



OCCUPATIONAL ENGLISH TEST

Helping you select international
healthcare professionals with the
right level of English



Information for healthcare regulators,
employers and educators



To help you select international healthcare professionals with excellent English language skills, you need a high-quality test that has been specifically designed to meet the needs of the healthcare sector.

What is the Occupational English Test (OET)?

OET is an international English language test that assesses the language proficiency of healthcare professionals who seek to register and practise in an English-speaking environment.

It provides a valid and reliable assessment of all four language skills – listening, reading, writing and speaking – with an emphasis on communication in healthcare professional settings.

OET tests health practitioners from the following 12 professions:

Dentistry	Occupational Therapy	Podiatry
Dietetics	Optometry	Radiography
Medicine	Pharmacy	Speech Pathology
Nursing	Physiotherapy	Veterinary Science

A quality test you can trust

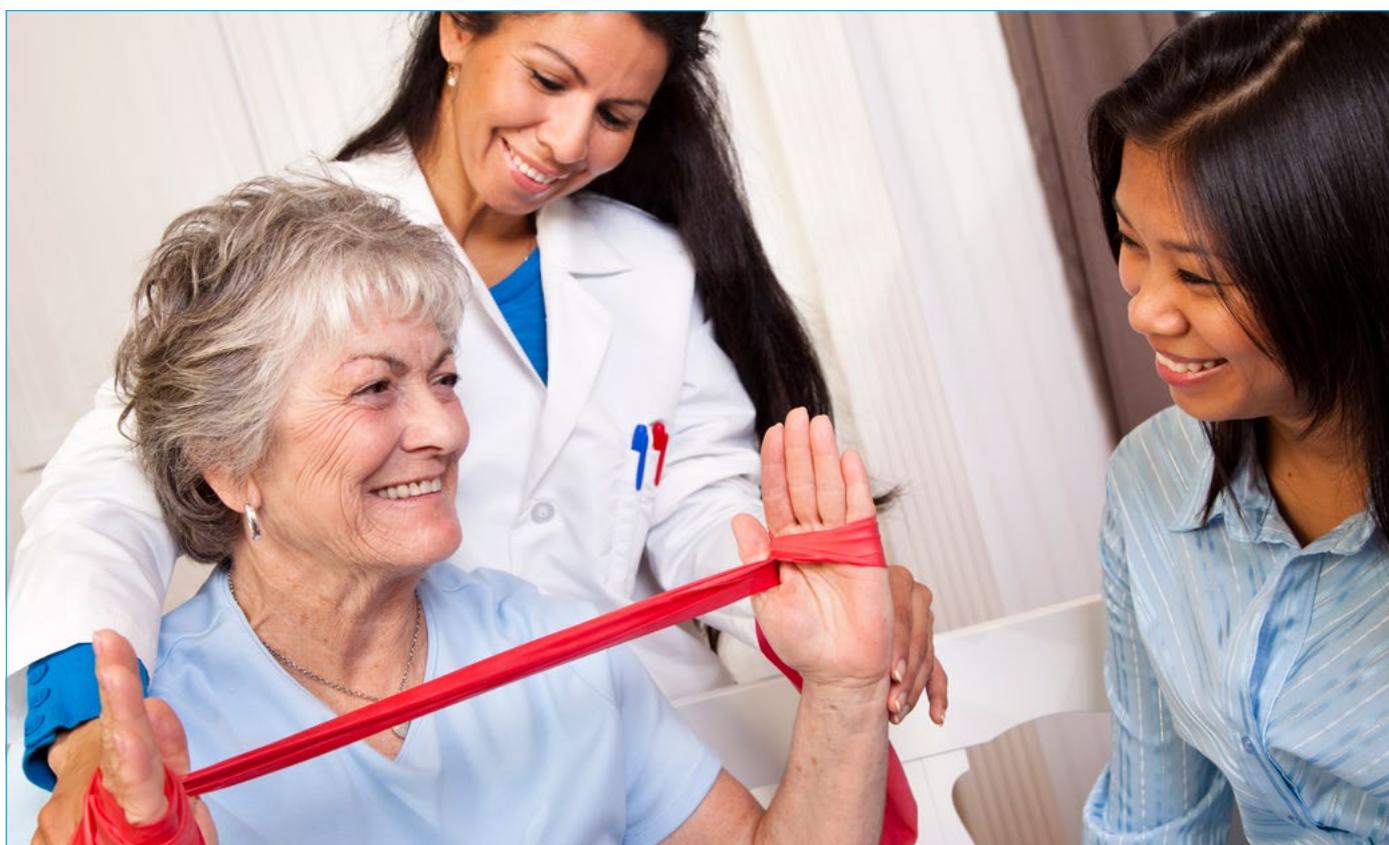
Established in the late 1980s, OET is a recognised and trusted English language test for the healthcare sector. It was developed under contract to the Australian Federal Government and designed by Professor Tim McNamara at the University of Melbourne – one of the original developers of *IELTS*¹ (*International English Language Testing System*).

