



**Submission to the Australian Health Practitioner Regulation Agency
on the English language skills registration standard**

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Background to submission

Since its establishment in 1990, the Language Testing Research Centre (LTRC) at the University of Melbourne has earned a national and international reputation for its contributions to language testing and assessment as well as program evaluation. The mission of the Centre is:

1. to carry out and promote research and development in language testing;
2. to develop tests and other appropriate proficiency measurement instruments for English and other languages;
3. to evaluate programmes of language learning and teaching;
4. to provide consultancy services in evaluation and testing; and
5. to provide education and training in the area of language assessment.

The LTRC engages in a broad range of projects, some of which are commissioned and others which are grant-funded. Information about the Centre's work is available on the LTRC website: <http://ltrc.unimelb.edu.au/>

For more than 20 years, the LTRC has been linked with the Occupational English Test (OET), a specific-purpose language test recognised for the purpose of registering overseas-trained health professionals seeking to practise in Australia. Professor Tim McNamara, the developer of the current format of the OET, is closely associated with the LTRC and has been Centre Director for several terms. Past and current staff at the LTRC have been involved in OET materials development and a range of research studies for the OET Centre related to test validation. Current work includes the development of new materials for the Listening and Reading sub-tests, the statistical analysis to determine results in all OET administrations, and particular research projects commissioned by the OET Centre.

Of particular interest for the current consultation, a three-year project at the University of Melbourne funded by an Australian Research Council Linkage grant with the OET Centre as Industry Partner (LP0991153) has recently been completed. The project, *Towards improved healthcare communication*, was led by Associate Professor Cathie Elder, former Director of the LTRC. It studied assessment criteria for the OET Speaking sub-test from a multidisciplinary perspective, with project team members from the School of Languages and Linguistics, the Medical Education Unit at Melbourne Medical School, and the Departments of Nursing and Physiotherapy in the Melbourne School of Health Sciences. The project investigated the aspects of health professionals' spoken performance with patients that were valued by health professionals themselves and how these might be more fully represented in assessment criteria on the OET Speaking sub-test. A second ARC Linkage project at the University of Melbourne, *Towards improved quality of written patient records*, starts in 2014 and relates to the assessment criteria and tasks used in the OET Writing sub-test (LP130100171).

Staff and associates of the LTRC are also frequently involved in research projects for providers of other major English language tests, including the International Language Testing System (IELTS) and the Test of English as a Foreign Language (TOEFL). Consequently, a high level of expertise is available in the area being considered in the current AHPRA consultation.

Three main issues are presented and discussed in the following sections of this submission.

1 Response to issue of period of currency of test results

AHPRA proposes that the period of currency of test results is extended from two to three years. The LTRC supports this proposal. There is limited research evidence on the process and effect of attrition of language. Nevertheless, it appears that the existing period of two years is highly conservative in this context (see Roever, 2013).

The LTRC notes that transparency is required from the National Boards regarding how the period of currency is calculated to avoid any misunderstanding for applicants. It suggests that the period of currency starts with the date the test was taken (i.e., when the measurement of a test taker's English language skills was made) and expires exactly three years later. A common decision should also be made regarding whether these test results must be current on the date of formal application for registration with a National Board, on the date registration is granted or another date. This issue becomes complicated when there are results for sub-tests/test components taken from different test administrations (sittings) – see below.

2 Response to issue of results obtained from multiple sittings

AHPRA proposes to allow applicants to meet the English language skills standard by presenting results for the four sub-tests/test components (Speaking, Reading, Listening and Writing) of the OET or IELTS that have been obtained at more than one administration (sitting) of the test.

The LTRC supports this proposal; possible amendments are put forward for consideration below. The OET was designed as a modular test. After the first attempt at all four sub-tests in one administration, test takers may sit sub-tests separately, i.e., individually or in any combination, at subsequent administrations. Results for the four OET sub-tests are given as separate grades with no overall grade being published. A modular approach is justified because, in second language acquisition research, any evidence indicating that ability in any one language macro-skill would attrite quickly, or more quickly than ability in any other language macro-skill, is limited. Furthermore, variation in test scores may occur for reasons other than language proficiency (e.g., misunderstanding of the question, poor time management on the task) and it is therefore fair to allow test takers to repeat particular sub-tests/test components for which they have not met the required standard. Administratively, having overlapping but not identical periods of currency for different sub-tests/test components will be more difficult to monitor by staff assessing applications for registration. However, there is also likely to be a positive effect on test takers' preparation to meet the required standard, as they will be able to focus on developing only those language skills needing attention, thereby reducing unnecessary test anxiety as well as the cost of having to take the whole test again.

