

WRITING SUB-TEST – TEST BOOKLET

INSTRUCTIONS TO CANDIDATES

You must write your answer for the Writing sub-test in the **Writing Answer Booklet**.

You must **NOT** remove OET material from the test room.

Occupational English Test

WRITING SUB-TEST: SPEECH PATHOLOGY
TIME ALLOWED: READING TIME: 5 MINUTES
WRITING TIME: 40 MINUTES

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

Notes:

Assume that today's date is 30 August 2019

You are a speech pathologist providing swallowing and speech assessments for Ms Jones, a 31-year-old woman with secondary progressive multiple sclerosis (MS). She is about to be moved from her family home to a Community Residential Unit which will provide permanent care for the patient.

PATIENT DETAILS:

Name: Sarah Jones (Ms)

DOB: 29 Jun 1978

Date of assessment: 30 Aug 2019

Place of assessment: Family home (prior to admission to Community Residential Unit)

Medical history: Multiple sclerosis (MS) 12 yrs
Relapsing remitting MS since 2006
Asymptomatic 2 yrs
Aggressive 5 yrs numerous bouts (periods of severe activity) – poor recovery
MS secondary progressive since 2013

Social background: Lives with elderly mother, Dawn. Due to Pt's progressive condition, full-time permanent care now required. Home setting inappropriate
Sarah's admission planned next month

Assessment: **Frenchay Dysarthria Assessment**
Assessment of motor speech – significant difficulties
Speech output – barely intelligible
Voice volume – extremely soft & monotone
Voluntary cough – very weak on command
Protective cough reflex – not observed during assessment, but mother reported cough stronger if placed in compromising situations (recent choking episode)

Mealtimes: Observations eating lunch – currently minced & moist diet & mildly thick fluids
Requires padded tray table to rest meal on lap. Full assistance/supervision. Has not fed herself for 1 year
Spoon not fork always. No use of L or R hand during meal

Pureed meal trial: Oral prep. adequate, transit time mildly delayed, minimal residue post swallow
Swallow – initiated, elevation & excursion of larynx barely present
Post swallow – nil overt signs of aspiration
Vocalisation post swallow – mild 'wet' voice (cleared immediately with swallow)

Thickened fluid trial:

Lip seal: fair-adequate, minor spillage, delayed transit & swallow
Post swallow – nil overt signs of aspiration
Can be impulsive, prompts to slow down were successful

Discussions:

Recent choking episode discussed:

- choking occurred when consuming small soft biscuit given to Pt in error, by a relative
- biscuit impossible to chew sufficiently prior to swallowing → induced choking episode, persistent coughing. Once biscuit cleared, coughing gradually ceased
- this episode prompted greater awareness of food choices
- limitations now widely known

Recommendations for meals:

General diet – pureed

Avoid food that doesn't adequately vitaminate, eg., corn, nuts, etc.

Mildly thick fluids – prompt Pt to slow down if impulsive

Assistance – full assistance with set up and feeding

Utensils – always use spoon

Alternate – pureed diet/thick liquid mouthfuls to clear residue from oropharynx

Concentration – limit distractions/interactions during meals as fatigue levels increase. Offer frequent, small meals to minimise fatigue

Education – ensure all staff are fully aware of issues. Do not give inappropriate foods

Review:

SP review every 4 mths due to progressive nature of MS

If further choking episode occurs, swallowing review should be conducted sooner

Writing Task:

Using information given in the case notes, write a letter to the speech pathologist, Mrs Smythe, who will attend to Ms Jones at the Community Residential Unit, providing information about your assessment, results and recommendations. Address the letter to Mrs Emily Smythe, Community Residential Unit, 18 Blackburn St, Stillwater.

In your answer:

- **Expand the relevant notes into complete sentences**
- **Do not use note form**
- **Use letter format**

The body of the letter should be approximately 180–200 words.

Any answers recorded here will not be marked.

BLANK

Occupational English Test**WRITING SUB-TEST: SPEECH PATHOLOGY
SAMPLE RESPONSE: LETTER**

Mrs Emily Smythe
Community Residential Unit
18 Blackburn St
Stillwater

30 August 2019

Dear Mrs Smythe

Re: Ms Sarah Jones
DOB: 29.06.78

Thank you for attending to Ms Sarah Jones, a 41-year-old with secondary progressive multiple sclerosis, who will be moved to the Community Residential Unit next month.

Frenchay Dysarthria Assessment today identified significant difficulties in motor speech. Speech output was barely intelligible, and voice volume was extremely soft and monotone. Her voluntary cough was weak, but her mother reported a stronger protective cough when Ms Jones choked recently.

Ms Jones does not use her hands and needs full assistance when eating. Pureed and thickened meal trials showed a mildly delayed transit time with minimal residue and mild wetness in vocalisation (cleared with swallow) post swallow but no overt signs of aspiration in the former and fair to adequate lip seal with minor spillage, delayed transit and swallow, but no signs of aspiration in the latter.

My recommendations for staff are to alternate a pureed diet via a spoon and mildly thick fluids to clear residue from the oropharynx. Ms Jones should be prompted to slow down if she becomes impulsive. Staff must also be advised of appropriate foods for Ms Jones. Quiet meal times will assist with concentration and frequent small meals may reduce fatigue.

Ms Jones will require review every four months, or sooner should another choking episode occur.

Please do not hesitate to contact me if you require further information.

Yours sincerely

Speech Pathologist