



English at Work

A series of courses in the English language
for hospital ancillary staff from overseas

DOMESTIC STAFF

by EMR Laird

King Edward's Hospital Fund for London

HOOB:LU Lai

THE HOSPITAL CENTRE LIBRARY 24, NUTFORD PLACE LONDON W1H 6AN	
ACCESSION NO.	CLASS MARK
114186	H008:LU
DATE OF RECEIPT	PRICE
12 Jun 1976	DONATION

Lai

English for Domestic Staff
An English language training course

for

overseas domestic workers in hospitals

consists of:

- 1 Teacher's handbook
- 2 Sections 1 - 5
- 3 Four sets of flashcards
- 4 One tape
- 5 28 slides

The language teaching items are contained in Sections 1 - 5 which do not make up a pupil's book but constitute a teacher's manual.

It is essential to read the Teacher's Handbook before attempting to use the teaching material.

Prepared for King Edward's Hospital Fund for London by
The Pathway Further Education Centre, Southall, Middlesex

English for Domestic Staff
TEACHERS HANDBOOK
AND INTRODUCTION

An English language training course
for
overseas domestic staff in hospitals
by
Elizabeth Laird

Prepared at
The Pathway Centre
Recreation Road
Southall
Middlesex

Published by
The King's Fund Centre
24 Nutford Place
London W1H 6AN

July 1975

The Complete Course

Teacher's Handbook

Section One

Section Two

Section Three

Section Four

Section Five

Flashcards Series 1 - 4

Set of Slides 1 - 28

Tape containing 56 items

NB: It is essential to read the teacher's handbook before attempting
to use the teaching material .