The test is owned by Cambridge Boxhill Language Assessment Trust (CBLA), a venture between Cambridge English and Box Hill Institute.

Cambridge English Language Assessment, a part of the University of Cambridge, is the world's leading provider of language assessment for learners and teachers of English. Each year over 4 million people in more than 130 countries take Cambridge English exams.

Box Hill Institute, based in Melbourne, Australia, is a leading vocational and higher education provider known for its collaborative and creative approach to education in Australia and overseas. The Institute has a rich history, and over the years has been the recipient of many awards demonstrating recognition for its achievements.

Backed by over 30 years of research by the Language Testing Research Centre (LTRC) at the University of Melbourne, OET has gone through a continuous cycle of research, validation and evaluation to ensure it is fit for purpose and relevant. That work continues today, drawing on the resources and expertise of the Research and Validation group at Cambridge English Language Assessment.



¹ *IELTS* is owned and managed jointly by a partnership of British Council, IDP: IELTS Australia and Cambridge English Language Assessment.

Why recognise OET?

OET can help you ensure that healthcare professionals have the right level of English language proficiency to deliver high-quality care.

- **Healthcare regulators, boards and councils** can ensure that internationally trained healthcare professionals have appropriate standards of English, specific to the healthcare sector. This is key to guaranteeing patient safety and well-being.
- **Hospitals and other healthcare employers** can ensure that their employees (doctors, nurses and other healthcare professionals) have the necessary English language communication skills for delivering quality healthcare.
- **Healthcare educators** can ensure that graduating students have *employment-ready* or *registration-ready* language skills by including OET preparation and testing in their courses.

Other **benefits** of using OET:

- protects patient safety by addressing the widely reported concerns around communication with non-native speakers of English
- optimises communication with patients, carers and colleagues, in turn improving the quality of care
- reduces the training burden for hospitals and other employers
- establishes a fair way to select internationally trained health professionals
- attracts candidates committed to excellence and professionalism.

Who recognises the test?

OET is recognised as proof of English language proficiency by a growing number of organisations in Australia, New Zealand and Singapore.

Australia

Government

Australian Department of Immigration and Border Protection (DIBP)

OET is accepted by DIBP² for various visa categories including skilled migration and student visas.

Visit www.immi.gov.au for more details.

Boards and Councils

Australian Health Practitioner Regulation Agency (AHPRA)

AHPRA is the national agency responsible for the registration and accreditation of health professions in Australia. The following AHPRA Boards accept OET:

- Dental Board of Australia
- Medical Board of Australia
- Medical Radiation Practice Board of Australia
- Nursing and Midwifery Board of Australia
- Occupational Therapy Board of Australia
- Optometry Board of Australia
- Pharmacy Board of Australia
- Physiotherapy Board of Australia
- Podiatry Board of Australia.

² This information is accurate as of October 2014.



