

PRACTICE TESTS



PRACTICE TESTS

Administering the Practice Tests

Practice tests are an opportunity to do a lot more with students than mock tests. Each practice test can be exploited to help students track their progress and improve their skills with support from a skills-based curriculum. Students often have the expectation that the more practice tests they do, the more they will improve. So, it is important to orientate them to the importance of taking practice tests in a way that will benefit them the most. It is not the number of practice tests they do that will help them improve, but how they prepare themselves by learning the necessary skills and then working on the feedback provided.

Scheduling practice tests

The number of times you schedule a practice test depends on where the students are in their preparation journey. A placement test should be administered at the beginning of the course to determine a student's CEFR level. Any standardised general English placement test can be used for this purpose. If your course caters to students who are new to OET and teaches all the test skills and tips students need to be ready for the test, then using an OET Practice Test as a placement test is strongly discouraged. This is because you only want to measure the student's language proficiency on entry into your course. Using a practice test will mean that test familiarity will distort the score that students achieve in your placement test.

As a teacher, you need to consider what the reason for a student not reaching their desired OET score after they complete your course could be. If your course only covers the necessary OET test skills and not language skills (such as basic grammar and other foundational English language skills), then your placement test needs to test language skills since they are not being covered in your course. An OET practice test will not sufficiently measure if prospective students have these language skills.

Beginning-of-course: In the first week, use the skills lessons that contain opportunities for guided practice of OET task types. Using a complete practice test at this stage is unnecessary since students may be unaware of the test format and task types. Even if they have this knowledge, it is better to introduce a practice test along with the skills and approach recommended in the lesson sketches. This helps them see the relevance of the skill to the task type and helps ensure that they perform better in the tasks.

Mid-course: As students begin to consolidate their skills, practice tests can be scheduled once every week. This can be done at the end of a week of classes or at the start of the following week.

End-of-course: As students go into the final leg of their preparation journey, practice tests can be administered more frequently, up to two or three times a week. However, it is equally important to give students feedback between each practice test, so they know which areas they need to improve in. It is also important to boost students' confidence before Test Day by providing as much constructive feedback as possible. There is no need to do a practice test immediately before Test Day – leave the last couple of days for rest and confidence-building activities.

Allowing some concessions for students earlier in the course when providing practice tests, such as extra time to read questions or discussing questions with classmates, can be useful. But it's important that you remove these concessions by the time you provide practice tests at the end of your course so that students receive an authentic test experience.

Practice tests in the Student's Book

There are two full practice tests in the Student's Book. Practice Test 1 has been largely used in the Listening and Reading lesson sketches to provide scaffolded practice during the *Applying the skill to an OET task* stage of the lesson. There are free practice tests on the OET website that you can also use during your course. Preliminary and Premium Preparation providers have access to more free practice tests from the shared OET library. When administering a practice test as a mock test, remember to create OET conditions such as switching off all devices, administering the tests in order of how they are administered on Test Day (L,R,W,S), etc.

Evaluation and sharing results

How you evaluate, share results and discuss feedback makes a significant difference to how much improvement your students can make through the administering of practice tests. Students should be aware of the purpose of assessments and feedback. Practice tests can be used to show students how far they have progressed and to help them understand the quality of their responses. You can make mock test feedback even more effective if the classroom feedback you give students during the *Applying the skill to an OET task* and *Doing an OET task* stages in the lesson sketches makes it clear to them which areas they need to work on and how they can improve. This will help them relate classroom feedback to mock test performance and feedback. Students can be encouraged to maintain a diary for reflection, and you may also provide extra material to help them improve a specific skill or language point.

On-time feedback: Feedback should be shared as soon as possible so that students can recall their performance. Two or three days after the test is administered is ideal.

Feedback: During feedback discussions, the focus should not be on how many answers students got wrong/right but on which of the answers they got wrong/right and why. The discussion should also focus on what they can do to improve their performance and avoid making similar mistakes in the future.

Listening and Reading

- Discuss why an answer option was correct and why the other options were incorrect.
- Explore students' reasoning for their choice of answer and encourage them to voice the method they used to arrive at their answer.
- Use transcripts or play select sections of the audio recordings when discussing answers.

Speaking and Writing

- Give students feedback using the assessment criteria and descriptors available in the chapter 'OET Fact File' of the Student's Book as well as the OET website. Provide concrete examples from their responses when explaining why you awarded them the band.
- Assign a band as described in the assessment criteria and not a grade (A, B, C, C+) or a score from 0–500.
- Record mock Speaking sub-tests with the consent of students to help them see why you assigned a certain band.
- Focus feedback on what has been covered so far, particularly on what was covered during the week preceding the test, so that students understand how they performed in what has been taught.
- Provide audio feedback for the Writing sub-test in the form of a recorded message if possible, so that students can go back to it and understand how their response was marked according to the assessment criteria.
- Encourage students to rewrite their letters based on the feedback they have received from you.

Individualised feedback and counselling: Having counselling sessions and one-to-one student-teacher discussions after the results is a useful tool to help students gain confidence. Each session can be about 10–15 minutes and during these sessions you can ask students to:

- identify their strengths in performance on this test and the course so far
- reflect on areas where they need to improve
- voice any concerns they have about the course, test, performance, etc.
- give your feedback on the course content
- ask questions that they may not have had an opportunity to ask during the class
- develop an individual study plan in consultation with other teachers that helps them address areas of improvement through easy-to-access online resources.

You can also use this time to make students aware of their learning style and give them tips on how they can practise in a way that suits it. These sessions can be recorded on an Excel sheet, so that teachers can track development, while students can be encouraged to keep a diary for their own reflection on the counselling session, where they may also record areas of strength and improvement after each mock test.

Self-evaluation: Students are generally aware of where they have made mistakes. Giving them time to self-evaluate their letters using the criteria before you hand out your corrected version will build confidence and autonomy. Make a photocopy of each letter before you mark any corrections and give this correction-free copy to students. Alternatively, make all your corrections separately. If you think that your class is not comfortable with the idea of self-evaluation, you can first model using an example. Students can prepare a checklist for the next week/test based on their performance. If the rapport and confidence between your students is strong, you could consider having students evaluate each other's letters rather than their own.

Standardisation of feedback: It is important that students receive standardised feedback. To achieve this, your school can organise a standardisation of the marking exercise that involves all teachers. Set aside a day in the week where all teachers can evaluate a Writing and Speaking sample from a student, selected randomly. Teachers can first assess it individually and then compare their corrections, including their interpretation of the band descriptors.

Publishing: Results can be collated in an Excel sheet and emailed to students. Unless your language school already has a policy, you can ask your students whether they are comfortable with having their results displayed in a central location or sent as individual sheets, or both.

Listening Sub-test

Although students may have already answered the question and know if their answers are correct or not because you have marked them, checking answers with them is a good way to reinforce the approach that you taught them in class. It is also an opportunity for you to learn how students are answering questions, so it is a good idea to ask them to explain how they arrived at their answers. A few select questions from the Listening sub-test have been discussed here from each practice test. The approach for each question is consistent with the lesson sketches recommended for each part of the Listening sub-test.

Practice Test 1



PT-1

Listening Part A

During the thirty seconds' reading time, students should be anticipating what kind of information will fit in the blanks, using the context sentence, sub-headings and incomplete notes to help them. In the discussion below, the bracketed information in italics is possible predictions for each of the blanks.

Extract 1

The context sentence tells us that this is a consultation between a neurologist and a patient called Vincent Cheung. Using this and the incomplete notes, it's clear that the patient is talking about facial pain, caused by problems with nerves. The information in brackets here indicates what kind of prediction a student might make after looking at the notes. It's important to use the key information in the notes to anticipate answers.