1929933866

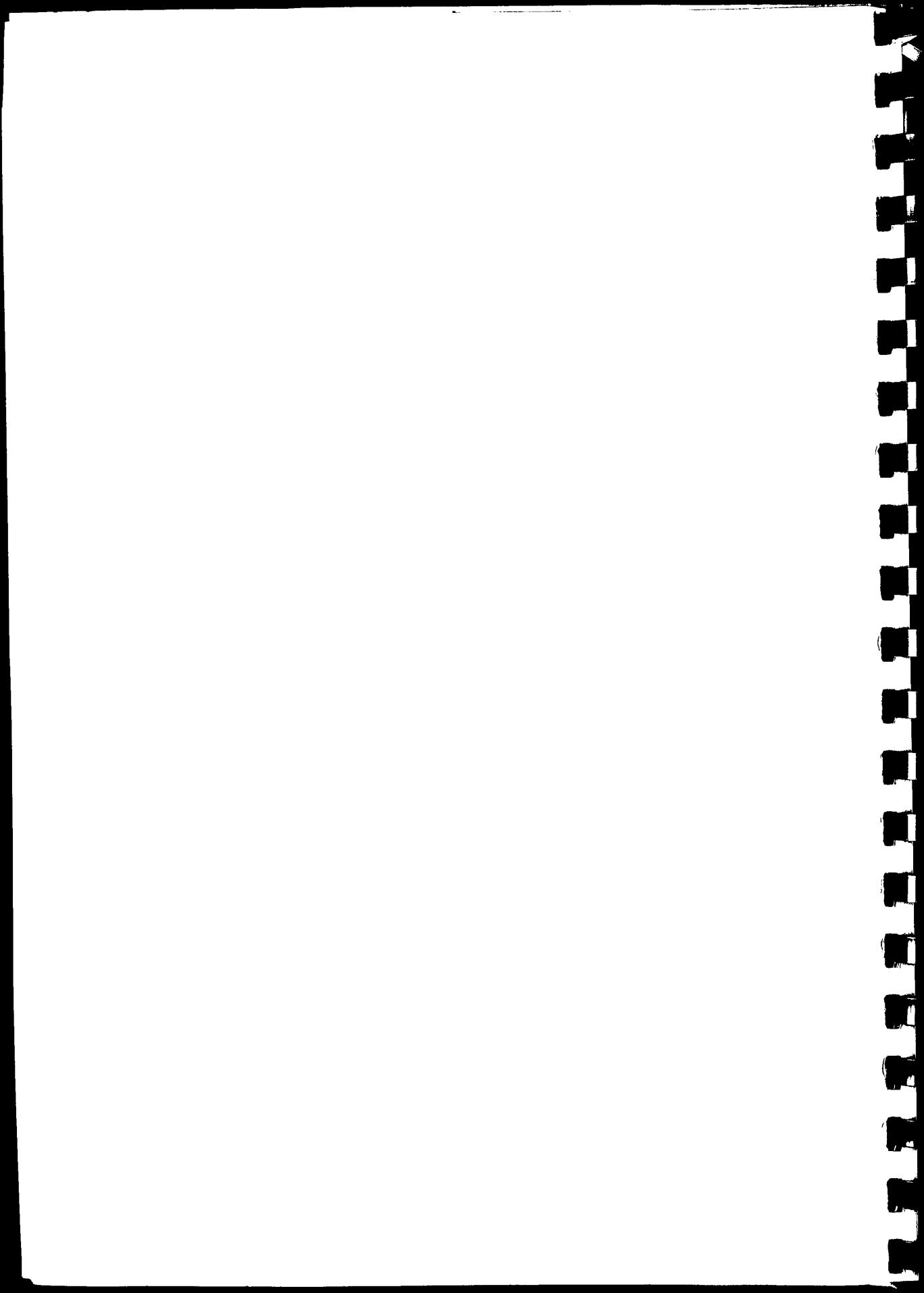
CONTENTS

		Page
Part 1	What happened to good old Annie	4
Part 2	The conditions determining successful language training	6
Part 3	The preliminaries to a course: selecting the trainees and investigating the specific language needs of the hospital	10
Part 4	A time-table for a domestics' course	16
Part 5	The contents and structure of the course: a question of focus	18
Part 6	Methodology	24
Part 7	How to teach the course	30
Part 8	Involving other people in the hospital	34
Part 9	Evaluating the course	38
 CHECKLISTS:		
	Tape items	46
	Slides in Series A	50
	Flashcards	

ERRATA

**English for Domestic Staff
TEACHERS HANDBOOK**

Page 24 Line 17: non-useful activities should read non-verbal activities



1 WHAT HAPPENED TO GOOD OLD ANNIE?

The ideal picture of the hospital domestic of the old days was a figure sentimentally regarded as the prop of the ward. It was good old Annie who, leaning on her mop, comforted the young mother whose baby was desperately ill. It was Annie who slipped the over-wrought sister a cup of tea just when she most needed it. Annie accepted her low wages, long hours and hard work because she was dedicated to the hospital, devoted to the patients and would do anything for Sister.

Annie may never have existed, but even if she did, she has very largely gone. Those who have taken Annie's place have often been unfairly criticized for failing to live up to the old fashioned sentimentalized ideal. Many of the new domestics, who like to play a greater role in the ward, sharing the patients' woes and co-operating in a friendly way with nursing staff, have been unable to do so because of the language barrier.

It is impossible to give an accurate account of the numbers of domestics from overseas at present employed in British hospitals, but the percentage is certainly high. The picture is patchy, and does not necessarily correspond to the settlement of immigrants in different areas of the country. In certain areas of West London, for example, where large number of Asians have settled, one hospital may have a mainly Asian domestic department, while the next hospital may have Spanish, Portuguese and West Indian domestics. Rural areas too are unpredictable. Where hospitals are able to provide residential accommodation for ancillary staff you may find that the domestic workers almost all come from Southern Europe.

We therefore find that, whereas in some places hospitals can draw for labour on the surrounding population (and where the surrounding population is of overseas origin, these people are likely to be highly represented in the domestic department), other hospitals have great difficulties in recruiting locally, and have to look elsewhere, often drawing people directly from overseas, for example from Southern Europe, Spain, Portugal and Italy, and helping them to find accommodation when they get here.

Good old Annie may therefore have been replaced by Maria, Carlotta, Amarjit or Khadijah. The overseas domestic worker's ability to wield a mop and wash the patients' dinner dishes is not in doubt: what is in doubt is her ability to measure up to the perhaps unfair demands made on her by staff and patients alike. Without being able to understand instructions correctly, she has great difficulty in working accurately. Without being able to use English for normal social purposes, to express sympathy, to make friendly relationships, her job satisfaction is greatly diminished and her ability to relate to the patients is cut to a minimum. If she cannot take messages, explain what has happened or accept changes in her daily routine, she will be inflexible and is likely to be by-passed by those she works with and so may become increasingly isolated. If she is unable to express her needs and sort out her day-to-day problems with the management, she is likely to become more and more insecure, and to suffer from diminishing confidence in herself and her work.

This language course for domestics attempts to tackle these problems in a realistic way, taking into account the learning problems of domestics from overseas. It is an elementary course, and is designed for those whose knowledge of English is very poor. These may be new arrivals in Britain, or they may have lived here for years but never have had the confidence or the opportunity to make a serious attempt to learn the language.

2 THE CONDITIONS DETERMINING SUCCESSFUL LANGUAGE TRAINING

(a) The need for special provision

Why are most foreign workers unable to take up places on the ordinary part-time course in English as a Foreign Language at local colleges?