Other Boards and Councils

- Australasian Veterinary Boards Council (AVBC)
- Australian and New Zealand Podiatry Accreditation Council (ANZPAC)
- Australian Dental Council (ADC)
- Australian Institute of Radiography (AIR)
- Australian Nursing and Midwifery Accreditation Council (ANMAC)
- Australian Pharmacy Council
- Australian Physiotherapy Council (APC)
- Dietitians Association of Australia (DAA)
- Health Advisory Council (HAC)
- Occupational Therapy Council (Australia and New Zealand) (OTC)
- South Australian Medical Education and Training (SA MET)
- Speech Pathology Australia (SPA).

Universities and education providers

- Australian Catholic University (ACU)
- Australian College of Nursing (ACN)
- Curtin University
- C.Y. O'Connor Institute
- Deakin University
- James Cook University (JCU)
- La Trobe University
- Perth Institute of Business and Technology (PIBT)
- Southern Cross University (SCU)
- Tafe NSW
- Tafe SA
- The University of Queensland
- University of Newcastle (UoN)
- University of Notre Dame Australia
- University of South Australia (UniSA)
- University of the Sunshine Coast (USC)
- University of Western Sydney (UWS).

Financial assistance

The Assessment Subsidy for Overseas Trained Professionals Programme (ASDOT) is an Australian Government initiative applicable to 11 of the 12 OET professions. Eligible candidates may apply for financial assistance to cover the cost of taking OET. Further information is available at www.aei.gov.au/asdot



Australian Government
Department of Industry, Innovation,
Climate Change, Science, Research
and Tertiary Education

New Zealand

Boards and Councils

- Australian and New Zealand Podiatry Accreditation Council (ANZPAC)
- Dental Council of New Zealand (DCNZ)
- Medical Council of New Zealand (MCNZ)
- Midwifery Council of New Zealand
- New Zealand Qualifications Authority (NZQA)
- Nursing Council of New Zealand
- Occupational Therapy Council (Australia and New Zealand) (OTC)
- Pharmacy Council of New Zealand
- Physiotherapy Board of New Zealand
- Podiatrists Board of New Zealand
- Veterinary Council of New Zealand.

Singapore

Boards and Councils

- Allied Health Professions Council
- Singapore Dental Council
- Singapore Medical Council
- Singapore Pharmacy Council.

For further information about recognition, visit www.occupationalenglishtest.org/recognition

High-quality, secure language assessment

We are committed to the highest standards of quality, security and integrity for OET.

Fair and consistent delivery of OET is ensured by secure technology and the continual training and monitoring of assessors and test venues.

Our comprehensive approach covers all areas – from test development, test delivery and results processing, through to post-examination review and evaluation.



- Candidates undergo a rigorous ID check upon initial registration, on the test day and for each sub-test. All identity documents presented on the test day must match the details submitted during the application process or the candidate is not permitted to sit the test. Our ID check procedures have DIBP (Australian Department of Immigration and Border Protection) approval, ensuring confidence in candidate identity.
- A strict code of practice for the storage and transportation of test materials is followed. This ensures the highest standards of security throughout the testing process, from registration to the recording of results.
- Candidate scripts are securely despatched and returned directly to The OET Centre in Melbourne.
- All sub-tests are assessed at The OET Centre in Melbourne by trained expert assessors. Scripts are randomly allocated to assessors to avoid conflicts of interest. No assessment and marking is carried out at test venues to ensure the security of the scripts.
- Assessment processes routinely include double marking and statistical analysis to ensure that candidate results are accurate and fair.
- Statements of Results include a number of security features.
- All staff involved in administering OET sign a confidentiality agreement.

Continual research-based development

OET is underpinned by over 30 years of extensive research by the Language Testing Research Centre (LTRC) at the University of Melbourne. This work is now supported by the Research and Validation department at Cambridge English Language Assessment. The test is regularly updated to keep pace with changes in language testing in a healthcare context, in turn ensuring the ongoing validity and reliability of the test.