Questions 1–6

Initial symptoms

- facial pain – started three months ago
- pain described as **(1)** _____ (*description of nerve pain such as tingling or burning*)
- mainly affects right side of the face (cheek, teeth and **(2)** _____) (*part of the face such as forehead, nose*)
- compares the sensation to **(3)** _____ (*something that can cause pain such as a slap across the face, a knife stabbing in the side*)

Triggers

- washing face, brushing teeth and **(4)** _____ (*an action that may apply pressure to the face such as putting on cream, applying makeup*)
- anything touching the face (including **(5)** _____) (*something that comes in contact with the face, especially something that's not expected to cause pain*)
- eating or drinking
- spontaneous or lengthy **(6)** _____ (*an action associated with the face, such as laughing, smirking*)

Anticipating is important because it prepares students to listen. Predictions do not have to be accurate as the purpose is to help students prepare to listen, not make correct guesses. The answers to Questions 1–6 are:

- (1) searing
- (2) jaw
- (3) (an) electric shock(s)

- (4) shaving
- (5) (the) wind
- (6) smiling

Remember that in the Listening sub-test, a candidate can get marks for an answer as long as the meaning is clear. So, it is important to convey that some errors may still be accepted. Look at each error and award the mark if the word is recognisable and the meaning is unaffected. If students still have questions, you could explain this to them, emphasising that Assessors are trained to mark errors in the Listening sub-test. Though students should be alerted to the spelling errors they have made, avoid giving them the impression that all spelling errors are treated the same way and if a word is even slightly misspelt, it is marked incorrect. When checking answers, discuss the kinds of spelling errors that students have made and help them understand why the spelling was incorrect.



Listening Part B

During the 15 seconds that students have before each recording is played, they should actively think about the context sentence, the question and answer options. They can anticipate what they may hear as they think about each of these.

Question 25

- Look at the context sentence.

The context sentence indicates that the conversation is between a nurse and a patient who is going to have a mammogram. The nurse could be discussing different things about the mammogram, such as how long it will take, what the side effects are, if it is painful, etc.

- Read the question with the context in mind.

The question asks, 'What is the patient's main concern?'. So, we are asked to listen for what is worrying the patient the most about the mammogram.

- Think about the answer options.
 - Option A suggests that the patient wants to have the results soon, probably for personal reasons.
 - Option B suggests that the patient may be concerned about the risks or side effects, for example, the radiation. Possible expressions would be, 'What are the risks?', 'Is it harmful?', 'Can I expect any side effects?' etc.
 - Option C suggests that the patient's concern is with the pain, and you might hear her saying things such as, 'Will it be painful?', 'How painful will it be?', 'I'm scared of the pain', etc.
- Choose the option that matches your own answer.

While the patient begins by discussing the idea in Option B, this is not her main concern. She says, *'I do have a few questions actually,'* which hints that while these are simply questions that she has, they may not necessarily be something she worries about. Next, she goes on to discuss the idea presented in Option A, but we know this isn't the main concern since she was reminded of her trip by something the nurse said. If this was her main worry, she wouldn't need something to 'remind' her. Option C is the correct answer because she clearly indicates this as her main concern by saying, *'the big question is, is it going to hurt?'* She goes on to explain the cause of this worry by saying that she has heard terrible stories and her *'anxiety levels are going through the roof'*. This shows that she is really stressed and worried about the pain, making it her main concern.

Question 27

- Look at the context sentence.

The context sentence states that a dentist and her assistant are talking about a problem with some sterilising equipment. Possible problems with the equipment could be that it is not working properly, it needs regular maintenance or that a part is damaged.

- Read the question with the context in mind.

The question asks, 'What does she ask her assistant to do?'. So, we are listening for an instruction that the dentist gives her assistant in relation to the problem with the equipment.

- Think about the answer options.

Option A suggests that the assistant needs to tell other staff through email, a notice or a message that it isn't working. We can expect to hear an instruction from her to the effect of 'write an email' or 'put up a notice on the equipment'.

Option B suggests that the assistant is supposed to call the company that maintains the equipment, so the instruction would be something such as, 'call the maintenance company to come and have a look'.

Option C suggests that the assistant must check the insurance document to see if repairs are covered, so the instruction would be something such as, 'look at the insurance document and see if it's covered'.

- Choose the option that matches your own answer.

The assistant offers to have a look at the manual and see if he can fix it himself, but the dentist says that this may cancel the warranty. She suggests that the assistant ask the receptionist to call the maintenance company. So, Option B is incorrect because the instruction to the assistant is not to call the company himself but to ask reception to call them. Option A is the correct answer because the dentist asks the assistant to send 'a quick group email' to let everyone know it's 'out of order' (not working) until the maintenance people come. The dentist says that 'it's still under guarantee', which suggests that the repairs are covered and there is no action required from the assistant regarding it.



PT-1

Listening Part C

Students have 90 seconds to read the questions for each Part C extract before the audio begins. During this reading time, students should focus on the context sentence that gives them an idea of the topic or theme of the interview or presentation. The second half of the context sentence, for example '*the time she spent working as a volunteer in South Sudan*' in the extract, is especially important as it narrows down the discussion further. With this theme in mind, students can continue reading the question and answer options. While reading the questions, students should be encouraged to pay attention to what the question is asking, especially if questions are focussed on identifying attitude and opinion. Understanding the questions will help them know what to look out for in the answer options and, subsequently, in the audio.

Extract 1

The context sentence tells us, 'You will hear an interview with a midwife called Christina Morello, who is talking about the time she spent working as a volunteer in South Sudan'. From this we understand that she will probably share her experiences, observations and reflections as a midwife volunteer there. A cursory look at the questions should give students the overall flow of the interview.

31. When she was thinking of applying to go to South Sudan, Christina was most concerned about whether ...
32. What aspect of her role in South Sudan surprised Christina?
33. Christina suggests that complicated deliveries in South Sudan are related to ...
34. Christina talks about her patient called Margaret in order to highlight the ...

35. Christina says that the hardest thing to adapt to in South Sudan was ...

36. In Christina's opinion, what is the most valuable skill for a midwife working in South Sudan?

Once students understand the overall flow of the interview, they can underline the relevant words in the answer options. Because this is an interview, the interviewer's questions will clearly indicate when the student should move from one question to the next.

Question 31

- Read the question.

The question stem states, 'When she was thinking of applying to go to South Sudan, Christina was most concerned about whether ...' so we need to listen for what worried her the most during the application phase.

- Underline words in the answer options to help you focus.

A. her skills would be required.

B. she would miss her home and family.

C. she would be put in a dangerous situation.

- Discuss the answer.

The interviewer begins with the question, 'Christina, could you tell us why you wanted to go and how you felt?'. When Christina described her reasons for going, she said she wanted to make a difference and also felt it would be an adventure. After explaining this, she introduces what concerned her by saying, 'I was just worried that the charities wouldn't need midwives', and later goes on to say, 'you always hear about the huge demand for nurses and my experience lies in delivering babies'. This relates to her skills being different than was in demand and this concerned her. So, Option A is correct. She mentions Options B and C, but this is what her family members were worried about, not what she was worried about.

The interviewer moves to the next question, which should be a cue for the student to move to the next question in the booklet.

Question 32

- Read the question.

The question asks, 'What aspect of her role in South Sudan surprised Christina?'. So, we are looking for what part of her job as a midwife came as a shock to her.

- Underline words in the answer options to help you focus.

A. the long working hours

B. the impact on the local people

C. the number of births she had to deal with

- Choose the option that matches your own answer.

Christina begins by saying she did a lot of different tasks that were demanding, which means they challenged her, but she also states that all this was 'satisfying' and 'rewarding'. Up to this point we haven't been told what surprised her. However, she introduces what did surprise her with the words, 'But what really shocked me was ...' and then goes on to describe it, 'the sheer volume of deliveries I was dealing with – it was astonishing! There seemed to be a never-ending stream and a lot of them were complicated. I regularly worked 36-hour shifts.' Option C is correct because we are clearly told that it is the number, or volume, of the births that shocked her. Option A is incorrect because the long working hours didn't surprise her, they were a result of the large volume. Option B is incorrect because she does speak about the difference she made in her role and therefore the positive impact she had, but this impact is not shocking or surprising – it is rewarding.