Firstly, there are practical difficulties. Some work on rotating shift systems, working in the mornings one week and in the evenings the next week. Many have family responsibilities, do extra work outside the hospital or are unable to cope with a class after a long day of hard physical work. Some, especially in rural hospitals, live too far out to get to a college where English is taught as a foreign language.

Even more important is the fact that the foreign workers do not fit into the categories of learner for which the existing classes cater. They may be intimidated at the idea of going along to register at an academic institution. They may have considerable learning problems, including the following:

1 A lack of self-confidence in their ability to learn English. This may have been increased by attempts to learn English under the wrong conditions. Evening classes do not usually provide for this type of learner.

2 Little previous education. Where there has been some previous educational experience, it is likely to have been of a formal kind, and will have set up expectations of classroom behaviour which the teacher may need to break down.

3 In the case of many workers, illiteracy may be a source of confusion and distress. There may be reluctance to come to language classes for fear of being ridiculed.

Courses for domestics in the hospital, held with the encouragement and backing of the domestic department, hold some unique advantages:

1 All the learners need English for the same purposes and the same situations. This means that the teaching material can be relevant to all the students all the time.

2 The language taught is immediately related to the job to which the student returns as soon as he leaves the classroom. This means that there is immediate reinforcement and opportunity to use the language learned.

3 The English people (supervisors, fellow workers, nurses etc) with whom the student comes into daily contact, can be kept closely in touch with the language being taught and can give the student constant practice and encouragement outside the classroom. This is obviously of inestimable importance.

(b) The necessary conditions for successful in-hospital language training

The three key conditions for successful in-hospital language training seem to be:

Appropriate teaching materials

Careful selection of trainees

The right time, place and frequency of classes

This course attempts to provide the appropriate materials: an example will show the importance of carefully selecting trainees, and providing classes at the right time and frequency, and in the right place.

A class was set up for ancillary staff at a hospital at the time when both domestic and catering staff finished their shift. The classes were held twice a week for one hour. All the staff were free to volunteer to join the classes. The standards of English varied enormously in the class. Some of the students were complete beginners, while others had a fair degree of fluency. Numbers soon began to drop off, and at the end of the course the hospital was of the opinion that language training was a waste of time and that 'half these people don't want to learn English. We provided the classes and they didn't come'.

We have learned that successful in-hospital classes can best be run under the following conditions:

1 That the teacher selects the trainees

The hospital management may naturally assume that since they are paying for the class

and holding it on their premises, they have the right to decide who should attend it. The hospital should certainly have the right both to put forward and to veto students, but the teacher should make it clear that it is of great importance to the success of the class to select the students on a professional and pedagogically sound basis. If the teacher accepts conditions which are unsound, he will be blamed when the course turns out to be unsuccessful, and the hospital will not wish to venture any further language training project. Failures can thus do positive harm. (See next Section for details on assessing and selecting trainees).

2 That the timing and duration of the classes are satisfactory

The first point is that the classes must be held in the employer's time. The nature of the domestic's work obviously places some restraints on the times when she can be released from the ward, so the timing of the course will inevitably involve a compromise between the hospital and the essential conditions needed for language learning. As we have said, if the teacher compromises too far over these conditions, the results may be poor and it may be better not to run a class at all.

We have found that the teacher should think in terms of 50 - 60 hours of teaching time spread over about twelve weeks. This is preferably organised in daily lessons of 45 minutes to one hour, each weekday. In some hospitals we have taught a four-day week, and the students' off-days have all been synchronised to coincide with the day when the class did not take place. In such cases, the course has lasted for about fourteen weeks.

Hospitals differ in the times when they prefer to release their domestics. We have found that a mid-morning class is often possible, with the hospital giving three-quarters of an hour, and the domestics giving up a quarter of an hour from their coffee break. In other places a time around lunch-time has been quite satisfactory, with a similar combination of the hospitals' and the employee's time.

Fourteen weeks seems to be about the maximum length at which a course can operate effectively. Anything longer is likely to be too long to provide the necessary pressure on

trainees, teacher and management to result in really effective language learning for groups who have little experience of long-term learning strategy.

3 That the classes are held in a suitable place

One of the most important conditions for the success of a course is the constant interest, contact and involvement of domestic supervisors, who should be encouraged to attend the classes as much as possible. This is a very important point to consider when selecting a room for the class. Somewhere near the Domestic Office is ideal, so that supervisors can easily pop in whenever they have time.

Space is often a problem in hospitals. You may have to use the canteen, cloakroom, office or some such place. An electric power point is essential, and it is convenient to be able to leave some of your equipment in the room where you teach, so you should ask for the use of a cupboard. Although a training room or boardroom for the classes would be very pleasant, if it is too far from the Domestic Office poorer accommodation would be preferable if it provides closer contact with the supervisors.