The LTRC notes an inconsistency of approach in the proposed changes to the standard: the proposal is that test results will be current for three years but, according to the revised draft of the standard, results from multiple sittings must be obtained within a 12-month period. The LTRC suggests that results from multiple sittings can be accepted as long as each sub-test/test component result is current (i.e., obtained with the previous three years) on the date the application is made (or whichever common date is agreed on for use by the National Boards). Using results in this way would be fairer to test takers. In the LTRC's view therefore, the 12-month limitation for OET and IELTS sub-test/test component results from different sittings should be removed from the proposal, along with the further restrictions for IELTS results given in the proposed revised standard at item 4. a) – that is 'up to three' sittings and 'if all scores are 6.0 or above'. A set of four sub-test/test component results will remain current for as long as the oldest result of any of the four sub-

tests/test components remains current. The consequent need for transparency about the exact period of currency of a result has been noted in point 1.

Regulation would be required regarding whether a test taker could provide evidence of meeting the required standard by drawing on sub-test/test component results of which some were obtained on the OET and others on IELTS.

3 Comment on test scores/grades accepted by National Boards

The LTRC observes a tendency among the National Boards to align to the same registration standard for English language skills as expressed in the scores/grades that test takers must obtain on one of the recognised language tests. The LTRC notes that there is little research evidence to support such an alignment across a range of professions and suggests instead the implementation of a series of standard-setting studies for each of the healthcare professions regulated by the National Boards to determine the appropriate English language skills standard for that profession. The following example indicates what this would involve.

As one part of the recent project *Towards improved healthcare communication*, introduced in the Background section above, standard-setting exercises for the OET Speaking sub-test were run for three healthcare professions – medicine, nursing and physiotherapy. Practitioners from each profession listened to sample OET Speaking performances and gave their judgements on the test taker's readiness in terms of general communication skills to enter the workplace under supervision. These judgements were translated into revised cut-scores for the OET Speaking sub-test, i.e., the scores determining the grades awarded (separating B from C, and so on). The cut-scores were somewhat different for each profession, indicating that professional expectations are not homogeneous. For example, the cut-scores for nursing were lower overall than for the other two professions in the study (see Elder et al., 2013, August; Elder et al., 2013).

The LTRC proposes that the impact of such differences should be considered for each sub-test/test component of the tests recognised by the National Boards. The expectations and priorities of each healthcare profession are likely to be different in terms of language and communication skills in the same way that they are different regarding the particular professional knowledge and skills required. In fairness to test takers, it may be that these differences should be reflected in the registration standards, so potential applicants are not unnecessarily excluded from registration. This point is particularly pertinent for specific-purpose language tests, where the test seeks to reflect the demands of the workplace, e.g., the healthcare contexts for the 12 professions currently served by the OET. The project team has suggested keeping the minimum satisfactory grade on the OET the same (grade B) but changing how this is calculated for each profession based on standard-setting procedures, as described. In the case of IELTS, the required band scores would have to be amended as necessary to those acceptable for each profession. Standard-setting exercises have been undertaken for general-purpose language tests in this way. For example, a study investigating appropriate cut-scores for IELTS in the context of nursing licensure decisions in the USA has been carried out (O'Neill, Buckendahl, Plake, & Taylor, 2007).

The LTRC hopes this submission makes a positive contribution to the AHPRA consultation. The Director of the LTRC is able to provide further information if required.

References

Elder, C., McNamara, T., Woodward-Kron, R., Manias, E., McColl, G., Webb, G., & Pill, J. (2013, August). *Towards healthcare communication: Development and validation of language proficiency standards for non-native English speaking health professionals. Final report for the Occupational English Test Centre*. 40pp. Melbourne: The University of Melbourne.

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