Extract 2

The context sentence tells us, 'You hear a GP called Dr Edward Symes giving a presentation about how the condition called Myalgic Encephalomyelitis (ME) affects young people.'. From this we understand that the GP will be talking about the impact of this condition on young people, which could include its symptoms, difficulties faced by young people who had ME, and perhaps something about treatments. A cursory look at the questions should give students the overall flow and possible topics in the presentation.

37. How did Dr Symes feel about the girl called Emma having ME?
38. Dr Symes decided to specialise in ME because he came to realise that ...
39. Dr Symes feels that a reliable diagnostic test for ME would be helpful because ...
40. Dr Symes thinks that the most challenging aspect of the illness is the way ...
41. What does Dr Symes think GPs should do to help patients manage ME?
42. What reservations does Dr Symes have about the use of CBT?

Once students understand the overall flow of the presentation, they can underline relevant words in the answer options.

Question 37

- Read the question.

The question asks, 'How did Dr Symes feel about the girl called Emma having ME?'. This means we need to listen for his feelings about a patient called Emma.

- Underline words in the answer options to help you focus.
 - A. concerned about the effect it was having on her life
 - B. curious about what her actual symptoms were
 - C. upset about how her teachers had reacted
- Choose the option that matches your own answer.

Dr Symes begins by describing how the ME first began in his daughter's friend, Emma. He explains how this affected both her social and physical wellbeing because she could not cope with the exertion. He reveals his feelings about this when he says, '*The impact of this on her physical and mental health troubled me ...*'. Therefore, Option A is the correct answer because Dr Symes' feelings towards Emma are of concern. Option B is incorrect because he does not indicate his curiosity about the symptoms which are, in fact, noticeably clear, i.e. exertion. Although Dr Symes describes that people did not understand and tolerate her condition, Option C is incorrect because it describes the cause of his worry rather than the worry itself, i.e. why he was worried, and not what his feelings were.

Question 38

Dr Symes gives the cue for this question when he says, '*It was a chance meeting that resulted in me deciding to specialise in ME ...*'.

- Read the question.

The question stem states, 'Dr Symes decided to specialise in ME because he came to realise that ...' so we are listening for the reason for his decision to choose ME as his specialisation.

- Underline words in the answer options to help you focus.
 - A. no effective treatment existed for it.
 - B. so many families were affected by it.
 - C. there was a lot of ignorance surrounding it.

- Choose the option that matches your own answer.

Dr Symes describes meeting Emma's mother at the local pharmacy. After listening to Emma's mother describe the problems they were facing, it became clear that Emma not only struggled with the physical aspect of the sickness, but also had to deal with the attitude of her peers who didn't understand the sickness and thought Emma was using it as an excuse to stay away from school and other activities. Hence Option C is the correct answer because Dr Symes felt that a person with ME shouldn't have to worry about justifying themselves to others. Dr Symes does mention that there is no cure for ME but that this wasn't his reason for specialising in it, so Option A is incorrect. Option B is incorrect because Dr Symes only describes how Emma's family was affected by it.

Practice Test 2



PT-2

Listening Part A

During the 30 seconds' reading time, students should anticipate what kind of information will fit in the blanks, using the context sentence, sub-headings and incomplete notes to help them.

Extract 1

The context sentence tells us that this is a consultation between a gastroenterologist and a patient called Martin Rush. The sub-headings and incomplete notes indicate that the patient has a problem with digestion and is managing the problem on his own.

Questions 1–7

Symptoms

- troubled by severe **(1)** _____ (especially after meals) (*could be a symptom such as heartburn or indigestion that relates to the stomach*)
- brings up **(2)** _____ (*could be food or anything else from the stomach*)
- frequent belching and burping
- constantly feels **(3)** _____ (*a feeling related to the discomfort caused by belching or burping; gassy*)
- pain on **(4)** _____ (*where or when the pain occurs*)
- discomfort when lying down (especially at night)
- no sickness or diarrhoea

Management of condition

- taking **(5)** _____ (over the counter) (*name of medication that treats the symptoms described*)
- dietary changes
- reduced **(6)** _____ intake (*a food or drink that aggravates stomach problems such as heartburn or indigestion*)
- having a **(7)** _____ after dinner (*some sort of remedy to help with the symptoms*)

Anticipating is important because it prepares students to listen. Predictions do not have to be accurate as the purpose is to help students prepare to listen, not make correct guesses. The answers to Questions 1–7 are:

- (1) heartburn
- (2) bile
- (3) bloated

- (4) swallowing
- (5) antacid(s)
- (6) alcohol
- (7) walk



PT-2

Listening Part B

Question 25

- Look at the context sentence.

The context sentence tells us that a patient's baby has come in for childhood immunisations. The conversation could be about things such as what the immunisation is for, how the baby will feel afterwards, whether a booster is required or not, how many years of protection it offers, etc.

- Read the question with the context in mind.

The question asks us, 'What is the nurse emphasising?' so we need to pay attention to what the nurse is trying to stress about the immunisations. The nurse may use language such as 'I'd like to stress that ...', 'It's vital to understand that ...', 'It is important that you understand that ...' etc.

- Think about the answer options.

- Option A suggests that the nurse is stressing that the procedure is safe, especially if the parent has voiced concerns. You may hear the nurse say, 'there are no side effects / the side effects are mild' or 'the procedure is safe'.
- Option B suggests that the nurse is telling the parent which adverse reactions could be dangerous for the baby. Perhaps the nurse is educating the parent on how the baby might react to the shot and which reaction(s) would necessitate medical attention.
- Option C suggests that the nurse wants the parent to understand that booster shots are important and shouldn't be missed. The nurse may say, 'it is important to remember to bring the baby back for boosters' or 'you shouldn't miss the boosters'.

- Choose the option that matches your own answer.

Option A is the correct answer because the nurse begins by using language to emphasise the point, 'Now, before I go any further, I'd like to make it clear that there is no risk whatsoever of your baby contracting any of these diseases from the vaccination' and also explains the reason why it's safe, 'as it (the vaccine) doesn't contain any live organisms.' Option B is incorrect because while the nurse describes the different side effects, there is no danger associated with any. In fact, the tentative language used (*may, might*) suggests that they are only a possibility. Option C is incorrect because this is mentioned as a requirement, but the nurse does not use any language to emphasise this.

Question 29

- Look at the context sentence.

The context sentence tells us that the GP is talking to a patient in the setting of a community practice where patients come in for a variety of health problems.

- Read the question with the context in mind.

The question stem states, 'The patient wants to establish whether ...' so we need to understand what the patient's main question to the GP is.

- Think about the answer options.

- Option A suggests that the patient is asking whether she can come with her daughter on visits in the future, which probably means there has already been a visit. You may hear the patient say

something such as, 'I'd like to know if I can come with her next time.' or 'Am I allowed to come with her?'.

- o Option B suggests that she's asking if it is legal for her to know information about what happens during a visit or any another information related to her daughter's treatment.
- o Option C suggests that the patient wants to know if the daughter, on a previous visit, was informed about her rights as a patient. She may say something such as, 'Was she told that ...'.
- Choose the option that matches your own answer.

From the conversation we understand that her 15-year-old daughter visited the community practice on her own before the mother's visit. The mother has come to ask what rules or laws exist in the country regarding confidentiality. In other words, the mother is asking if the laws allow her to access information because she says, '*I mean, surely as her parent I'm allowed to know what's going on?*'. Therefore, Option B is the correct answer. Option A is incorrect because under 15s are allowed to come and see the community practice without letting anyone know. So, the daughter is entitled to go alone on future visits without being accompanied by her mother. Option C is incorrect because although there is a discussion on the rights of under 15s, it is clear that the daughter knew of her rights to visit a GP at a community practice.