Leading language testing academics contribute to the continued development and improvement of the test, placing it at the forefront of research and practice in the assessment of English for specific purposes.

Input from subject matter experts provides for authentic test materials, underpinning OET's validity. This ensures that tasks are based on a typical workplace situation and the demands of the profession.

Numerous studies have been published exploring various aspects of the test's validity. Below is a sample of OET research:

Title	Author	Date of publication
Towards improved healthcare communication: Development and validation of language proficiency standards for non-native English speaking health professionals	Elder, C., McNamara, T., Woodward-Kron, R., Manias, E., McColl, G., Webb, G. & Pill, J.	2013
Investigating the test impact of the OET: A qualitative study of stakeholder perceptions of test relevance and efficacy	Macqueen, S., Pill, J., Elder, C. & Knoch, U.	2013
Stakeholders' Perceptions of Occupational English Test (OET): An exploratory study	Vidakovic, I. & Khalifa, H.	2013
Health professionals' views of communication: Implications for assessing performance on a health-specific English language test	Elder, C., Pill, J., Woodward-Kron, R., McNamara, T., Manias, E., McColl, G. & Webb, G.	2012
The Occupational English Test: Testing English proficiency for professional purposes through contextualised communication	Pill, J.	2007
Problematising content validity: The Occupational English Test (OET) as a measure of medical communication	McNamara, T.	1997
Language proficiency testing for migrant professionals: New directions for the Occupational English Test	Alderson, J., Candlin, C., Clapham, C., Martin, D. & Weir, C.	1986

To see the complete list of research visit www.occupationalenglishtest.org/research

Validity and reliability of OET

The validation of OET was originally carried out in the late 1980s, and is the subject of reports written at that time (McNamara 1987, 1988, 1989).

The test's design was based on an extensive job analysis on the most common reading, listening, speaking and writing tasks required of health practitioners and their associated language demands. The first advantage is the authenticity and relevance of test tasks and candidate responses to the contexts of concern. This enhances the validity of inferences made about a candidate's language proficiency in healthcare-specific workplace situations, based on their test score. The second advantage relates to the potential washback of this kind of test on the language teaching and learning activities that occur in preparation for the test.

Over the years, numerous studies have explored the validity of the test for its specific occupational purpose. Some of the questions posed in these studies are as follows:

- How lifelike are the OET role-plays in their attempt to simulate interaction between a patient and health professional? (Lumley & Brown 1996)
- How stable are OET raters' judgements over time? (Lumley & McNamara 1995)
- What constraints does the test situation impose on test authenticity? (McNamara 1997)
- What criteria do health professionals apply in judging the oral performance of their peers in real-world contexts? Do these differ from those invoked by ESL raters when judging the quality of OET candidates' speech? (Lumley, Lynch & McNamara 1994; Ryan 2007)
- Do ESL raters and doctors agree on the 'pass-fail' classification of candidates? (Lumley, Lynch & McNamara 1994)
- How does a specific-purpose test like the OET differ in content, format, properties and outcomes from a more general English proficiency test like *IELTS*? (Elder 2007)
- What are OET candidates' views regarding the relevance of the OET texts, topics and task types for their intended purpose? (Elder 2007)

Conducting validation research on an ongoing basis ensures the test remains fit for purpose and identifies areas where improvements are needed. Some of the questions that have been addressed to date include:

- What decision-making processes do markers of the open-ended items on the OET Listening test go through when using the official marking guide? (Harding & Ryan 2009; Harding, Pill & Ryan 2011)
- What features of the OET Writing prompts affect the difficulty of the task for candidates? (Knoch 2008)
- How successfully do the OET rating criteria for Speaking (e.g., intelligibility, appropriateness) discriminate between able and less able candidates? (Chan 2006)
- Do raters privilege some scoring criteria over others, thereby giving an unfair advantage to certain candidates on the OET Speaking test? (Iwashita & Grove 2003)
- How do OET raters respond to an extended programme of individualised feedback on their scoring of candidates' performance on the OET Speaking and Writing components? (Knoch 2009) and Does this feedback improve the accuracy and consistency of their rating behaviour? (Knoch 2009)
- How closely aligned are the OET Speaking criteria to the qualities of communication valued by health professionals? (Elder et al. 2012).

