place?
- What is the current situation?
- How urgent is the situation?
- What background information are you given about the patient and the situation?
- What are you required to do?
- What is the main purpose of the conversation (e.g., explain, find out, reassure, persuade)?
- What other elements of the situation do you know about (e.g., the patient appears nervous or angry, you don't have much time)?
- What information do you need to give the patient (remember, though, this is not a test of your professional skills)?

The Speaking sub-text is not a test of your professional knowledge, however, it is expected that you will use professional knowledge as appropriate, to inform the language that might be used in real-world situations similar to those of the role-plays.

Using the materials

- Listen to the sample recordings.
- Select the role-play relevant to your profession.
- Print the role-play.
- Cut the role-play (as indicated by the dotted line).
- Ask a friend or colleague to play the role of the patient (or patient's carer etc.).
- Take the role of the health professional.
- Ask another friend or colleague to observe the role play and give you feedback on your performance.
- Read the information on the card carefully.
- You have to deal with the case details as outlined on the card by asking and answering questions put to you by the patient or client.
- Speak as naturally as possible.
- Remember it is important to be interested in the welfare of the patient and to reassure the patient or relation of the patient that the treatment being proposed is appropriate.
- Keep to the time limit of 5 minutes (approximate) for each role-play.
- Ask the friend or colleague who observed for comments and feedback.

Rationale

An important part of a health professional's role is the ability to communicate effectively in speech with his/her patients or clients. The role-plays allow the candidate to take his/her professional role and demonstrate the ability to deal with common workplace situations.

These situations may include elements of tension which are a normal part of the real-life context (for example, patients who are anxious or angry, patients who misunderstand their situation, patients who may not agree with you etc.).

Having two role-plays provides two separate opportunities to demonstrate spoken proficiency: the two scenarios provide a chance to use different kinds of language, therefore giving a broader view of the candidate's spoken skills.

Assessment information

The Speaking sub-test is scored by two experienced assessors who receive ongoing training, monitoring, and feedback on their performance after each administration of the test.

Assessors give a score from 1 to 6 for each of the five criteria listed above using a detailed set of level descriptors to guide their decisions. A score of 6 is the highest for each criterion. The five criteria are equally weighted in the scoring and analysis process.

Each candidate's recorded sound file is graded by two assessors independently. Neither assessor knows the scores the other assessor gives or the scores awarded to the candidate for other sub-tests.

The two separate sets of raw scores for each candidate's recording are analysed for the whole group of candidates taking the sub-test at the same administration. A multi-faceted Rasch analysis of the data is done using FACETS software (Linacre 1989). This analysis takes account of patterns of assessor behaviour and compensates for assessors whose scores are consistently lenient or severe.

After the initial analysis, any scripts which have mis-fitting scores (i.e., which do not fit the pattern expected for the analysis) are re-scored by a third assessor (again without any knowledge of the previous scores given) and the statistical analysis is repeated.

The final score for each candidate's script is therefore not a simple mean average of the two (or three) assessors' raw scores. Instead, it is a 'fair score', compensating for particular assessors' severity or leniency.