PT-2

Listening Part C

Extract 1

The context sentence says, 'You hear an interview with a bio-engineer called Mark Kendall, who has developed a new method of administering vaccinations called a 'nanopatch''. From the second part of the context sentence we can anticipate that the bio-engineer is probably going to be interviewed about how these 'nanopatches' are different to conventional vaccinations and how they are beneficial. A quick look at the questions will give a better idea of the content of the interview.

31. Mark says that the needle and syringe vaccination method needs to be updated because ...
32. Mark says the nanopatch is particularly successful at delivering vaccines due to ...
33. What does Mark see as a key advantage of the nanopatch?
34. Mark thinks that the low cost of the nanopatch means that ...
35. What challenges in transporting needles and syringes does Mark identify?
36. Papua New Guinea was chosen for nanopatch trials mainly because ...

Once they understand the overall flow of the interview, students can underline relevant words in the answer options. Since this is an interview, the interviewer's questions will clearly indicate when the student should move from one question to the next.

Question 31

- Read the question.

The question stem states, 'Mark says that the needle and syringe vaccination method needs to be updated because ...'. This means we need to listen to why he thinks the traditional method of vaccination needs to be reviewed.

- Underline words in the answer options to help you focus.
 - A. patients are complaining that it's too painful.
 - B. it's becoming less effective in protecting against new diseases.
 - C. people who are frightened of needles are not being immunised.

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- Choose the option that matches your own answer.

Option C is the correct answer because Mark says that people's fear of needles stops them from getting vaccinations. Option B is incorrect because although he mentions herd immunity being lowered against life-changing diseases, this is not because of the method of delivery of the vaccination, i.e. needle and syringe, but because people are reluctant to receive vaccinations due to their fear of needles. Option A is incorrect because while phobia of needles is mentioned, Mark does not get into the reasons that caused the phobia, one of which may be pain.

Question 32

- Read the question.

The question stem states, 'Mark says the nanopatch is particularly successful at delivering vaccines due to ...'. So, we are listening for why the nanopatch is an effective method of vaccination.

- Underline words in the answer options to help you focus.

A. the size of the equipment that's needed.

B. the way the substance is delivered.

C. the material from which it's made.

- Choose the option that matches your own answer.

Option B is the correct answer because Mark explains that the patch directly targets the skin which contains more immune cells than muscles which are the target of a needle. Option A is incorrect because while he does mention the size of the patch, this is not the reason for its effectiveness in delivery of the vaccine. Option C is incorrect because while Mark does mention certain properties of the patch such as the projections and the vaccine powder, there is no direct reference to the actual material the patch is made from.

Reading Sub-test

Practice Test 1



Reading Part A

Matching questions: The purpose of the matching questions in Reading Part A is to assess if students can locate where to find the information they need. The best way to approach the matching questions is to use different features of the four texts to understand what kind of information they are likely to contain. When checking answers to Reading Part A matching questions from the practice tests, ask students to share which of the features they used to help them understand the content of the text. Some tests may have seven matching questions while others may have eight.

Note: In this Teacher's Book, we have chosen to focus the discussion on analysis of the matching questions in Practice Test 1 and short answer and sentence completion questions in Practice Test 2.

Questions 1–7

Question	Answer	Text features
1. The type of IV line to use for a transfusion	B	The title 'Intravenous Access' indicates that this text contains information on IV and therefore information on what kind of IV line should be used. The other texts are not specifically about IV.
2. What to check before administering a transfusion	A	The heading 'Management of Blood Component Transfusion' indicates that this text appears to be advice on managing the process of blood transfusions. Therefore, it is more likely to have advice on pre-transfusion checks. The sub-headings 'Pre-transfusion procedure', 'Step 1' and 'Step 2' confirm this.
3. Recognising the severity of adverse reactions	D	The heading 'Adverse Transfusion Reactions' indicates that this text deals exclusively with adverse reactions. A further look at the table confirms this as it shows the categorisation of these reactions as 'Mild', 'Moderate/severe' and 'Life-threatening'.
4. Transfusion rates for different blood products	C	The heading 'Blood component administration to adults' hints that this text contains specific instructions on how to administer blood. The 'Blood component' column indicates the different blood products and a quick glance at the content under 'Administration notes' shows rates such as 4 mL/kg, 12–15 mL/kg, etc. Together, this helps one understand that this table shows different transfusion rates for different blood products.
5. What patient information to record	A	The student should already know that Text A contains general information on managing the process of blood transfusion after answering Question 2. Therefore, a quick look at Text A indicates that all vital signs must be recorded under 'Blood transfusion observations'.

6. How to respond if a patient becomes unwell during a transfusion	D	The title 'Adverse Transfusion Reactions' should clearly tell the student that this text contains information on adverse reactions. A look at the three columns confirms this since the third column 'Management' tells the medical professional what to do in the event of a reaction in any category.
7. Storage of blood products	A	'Management of Blood Component Transfusion' contains information on the process, including what pre-transfusion steps to follow for patients undergoing transfusions. The sub-heading 'Technical advice' provides information on storage and one can understand this from the mention of 'removal from fridge'.

As students find the answers to the matching questions, they become more familiar with the content and purpose of these texts, so halfway through the questions they should understand that Text A contains generic information related to the pre-transfusion process for patients, and the storage and checking of vitals; Text B contains very specific information on how to use an IV during transfusions; Text C contains details on the administration of doses for different blood components; and Text D tells the medical professional what kind of adverse reactions may occur, their symptoms and what to do. Students should now use this knowledge to decide which text they need to look at to find answers to questions 8–20.



Reading Part B

The Student's Book encourages students to approach the question using the context provided in the question, the audience, and the purpose for reading. Question 2 has been discussed here using the same approach.

Question 2

- What kind of extract is this and who are the intended readers?

This is an extract from a policy document regarding decontamination of equipment. The extract deals with decontamination prior to service or repair. Intended readers are probably supervisors or healthcare staff directly or indirectly involved with equipment maintenance.

- Why would readers need to read this sort of communication?

This sort of communication might help readers to check the document to understand the steps to take in order to decontaminate a piece of equipment before sending it for service or repair.

- What is the question asking you to do?

The question stem states, 'The extract from the policy document states that decontamination of equipment...'. So, from the three answer options provided, we are looking for information on what this specific extract advises on decontamination.

- Now, answer the question.

Option C is the correct answer because the policy document advises that decontamination should take place prior to inspection, repair or transportation, and that paperwork is required except in the case of equipment that is the subject of an investigation. Option A is incorrect because this part of the extract does not deal with who should be decontaminating the equipment. The extract also states that the supplier should expect the equipment to reach them with accompanying paperwork that gives its contamination status. Option B is incorrect because the second paragraph clearly indicates that there may be a situation where equipment is dispatched on the hospital premises and if such equipment is sent without contamination status, it may be rejected, clearly indicating that decontamination can be done on the premises.



Reading Part C

PT-1 Questions 7 and 11 from Text 1 have been discussed here.

Question 7

- Read the question.

The question states, 'In the first paragraph, the writer suggests that egg freezing will make it easier for women to ...'. This means we are being asked to identify what the writer thinks the result of egg freezing will be.

- Go to the relevant part of the article.

The answer is in the first paragraph as the question indicates.

- Read the text and try to answer the question in your own words.

The writer says that egg freezing could help women delay having children for as much as a decade. So, the result would be that they have more of a choice about when to have children. The writer suggests the result of egg freezing is the choice to have children later in life.

- Read the answer options.

- Option A suggests that egg freezing allows them to decide if they want to have children at all.
- Option B suggests that women can manage time efficiently with egg freezing.
- Option C suggests that they can have more children because of egg freezing.
- Option D suggests that they can lengthen the window of fertility.

- Choose the option that matches your own answer.

Option D is the correct answer because this is the direct result of egg freezing. Option A is incorrect because egg freezing is for women who want to have children, so it has no bearing on *if* women want to have children, but does affect *when* they want to have children. Option B is incorrect because although there are references to time in the paragraph, they are all related to extending the amount of time a woman is fertile. Time management is not the intended result. Option C is incorrect because the number of children one chooses to have is inconsequential to egg freezing; its main outcome is having the choice to have children later.