A study undertaken at the Language Testing Research Centre, University of Melbourne in 2009 established that there was a wider range of publications and reading genres likely to be read in the workplace than the type of texts that had previously informed the Reading sub-test. This led to the revision of the sub-test, and an increase in its reliability.

The reliability of OET sub-tests is calculated and monitored regularly. The reliability for the Listening and Reading sub-tests is calculated using Kuder-Richardson 20. The item quality is high (all items show good discrimination or fit), and discrimination at cut-scores is high; the test is well targeted to the ability range around the cut-score.

Responses to the Speaking and Writing sub-tests are double scored and analysed using multi-faceted Rasch measurement (McNamara 1996) using the program FACETS (Linacre 2010). This enables scores adjusted for rater severity to be produced, and provides detailed analyses of rater quality, including consistency. Reports on the satisfactory quality (or otherwise) of the measurement of individual candidates' performances are also produced, thus flagging individual performances for third rating.

The reliability of the sub-tests given by the above analysis is as follows:

- Reading: 0.83
- Listening: 0.89
- Speaking: 0.89
- Writing: 0.89



When and where is the test available?

OET is currently available up to 12 times a year, at more than 60 testing venues in 28 countries.

Cambridge English Language Assessment has a global distribution network of over 2,800 test centres that will, in time, deliver OET worldwide.

To see the current test dates and a list of countries where the test is available visit

www.occupationalenglishtest.org

OET scoring and results

There are many aspects to being able to communicate in a language effectively. OET therefore has four sub-tests – Listening, Reading, Writing, and Speaking – to acknowledge that these involve different sub-skills and strategies.

Candidates receive a separate grade for each sub-test, ranging from A (highest) to E (lowest). There is no overall grade for OET.

Here are the descriptions for each grade that appear on the printed Statement of Results that candidates receive:

OET grade	Description of ability
A	Very high level of performance
B	High level of performance, i.e. able to use English with fluency and accuracy adequate for professional needs
C	Good level of performance; however, not acceptable to a range of health and medical councils
D	Moderate level of performance: requires improvement
E	Low level of performance: requires considerable improvement

Results are published on the website approximately 15 business days after the test. Candidates log in to a secure online profile to view them. Official Statements of Results are posted following the publication of results online.

Online Results Verification Service

We provide a free and secure online Results Verification Service to help organisations and authorities verify candidate results. The service provides access to a secure database through which candidates' results – across a period of three years – can be checked for authenticity. The site is securely encrypted and designed for use in high-stakes environments.

Find out more about OET results at www.occupationalenglishtest.org/results

What's in the test?

OET is an in-depth and thorough assessment of all areas of language ability.

The test is divided into four sub-tests:

- Listening
- Reading
- Writing
- Speaking.

The Listening and Reading sub-tests are designed to assess a candidate's ability to understand spoken and written English, based on health-related topics and tasks common to all professions. The Writing and Speaking sub-tests are specific to the 12 individual healthcare professions – designed to reflect common tasks performed in the workplace.

Sub-test (duration)	Content	Shows candidates can:
Listening (50 minutes)	2 tasks Common to all 12 professions	follow and understand a range of health-related spoken materials such as patient consultations and lectures.
Reading (60 minutes)	2 tasks Common to all 12 professions	read and understand different types of text on health-related subjects.
Writing (45 minutes)	1 task Specific to each profession	write a letter in a clear and accurate way which is relevant for the reader.
Reading time: 5 minutes Writing time: 40 minutes		
Speaking (20 minutes)	2 tasks Specific to each profession	effectively communicate in a real-life context through the use of role-plays.

Download sample papers at www.occupationalenglishtest.org

The four components of OET

Listening

(approximately 50 minutes)

The Listening sub-test consists of two parts, with approximately 20–28 tasks.