Question 11

- Read the question.

The question asks, 'What reservation does the writer express about the programme in Urayasu?', so we are looking for why the writer thinks the programme may not work as well as planned.

- Go to the relevant part of the article.

The fourth paragraph begins with the words, 'The city of Urayasu in Japan...' which indicates that this is the part of the article we need to read.

- Read the text and try to answer the question in your own words.

The text describes how the city has planned to sponsor an egg freezing programme in an effort to boost fertility rates and a dwindling population. However, the writer's reservation is clear in the second half of the paragraph where the writer explains that egg freezing is only a short-term solution and does not address the root of the problem, i.e. fundamental changes to society such as allowing flexible work schedules, childcare, paid parental leave and cheaper housing that will encourage people to have children when they are younger.

Practice Tests

- Read the answer options.
 - Option A suggests that the writer's reservation with the egg freezing programme is that it does not pay attention to the reasons why the population is shrinking in the first place.
 - Option B suggests that the writer's reservation is that taxpayers' money should be spent on something else.
 - Option C suggests that the egg freezing programme is likely to make the problem of a low national birth rate worse in the future.
 - Option D suggests that the programme needs more time to be effective.
- Choose the option that matches your own answer.

Option A is the correct answer because the egg freezing programme does not address the underlying or fundamental reasons for the current low birth rate which are contributing to the fact that couples are delaying having children or not having children at all. Option B is incorrect because the writer does mention 'public money' being used to cover the costs of the programme but does not express any reservations about the fact that it was being used. Option C is incorrect because the writer mentions that egg freezing is a short-term solution, so it will work for a while after which it won't yield results, i.e. it will stop being effective but it won't make the problem worse. Option D is incorrect because the writer's reservation is that egg freezing is not really the solution to the problem it is trying to solve, so it won't work regardless of how much time is given to it.

Practice Test 2



PT-2

Reading Part A

For the purpose of this Teacher's Book, we have chosen sentence completion and short answer questions as the focus of discussion in Practice Test 2. When students have finished the matching questions, they should be somewhat familiar with the four texts and the kind of information they can expect to find in these texts. Using this knowledge, they can proceed to answer the short answer and sentence completion questions.

Short answer questions: Using the approach recommended in the Student's Book, we can find the answers to these questions. Questions 8 and 14 have been discussed here.

Question 8

- Read the question carefully.

The question is 'Which type of MRSA is most responsive to antibiotics?'. So, we are looking for the MRSA strain that can be treated with antibiotics easily.

- Understand the kind of information you need to find.

We need to find the type of MRSA, so we are looking for the name of a type of MRSA.

- Find the relevant section.

This information is likely to be in the text that describes the two types of MRSA, i.e. Text B which is a table. Using the table row headings, we see that there is a row called 'antibiotic susceptibility' so this is the section that most likely contains the information.

- Read the surrounding text.

We read information about both types of MRSA and we see that CA MRSA is 'susceptible to more antibiotics' versus HA-MRSA which is 'often multi-resistant' and results in a 'limited choice of agents'. This information answers the question because it tells us that between the two types of MRSA, the CA MRSA type responds to antibiotics better.

- Copy the relevant information.

We need to copy the information we find in the text as the answer, so we write 'CA (Community Associated) – MRSA'. This answer is acceptable because the meaning is not affected; it means the same as 'CA-MRSA (Community Associated)'.

Sentence completion questions: The questions progressively require more careful reading from students, but by the time they reach these questions, they should be more familiar with the texts. The same approach can be used effectively to find these answers.

Question 14

- Read the question carefully.

'You can administer _____ without needing to set up another IV.' The question is asking us what can be given to a patient without having to set up another IV.

- Understand the kind of information you need to find.

The information we are looking for is the name of something that we need to 'administer' through an IV, so we are likely to be looking for the name or type of medication because medication is often administered through this method.

- Find the relevant section.

Since we are looking for the name or type of medication, this information is likely to be in the 'Antibiotic treatment' text (C). In the 'Administration' column of the table, we see 'IV'. Although there is nothing mentioned about setting up an IV, we can see that the name of one of the medications has an asterisk against it. If we follow the asterisk to the bottom of the table, it says, 'administered via existing IV (piggyback).'

- Read the surrounding text.

The rest of the names of medication in the 'IV' section of 'Antibiotic treatment' do not mention this 'piggyback' method of administration so we can conclude that this is the only medication for which this is possible. This answers our question because it tells us that there is one medication for which a separate IV does not have to be set up.

- Copy the relevant information.

We need to copy the information as the answer without changing it in any way, so we write 'Daptomycin (Cubicin)' as the answer.



PT-2

Reading Part B

The Student's Book encourages students to approach the question by using the context provided in the question, the audience, and the purpose for reading. Question 1 has been discussed here using the same approach.

Question 1

- What kind of extract is this and who are the intended readers?

The extract is a memo on a staff flu vaccination programme that has been sent out to all hospital staff.

- Why would readers need to read this sort of communication?

Hospital staff would read this memo to understand more about the conditions and requirements of the vaccination programme.

- What is the question asking you to do?

The question stem states, 'According to the memo, staff requiring a free flu vaccination must ...' so the question is asking us to find out what staff should do if they want a free flu vaccination.

- Now, answer the question.

Option A is the correct answer because all the categories of staff mentioned in the memo – general staff, staff in community settings and staff under 18 – need to contact an on-site body such as Peer Immunisation or Occupational Health to have their vaccination as mass vaccination clinics are no longer available. Option B is incorrect because the fourth bullet point clearly says, 'the above information applies to staff aged 18 and over only' which means that responding electronically for an appointment is not an option for staff who are 17 or younger. Option C is incorrect because the memo is addressed to all staff, including those under 18.



Reading Part C

PT-2

Questions 9 and 12 from Text 1: Medical Cannabis are discussed here.

Question 9

- Read the question.

The question states, 'In the second paragraph, the phrase 'nipped in the bud' is used to express the idea that ...' so we are looking for what the phrase refers to in the context of the article.

- Go to the relevant part of the article.

The phrase is in the last part of the second paragraph.

- Read the text and try to answer the question in your own words.

The paragraph speaks about how cannabis was introduced and used in the West as a mainstream drug from 1850 to 1915. The writer then introduces a contrast 'however' and states that scientific innovation stopped with prohibition of the drug. So, the phrase refers to a sudden end to scientific enquiry that could have been possible.

- Read the answer options.
 - Option A suggests that there was a therapeutic trial involving cannabis which was unsuccessful.
 - Option B suggests that there could have been further study with cannabis which could not take place.
 - Option C suggests that another discovery changed people's attitudes to cannabis.
 - Option D suggests that a theory involving the use of cannabis in medicine was shown to be false.
- Choose the option that matches your own answer.

Option B is the correct answer because the article states that further scientific study and breakthroughs with cannabis could not take place because of the rise of a series of laws prohibiting its medical use. Option A is incorrect because there were 'experiments' undertaken to treat different medical problems with cannabis but these were not 'trials'. There is also no direct reference to their success or failure although we can infer that the experiments were successful because cannabis found its way into the mainstream. Option C is incorrect because it was the subsequent prohibition and not a new discovery that changed people's attitude to cannabis. Option D is incorrect because scientific studies related to cannabis had only begun and its use as a treatment was being accepted in the mainstream until the prohibition took effect.

Question 12

- Read the question.

The question stem states, 'In the fifth paragraph, it is suggested that the study of children with ASD...'. This means that we need to understand what the writer thinks about this study. The writer may not say anything directly, but we need to understand what is being implied.

- Go to the relevant part of the article.

In the first part of the fifth paragraph the writer explains the study and reports its findings. We find the writer's comments on the study in the second half of the paragraph.

- Read the text and try to answer the question in your own words.

While the first half of the paragraph reports that the results were positive, it also reveals that the study was 'observational' and parents who took part in it had voluntarily opted in. Although the study was still promising, the results may have been favourable due to the parents' own opinion or bias. Hence there is a need for a standardised trial. Therefore, the writer is suggesting that the study was influenced by the participating families and that more work needed to be done.

- Read the answer options.

- Option A says that the study was not required to follow standard clinical procedures.
- Option B suggests that the study was influenced by the participants' own hopes.
- Option C suggests that the results of the study were especially applicable.
- Option D suggests that the study produced results that people were not expecting.

- Choose the option that matches your own answer.

Option B is the correct answer because the writer suggests that the limitation to the study was that it was influenced by the families who participated. Option A is incorrect because the study followed the observational method of reporting results and was not exempted from following clinical procedures. An observational study is different from a controlled clinical trial but that does not make it exempt from following protocol, although this may not be the protocol required for a clinical trial. Option C is incorrect because the writer calls the results encouraging but also calls for more trials showing that more evidence was required. Option D is incorrect because the beginning of the fifth paragraph suggests the opposite. Since cannabis is used across the world to treat different medical problems which 'read like a medical encyclopaedia', it should come as no surprise that it would be effective in treating ASD as well.

Writing Sub-test

When discussing letters for OET Writing tasks, it is important to remember that there are several ways to write the letter. If you use the sample answer in class, then discuss it and talk about the following:

- How students' letters are similar or different to the sample
- Why they think there are differences
- How including or excluding information makes an impact on the reader

Even with the sample letters given in the Answer Key, it is important to remember that it is, after all, a sample, so you cannot assume that it contains absolutely all the relevant information and that anything it excludes is all irrelevant. Sample letters can be used as guides but remember that a student may also include a semi-relevant case note which may not be found in the sample letter. If Assessors can see from the candidate's letter the reason for its inclusion, it is acceptable in any OET Writing task. Moreover, students often get fixated on certain case notes but it is important to remind them that the measure of a 'good letter' is not whether a case note has or has not been included but whether the letter communicates the purpose and message to the reader efficiently.

Students can be encouraged to mark their own letters against the assessment criteria and level descriptors in the chapter 'OET Fact File'. After reading the criteria, they can be asked to match the description they think fits their letter.

The annotated notes here comment on the relevant and irrelevant case notes. Remember that there are times when the case note may be relevant but needs to be summarised for the reader. There are also times when only a part of a case note is relevant to the reader.

Practice Test 1



PT-1

Purpose of the letter

Mrs Gillian Dorey, the community nurse, is responsible for providing continued care for Mr Bob Warren immediately after his discharge for a total knee replacement. Community nurses are involved with caring for elderly patients like Mr Warren and when they do so, they perform several different tasks such as dressing, administering medication, ensuring compliance, checking blood pressure, setting up drips and monitoring ongoing care. In the case of Mr Warren, the discharge plan sets out specific responsibilities such as dressing of wounds, monitoring of pain medication and compliance with the exercise programme which will help to achieve the purpose of continued care.



PT-1

Relevant notes

Name and age of the patient are generally mentioned in the Reference (RE) line of the letter.

Case notes	Annotation
Patient details <ul style="list-style-type: none"> Reason for admission: Right Total Knee Replacement (TKR) 	<p>We know that the community nurse Mrs Dorey has not interacted with Mr Warren before, so this is relevant information to include because the nurse needs to know the main medical issue for which the patient requires continued care. While the sample letter mentions that 'he is being discharged home today into his wife's care', this does not mean his marital status itself is a relevant detail for continued care.</p>

<p>Medications</p> <ul style="list-style-type: none"> • Rivaroxaban 10 mg orally one per day • Atorvastatin 40 mg orally* • Aspirin 75 mg orally once per day • Tylenol 3; 360 mg four times per day • Fludrocortisone (for hypotension) 	<p>The community nurse is responsible for monitoring the patient's pain medication as the case notes in the Discharge plan clearly indicate the patient's reluctance. Therefore, the pain medication along with the dose is important for the nurse to know so that she can effectively monitor this.</p> <p>Hypotension was a post-op complication and will affect his current condition. We know this is an area of concern as the notes indicate that the patient has been advised to maintain a blood pressure diary. Since the case notes indicate that the hypotension has a significant bearing on his current health and treatment, it is necessary for the nurse to know that the patient is on medication for it. The rivaroxaban can be mentioned, along with the dose, as this is generally given after knee replacements and aids recovery.</p> <p>*Since the notes indicate that compliance seems to be an issue for only the pain medication, students may mention that Mr Warren is on atorvastatin, without mentioning the dose; the specific instruction is to monitor the pain medication. Therefore, you could consider this as an example of semi-relevant information.</p>
<p>Nursing management and progress</p> <ul style="list-style-type: none"> • Exercises set by physiotherapist – needs encouragement with compliance due to pain • Attend clinic in 2 weeks for full review and removal of stitches 	<p>The Discharge plan states that the patient's compliance with exercise needs to be monitored but this case note also gives us the information that the patient is hesitant to do the exercises because of pain. Since both the pain medication and exercise programme need to be monitored, it is important for the nurse to see the link.</p> <p>The note about the review is also relevant as the nurse needs to continue home visits and change dry dressings until the stitches are removed.</p>
<p>Assessment</p> <ul style="list-style-type: none"> • Mobility limited – uses stairs with considerable difficulty • Mobility on flat ground good with frame* • Very low BP post-op 	<p>This is relevant information to give the nurse some background on the current condition of the patient, because one of her responsibilities is to monitor compliance with the exercise programme. The mobility status will help her understand the degree of compliance to the programme while the case note about hypotension will help her provide continued care by informing her of an issue which she needs to stay alert to while ensuring compliance with exercise.</p> <p>*The case notes about mobility can be summarised into a single sentence as has been done in the sample answer.</p>
<p>Discharge plan</p> <ul style="list-style-type: none"> • Community nurse to visit home and change dry dressing daily until removal of stitches • Monitor compliance with exercise programme • Use pain medication when necessary (patient reluctant – please monitor) • Keep BP diary for review in 2 weeks • Compression stockings to be worn until review 	<p>To continue care for the patient, the community nurse needs to dry dress the wound until the stitches are removed, monitor compliance with the exercise programme given by the physiotherapist, and monitor pain medication because of the patient's reluctance. Because she needs to stay alert to the complication with hypotension, understanding what measures are in place to help him (compression stockings; BP diary to help in the review) is relevant.</p>



PT-1

Irrelevant notes

Case notes	Annotation
Patient details <ul style="list-style-type: none"> • Date of birth • Admission date • Discharge date • Marital status 	<p>The date of the letter is the date of discharge so there is no need to mention this again separately. The admission date and marital status are not relevant to the community nurse because this information does not impact the care she needs to provide. Age of the patient or date of birth are already mentioned in the RE line so there is no need to include this in the body of the letter.</p>
All the information under social background	<p>The community nurse is responsible for providing continued care after surgery. None of these has a significant bearing on the care the nurse needs to provide which is primarily to do with wound care, monitoring exercises assigned by the physiotherapist and also ensuring that other related medical issues are under control. If this information were included in the letter, it would distract the reader from getting to understand what the community nurse needs to do to continue care.</p>
Nursing management <ul style="list-style-type: none"> • Dry dressing changed daily • Post-op complicated by significant postural hypotension (88/60 mg) • Compression stockings issued 	<p>This section contains information which is irrelevant because it has been mentioned in the Assessment or Discharge plan in a way that is directly relevant to the community nurse. The fact that the dry dressing was changed daily in the hospital does not need to be included because the case note in the Discharge plan indicates that it needs to be changed daily after discharge. Mentioning how often it was changed earlier would be repetitious and a waste of the reader's time.</p> <p>The post-op complication has also been mentioned in the Assessment and the case note under that section is enough for the nurse to know. The nurse does not need to be informed of the exact condition (postural hypotension), nor does the nurse need to know the BP reading.</p> <p>The compression stockings have also been mentioned in the Discharge plan with more relevant information for the nurse, i.e. they should be worn until the review. Most of the information in the Nursing management section is superseded with directly relevant information for the nurse in the Discharge plan.</p>
Assessment Approximately 15 kgs overweight	<p>The community nurse is not going to be providing care that focuses on weight reduction/control and therefore this is irrelevant.</p>
Discharge plan <ul style="list-style-type: none"> • Medical equipment provided: frame, crutches, and toilet raiser • No driving for six weeks 	<p>In this case, there are no instructions to the community nurse to help the patient in activities of daily living that would require her to know that these aids have already been provided to the patient. The prohibition regarding driving does not impact any of the areas of continued care that the nurse needs to provide.</p>

Practice Test 2



PT-2

Purpose of the letter

Ms Leyla Ward, a community nurse, is responsible for providing ongoing care for Mrs Charlotte Price, who is being discharged from the hospital after a two-day precautionary admission that was necessitated because of a mild concussion following a fall at home. From the notes it is evident that Mrs Price is not in danger from the mild concussion she had, but requires ongoing care for other issues which were noticed during hospitalisation.