The topics are of generic healthcare interest, accessible to all candidates, across multiple professions. Each part consists of about 15 minutes of recorded speech. Candidates will hear each recording once and are expected to write their answers while listening.

Part A (20–25 minutes) assesses candidates' ability to follow facts during a consultation between a health professional and a patient.

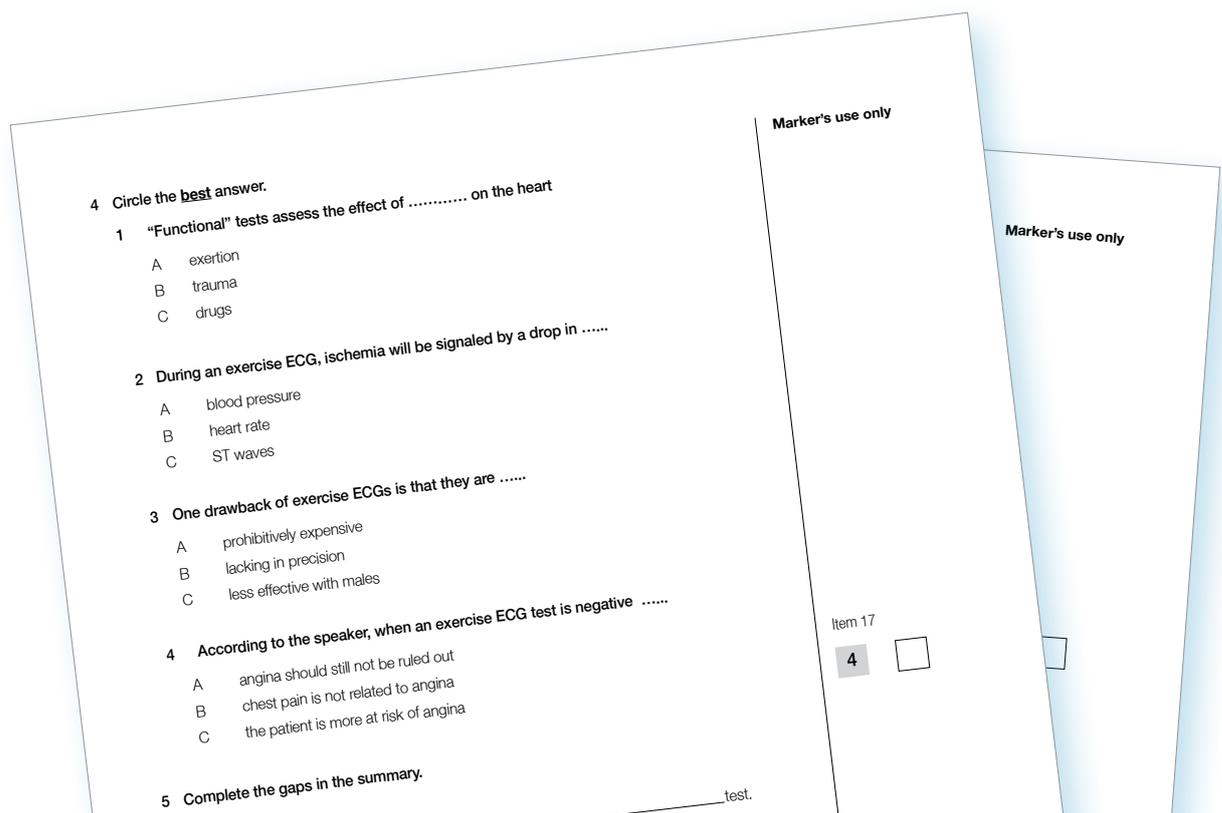
Candidates listen to a recorded health professional–patient consultation and complete a note-taking task, guided by relevant headings.

Part B (20–25 minutes) assesses candidates' ability to understand a short talk on a health-related topic that might realistically occur in the workplace.