Relevant notes

PT-2 The patient's name and age or date of birth are usually mentioned in the RE line.

Case notes	Annotation
Diagnosis <ul style="list-style-type: none"> Mild concussion (following a fall at home) Infected right toe (discovered during hospital stay) 	<p>The community nurse needs to know the diagnosis, so that she understands the basis for continued care, especially for a patient who has not been under her care prior to this. In the case of Mrs Price, she is not in danger from the mild concussion but the infected right toe that was discovered during hospitalisation requires medical attention as the later case notes indicate.</p>
Medical history <ul style="list-style-type: none"> Severely infected right toe since approximately 9/18 (result of untreated ingrown toenail) Conjunctivitis and gastroenteritis – both possibly associated with poor hygiene 	<p>The case note about the toenail is relevant because this was the medical issue discovered during hospitalisation and this also helps the nurse understand the current condition of the patient, i.e. a certain degree of self-neglect.</p> <p>The fact that she had two infections is relevant to continue care because it provides background for the advice related to food and hand hygiene. However, mentioning the dates of the infections is not necessary. The sample answer has summarised it effectively as 'bacterial infections over the past year' but mentioning the names of the two infections is not irrelevant.</p>
Medical background <ul style="list-style-type: none"> Urinary incontinence Mild scoliosis Walks with stick Heavy smoker 	<p>The nurse needs to help the patient with showering and dressing so it is important for her to know that the patient may have problems walking or standing without her stick and that the scoliosis may leave her vulnerable to falls. Urinary incontinence can be embarrassing and since the nurse will need to help her shower and dress, it is important for Ms Ward to know this so that she can be sensitive. Being a heavy smoker at the age of 86 is significant and could have an impact on recovery from infections so it is relevant to alert the nurse to this as this could impact the healing of the wound.</p>
Medication <ul style="list-style-type: none"> Ramipril 10 mg (hypertension) Ibuprofen (as required for scoliosis) Amoxicillin (500 mg x 3 daily x 2 weeks (for toe infection) (concerns re. compliance) 	<p>The Discharge plan indicates that the nurse needs to monitor amoxicillin and ramipril because they are critical to the recovery of the infected toe. Ibuprofen for scoliosis is relevant because the case note here indicates that there is concern about overall compliance to medication.</p>
Nursing management and progress <ul style="list-style-type: none"> 48 hours precautionary admission, monitoring and rest – now to be discharged home Right toe cleaned and dressed 	<p>This gives information to the nurse about the patient's current condition because it tells the nurse that the concussion was not severe, the patient is fit for discharge and that the problem discovered during the hospital stay has been addressed.</p>

Discharge plan

- Home visits by community nurse twice a week
- Provide assistance with showering, dressing
- Provide advice re. hand and food hygiene
- Oversee treatment of right toe (clean, change dressings twice a week, encourage adequate rest)
- Monitor medication compliance (amoxicillin and ramipril)

All this is relevant because these are specific instructions to help the nurse continue care for the patient's infected toe, oversee recovery of the toe by ensuring compliance to medication and prevent recurrence of bacterial infections.



PT-2

Irrelevant notes

Case notes	Annotation
Social background All information	The main medical issue that requires care is the infected toe, and none of these case notes are relevant to provide continued care for the toe. Some of the information could be very useful to another allied health professional such as an occupational therapist (for example, lives alone, wants to live independently, etc.).
Medical history <ul style="list-style-type: none"> • Skin cancerous moles (x3) removed 2000 • Knee replacement 1998 • Whiplash injury in 1987 	These are unrelated to the patient's current medical problems.
Medical background <ul style="list-style-type: none"> • Hypertension (25 years) • Occasional drinker (whisky) 	The case note under medication tells the nurse to monitor compliance with ramipril, so the nurse is aware that hypertension is a problem. The nurse needs to be made alert to the lack of compliance with medication and not the number of years since she has had hypertension.
Nursing management and progress <ul style="list-style-type: none"> • Concussion tests: Initial questioning (satisfactory); Finger-Nose-Finger test (satisfactory), CT scan (satisfactory) 	While this indicates that the patient is fit for discharge, the details are not relevant to the community nurse. Stating that the patient is fit for discharge is relevant, but the details of the tests are not.

Speaking Sub-test

Every role play is different and requires the student to demonstrate a unique combination of skills. Hence there is no template that can be applied when evaluating responses. The notes in this section are meant to serve as a guideline to help you assess a student's responses based on the assessment criteria, with a focus on the clinical communication criteria. The notes list all the possible clinical communication skills that can help a student fulfil the task; however, it is not necessary to display everything listed in the notes to complete a successful, patient-centred interaction. Giving students qualitative feedback on their performance in addition to their band score is important because it helps them understand their strengths and weaknesses.

The sub-criteria are mentioned against each skill (for example, A4: Showing empathy for a patient's feelings, predicament or emotional state). A student may handle a role play equally well by demonstrating two or three skills listed against each task. The success of an interaction should be measured by how patient-centric it is, rather than how many of the criteria they are able to display. The focus must always be on the patient and any attempt to show off language or skills may sound like students are depending on a template rather than communicating with the patient in front of them.

Practice Test 1



PT-1

Roleplayer Card No 1

Background information: During the three minutes' preparation time, students should be able to identify that this is the first time the nurse is interacting with the relative, and that the reason for the consultation is known to the nurse because the setting is a ward where the nurse needs to counsel the relative before discharge. This means that after greeting the patient and clarifying his/her role, the nurse can ask the relative's name and confirm the reason for the consultation. (Your mother is coming home to stay with you today after her surgery, is that right?) (A1: Initiating the consultation appropriately). Then, the interaction can be initiated with a sentence that tells the relative how the conversation will progress. (I'm going to be discussing some basic care you'll be responsible for providing during the next eight weeks.) Seeking the carer's consent before proceeding by asking a question such as, 'Is that okay?' also demonstrates a respectful attitude towards the relative (A2).

Role play tasks

Task	Clinical Communication Criteria Notes
Find out how prepared the son/daughter feels about their mother's discharge to their home	<ul style="list-style-type: none"> B1, D2: Begin with an open-ended question to assess how the relative feels about their preparedness to have the mother in their home. A4: Their answer to the open-ended question will reveal their feelings, and it may most likely be feelings of anxiety regarding the patient's wellbeing and future care. Therefore showing empathy with sensitive appreciation of their predicament during the beginning of the consultation would aid relationship building. <p>D1: Demonstrate active listening as the relative explains their feelings. Active listening techniques could include one or some of the following as appropriate.</p> <ul style="list-style-type: none"> o Back channelling: As the relative explains how they feel, saying 'Uh-huh', 'Go on' or 'Okay' will demonstrate active listening and help the relative speak as much as possible.