Candidates listen to a recorded talk or lecture (monologue) by a healthcare professional and complete a range of open-ended and fixed-choice tasks.

Tasks include:

- multiple-choice questions
- sentence completion
- short-answer questions
- summary completion
- lecture notes completion
- table/flow-chart/mind-map completion
- word replacement response
- matching responses.



Reading (60 minutes)

The Reading sub-test consists of two parts:

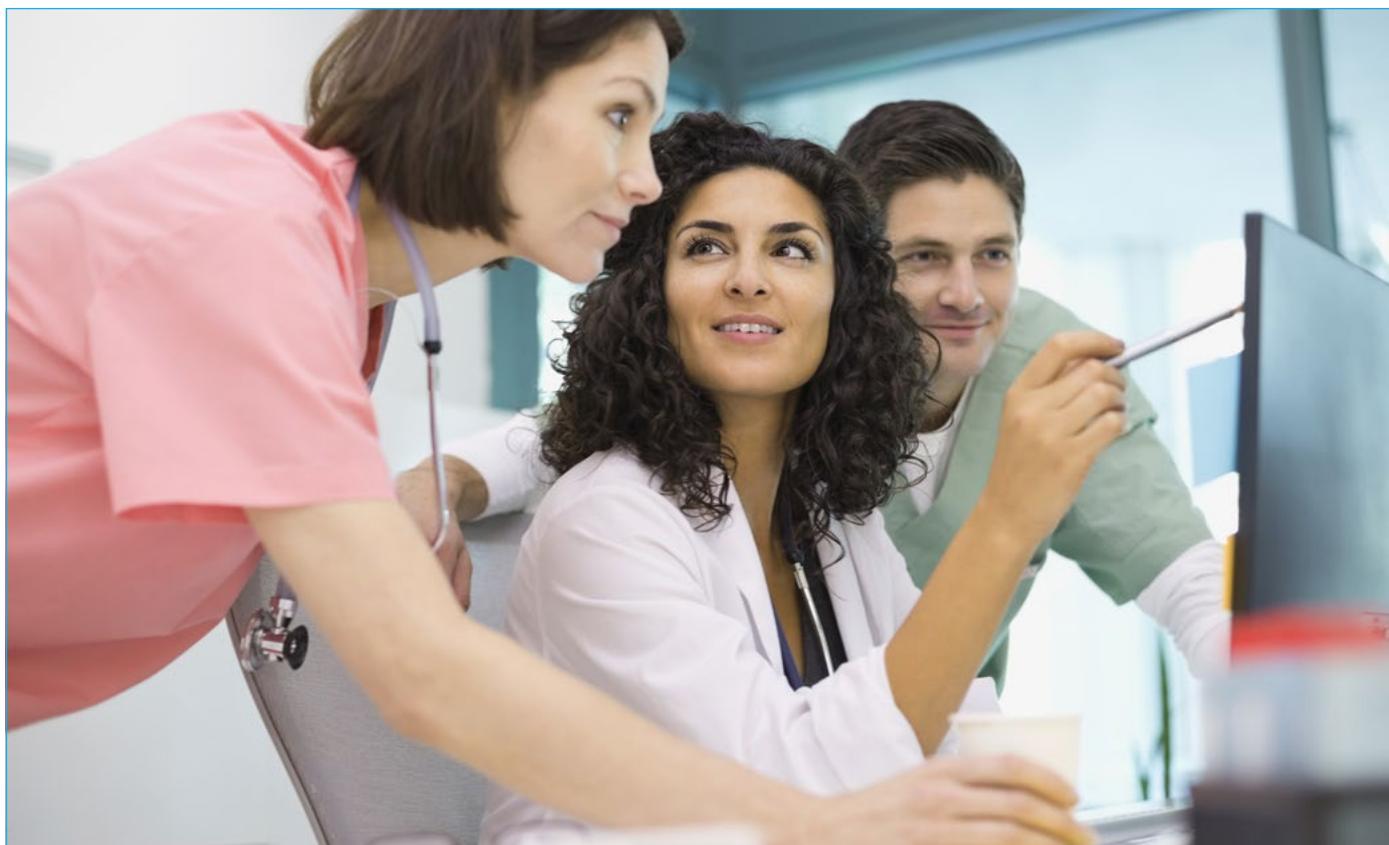
Part A – summary task

Part B – multiple-choice questions

The topics are of generic healthcare interest and are therefore accessible to all candidates, across multiple professions.

Part A (15 minutes) assesses candidates' ability to source information from multiple texts, to synthesise information in a meaningful way and to 'skim' and 'scan' material to retrieve information quickly. Candidates are required to read three to four short texts (a total of 650 words) related to a single topic, and complete a summary paragraph by filling in the missing words (25–35 gaps in total).

Part B (45 minutes) assesses candidates' ability to read and understand comprehensive texts on health-related topics similar to those in academic or professional journals. Candidates are required to read two passages (600–800 words each) and answer a set of multiple-choice questions (16–20 in total).



Writing (45 minutes)

The Writing sub-test is specific to each profession, based on a typical workplace situation and the demands of the profession.

Candidates are asked to write a letter (referral, transfer or advice) to another health professional based on a set of clinical case notes. It must consist of approximately 180–200 words. The type of letter and audience is specific to each profession.

The letter must record treatment offered to date and the issues to be addressed by the other professional, drawing selectively on the stimulus material presented in the case notes.

Candidates are assessed against the following criteria:

1. Overall task fulfilment.
2. Appropriateness of language.
3. Comprehension of stimulus.
4. Linguistic features (grammar and cohesion).
5. Presentation features (spelling, punctuation and layout).

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WRITING SUB-TEST: MEDICINE

TIME ALLOWED: 5 MINUTES

READING TIME: 40 MINUTES

Read the case notes and complete the writing task which follows.

Notes:

Patient: Anne Hall (Ms)

DOB: 19.9.1965

Height: 163cm Weight: 75kg BMI: 28.2 (18/6/10)

Social History: Teacher (Secondary – History, English)

Divorced, 2 children at home (born 1994, 1996)

Non-smoker (since children born)

Social drinker – mainly spirits

Substance Intake: Nil

Allergies: Codeine; dust mites; sulphur dioxide

FHx: Mother – hypertension; asthmatic; Father – peptic ulcer

Maternal grandmother – died heart attack, aged 80

Maternal grandfather – died asthma attack

Paternal grandmother – unknown

Paternal grandfather – died 'old age' 94

Childhood asthma; chickenpox; measles

Speaking (approximately 20 minutes)

The Speaking sub-test is specific to each profession, based on a typical workplace situation and the demands of the profession.

The test assesses candidates' ability to communicate in English, in a simulated health-related consultation. It consists of two simulated consultations in the form of face-to-face role-plays between a patient and a health practitioner. The candidate takes the role of the practitioner and the interviewer plays the patient or patient's relative/carer (or for veterinary science, the animal's owner/carer).

Candidates are assessed against the following criteria:

1. Overall communicative effectiveness.
2. Intelligibility.
3. Fluency.
4. Appropriateness.
5. Resources of grammar and expression.



Find out more

To find out more about OET and how it can help you select international healthcare professionals with the right level of English language proficiency, contact:

The OET Centre
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Australia

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www.occupationalenglishtest.org



CAMBRIDGE ENGLISH
Language Assessment
Part of the University of Cambridge



Global Educators™

The Occupational English Test (OET) is designed to meet the specific English language needs of the healthcare sector. It assesses the language proficiency of healthcare professionals who wish to register and practise in an English-speaking environment.

OET is owned by Cambridge Boxhill Language Assessment Trust (CBLA), a venture between Cambridge English and Box Hill Institute. Cambridge English Language Assessment is a not-for-profit department of the University of Cambridge with over 100 years of experience in assessing the English language. Box Hill Institute is a leading Australian vocational and higher education provider, active both in Australia and overseas.