	<ul style="list-style-type: none"> ○ Mirroring/repetition/echoing: If something needs to be probed or clarified, then use these. For example, if the relative says, 'I'm worried because the last time she came to stay with us, it didn't go very well,' the nurse could mirror, 'didn't go well?'. If the relative responds to that by saying, 'Yeah, I was really busy with the kids and my partner was on a tight deadline so she missed her medication a lot.'. The nurse can clarify further, 'So, if I've understood correctly, you're saying that she missed her medication because you couldn't keep an eye on whether she was taking it because you had a busy schedule?' This can also be an example of picking up on patient cues. <p>Note that the terms mirroring, repetition and echoing are often used interchangeably but they all refer to repeating the last few words of the patient using a rising intonation to encourage them to elaborate.</p> <ul style="list-style-type: none"> • D5: Summarise/paraphrase when the relative has finished speaking to invite them to speak more or to show that you were listening and have understood. • D4, B2: Use clarifying statements (if something is vague) and pick up on the patient's cues if what the patient says provides opportunities to do this. For example, picking up on cues such as hesitation or change in volume, or by mirroring or echoing the words of the patient as given in the mirroring/repetition/echoing example above.
Explain the mother's needs for the first eight weeks (NSAIDs/painkillers, dressing changes, mobility, personal hygiene, meal preparation)	<ul style="list-style-type: none"> • E1: Check if the patient already knows something about caring for someone after a surgery. • C3: Signpost to indicate that an explanation will follow; can signpost even within the explanation. • C3, E4: Chunk and check information in the explanation (for example, the information regarding wound care can be chunked together followed by mobility and personal hygiene as a second chunk and meal preparation as a third chunk). • B3: Relate the explanation to what the relative has said earlier about preparedness where relevant. For example, if the relative has said they feel their mother may experience a lot of pain, you can say, 'You mentioned concerns about pain. Well, you won't have to worry about that since she will be on mild painkillers for the first eight weeks'. • E3: Encourage the relative to share their feelings about the information they have just received. • Simplify the explanation and avoid using medical jargon (appropriateness of language).
Reassure the son/daughter that it is manageable and give advice on strategies which will make caring for their mother easier (set up a routine, get a medicine organiser, ensure she has everything she needs nearby, wear a surgical boot)	<ul style="list-style-type: none"> • A4: Offer reassurance by echoing the relative's feelings and show empathy. • C3: Use categorisation to indicate to the relative that you are going to offer advice on how to manage things, 'I'd like to offer some advice on a few strategies that will help make things easier'. • E2: Pause periodically when giving advice and respond to anything the relative may say. • C3: Signpost the advice, 'First, I'd like to suggest a routine. You can both decide on specific times ...'. • B3: Relate the advice to the concerns expressed by the relative. • E3: Encourage the relative to contribute reactions and feelings to the advice given. <p>Avoid condescending statements such as 'You should take care of your mother / she has cared for you your whole life' when the relative expresses concern about the amount of care required (A3).</p>

Explain the role of the surgical boot (protects the foot)	<ul style="list-style-type: none"> • B3: Relate the explanation to elicited concerns. For example, 'The boot protects her foot and so it should give you peace of mind that even if you're not physically around her all the time, the wound is protected'. • E5: Discover if there is any further information the relative needs.
Explain the painkillers and anti-inflammatory drugs x 1 naproxen (painkiller and anti-inflammatory) every 12 hours, ibuprofen (painkiller and anti-inflammatory) x 2 every 4 hours, not to exceed 8/day	<ul style="list-style-type: none"> • C3: Use categorisation to tell the relative that there are two medicines that need to be administered, 'There are two tablets that she needs to take. They help manage pain and reduce swelling. The first is ...'. • C3: Use chunking and checking to explain the medication, pausing between each one. • C3: Use labelling to highlight the importance of not giving more than eight tablets of ibuprofen per day, 'It is very important that you remember not to give her more than ...'. • E2, E4: Check if the patient has understood the information by using the teach-back method. • C2: Signal the end of the consultation by using signposting language ('Before I wrap up ...') and discover if there is any other information the relative needs. • Ensure that language is simplified, and no complicated medical terms are used when explaining medication (appropriateness of language).

Practice Test 2



PT-2

Roleplayer Card No 2

Background information: During the three minutes' preparation time, students should be able to identify that this role play takes place in an accident and emergency department and therefore the nurse and patient do not know each other. The background information indicates that the patient has been waiting for some time and so the nurse may politely apologise for the delay at the beginning of the interaction (A2: demonstrating an attentive and respectful attitude). The nurse can begin by greeting the patient, stating his/her role and then asking the patient's name. The nurse can then initiate the interaction with an open-ended question (What brings you here today? How can I help you today?) that helps fulfil sub-criterion A1, but he/she must remember that the patient has been 'waiting for some time' which probably means that they could be a little anxious to receive treatment. The roleplayer card also indicates that the patient seems to want an X-ray but the hospital is busy. So, the nurse may need to handle this expectation carefully (A2: demonstrating an attentive and respectful attitude; A4: showing empathy for feelings/predicament/emotional state).

Role play tasks

Task	Clinical Communication Criteria Notes
Find out what happened to the patient's foot and their mobility/pain	<ul style="list-style-type: none"> • D2: Begin with an open-ended question about what happened to the foot. • D1: Use active listening throughout the explanation as this will also help the anxious patient to feel cared for because they have been waiting a long time. Here are some examples: <ul style="list-style-type: none"> ○ Back-channelling: As the patient describes what happened, saying 'Uh-huh', 'Mmmm' or 'Aha' is appropriate. This shows attentiveness and could help the patient feel less anxious. ○ Mirroring: If the patient says something that isn't very clear or does not fully explain something, using repetition or echoing can help. For example, if the patient says, 'I was feeling a little giddy as I was walking down the stairs and that's how I fell', the nurse can mirror 'giddy?' to encourage the patient to say more about why they were feeling giddy.

	<ul style="list-style-type: none"> ○ Paraphrasing what they have said in your own words to show that you have listened and understood. • D5: Summarise what the patient has said to invite further response/ encourage correction.
Explain that you do not know whether it is broken but the procedure is the same for a badly hurt or broken toe (dress and tape it to the next toe)	<ul style="list-style-type: none"> • A2, A3: Demonstrate a respectful attitude and adopt a non-judgemental approach. • A4: Show empathy for the patient's feelings ('I understand that knowing whether the toe is broken or not will help you understand to what extent it has been damaged ...'). • E3: Encourage the patient to contribute reactions/feelings based on what you have just said.
Explain that an X-ray would mean a very long wait and have no bearing on the treatment. The hospital is busy with emergencies tonight	<ul style="list-style-type: none"> • A2, A3: Demonstrate a respectful attitude and adopt a non-judgemental approach, even if the patient insists on getting an X-ray. • A4: Show empathy for the patient's feelings as he/she might be in pain and anxious about the state of their toe. • E3: Encourage the patient to contribute reactions/feelings based on what you have just said about the X-ray.
Tell the patient that it usually takes about 6 weeks to heal if cared for properly. Provide information about caring for the toe (ice pack every 20 minutes for the first few days, elevate the foot above heart level to reduce swelling and pain, try to rest it)	<ul style="list-style-type: none"> • C3, E2: Use chunking and checking to provide the information. • E2: Pause periodically when giving information and respond to anything the patient may say. • B3: Relate the advice to relevant concerns expressed by the patient (if any). • C3: Use signposting to signal the chunks. • E4: Check whether the patient has understood the information (can use the teach-back method if the patient is feeling less anxious now). • E3: Encourage the patient to contribute reactions and feelings to the advice given.
Reassure the patient that painkillers (ibuprofen and paracetamol) usually work, but to contact his/her GP if there is no improvement after 2–3 weeks	<ul style="list-style-type: none"> • A4: Show empathy for the patient's feelings. • C2, E5: Signal the end of the consultation by using signposting language (Before we end, ...) and discover if there is any other information that the patient needs.