3 THE PRELIMINARIES TO A COURSE: SELECTING THE TRAINEES AND INVESTIGATING THE SPECIFIC NEEDS OF THE HOSPITAL

(a) Selecting the trainees

The teacher's aim is obviously to select students who will all start at the same level. The best way to do this is to ask the Domestic Department for a list of all the employees they think are suitable for language training. It will be out of these that the teacher will select the class. Alternatively those interested can volunteer, be assessed and then be told whether or not they can join the class. We have found that fifteen or sixteen is the maximum size for a class of this kind. In small hospitals, there may be fewer domestics who make up a homogenous group for the purposes of language teaching, so the classes tend to be smaller.

The test recommended for assessing candidates in the English Language Assessment Interview for Hospital Ancillary Staff produced by the Pathway Centre, and published by the King's Fund Centre. It is available from the King's Fund Centre at £2.00.

Another important reason for giving a formal language test before the course starts is that the results of the tests will provide a standard for measuring the progress that individuals have achieved by the end of the course. This is important from the academic point of view, and also because it demonstrates to the hospital what has been achieved. The pre-course and post-course tests, while not necessarily identical, should have some items common to both, so that the progress can be very clearly indicated.

(b) Investigating the specific language needs of the hospital

The work of each hospital domestic has a great deal in common with the work of all other hospital domestics, but there are significant ways in which hospitals differ.

The illness of the patients may affect the domestic's work and responsibility; in psychiatric hospitals, for example, the domestic has a rather different relationship with the patients.

The organisation of the Domestic Department differs greatly from hospital to hospital. Some are organised in a system of ward orderlies and domestics, and some have a housekeeping service, with housekeepers and housekeeping assistants.

The attitudes of the English-speaking people towards the foreign workers may vary from hospital to hospital.

The teacher's investigation needs to cover the following main areas:

A general tour of the hospital, to grasp the layout, the names used for different areas etc. General information about shift-times, bonus schemes, the organisation of the domestic department, number of supervisors etc.

Discussions with Domestic Manager and supervisors Most people find it difficult to talk about language problems. Even where foreign workers speak no English at all, there will be people who will deny that there is a language problem, or who will say 'they understand when they want to alright. They just use language as an excuse'. 'You don't need to speak any English to be able to do the washing-up anyway'. Such remarks can be most indicative of the attitudes of the English people, and will help you to build up a picture of the environment in which the foreign worker has to learn English.

Lead off with general questions:

eg Do you have people who don't know much English?

Does it interfere with their work?

This may lead the person you are talking to into giving you some useful examples. The following questions are often worth asking:

Do your foreign workers need closer supervision?

Do you have to use interpreters? (How often? Does it waste your time?)

Are you worried about safety in any way?

Can your foreign workers communicate with the patients at all?

Do they have misunderstandings with native English speakers?

What happens if there is an emergency?

Do you have any domestics you would like to promote if their English were better?

Do you have any problems in sorting out personal details like holidays, days off etc?

Do the domestics phone in when they are off sick so that you can cover their ward?

In each case probe a little as to how far language is the cause of any difficulty.

Detailed observation of the work on one particular ward In order for you to be able to adapt the course to the specific needs of your hospital, you will need to gain a thorough understanding of the work the domestics do every day.

First, make sure that you know which particular jobs the trainees you have selected do (some may work on the wards, some may be in charge of corridors and stairs, some may be on relief work etc). Then, get an accurate job description of each type of work.

The easiest way to do this is to ask a supervisor to instruct you in your daily duties as if you were a new domestic. In this way you can get a clear idea of the particular procedures your hospital has for specific jobs; you can find out what different items of cleaning equipment are called, and so on. If possible, tape-record the job instructions. You can then refer to them whenever necessary as you teach the course.

Preparation of specific teaching material

(a) Some items of the course require special preparation with material adapted to the particular hospital you are working in. Here is a check list of the items which will need to be specially prepared in advance. Take special note of these points during your investigation.

1.2.3. The literacy needs of the domestics: eg ward names; signs such as No Entry, Danger, Radiation etc; labels for linen in the linen cupboard; instructions such as ON/OFF on electrical equipment.

1.5.1. The names used for different areas of the ward.

2.1.5. Special jobs done on different days of the week.

- 2.4.1. - 2.4.5. Serving out meals; tea etc.
- 2.6.3. The procedure for washing up.
- 2.7.2. Where things are in the ward.
- 3.3.1. - 3.3.2. The procedure for cleaning floors.
- 3.6.3. - 3.6.5. Safety.
- 4.3.6. Delivering a message.
- 4.4.1. - 4.4.2. Making beds.
- 4.6. Comparison of adjectives.
- 4.7.1. The daily work schedule.
- 5.5.2. Using the telephone - a practical exercise.

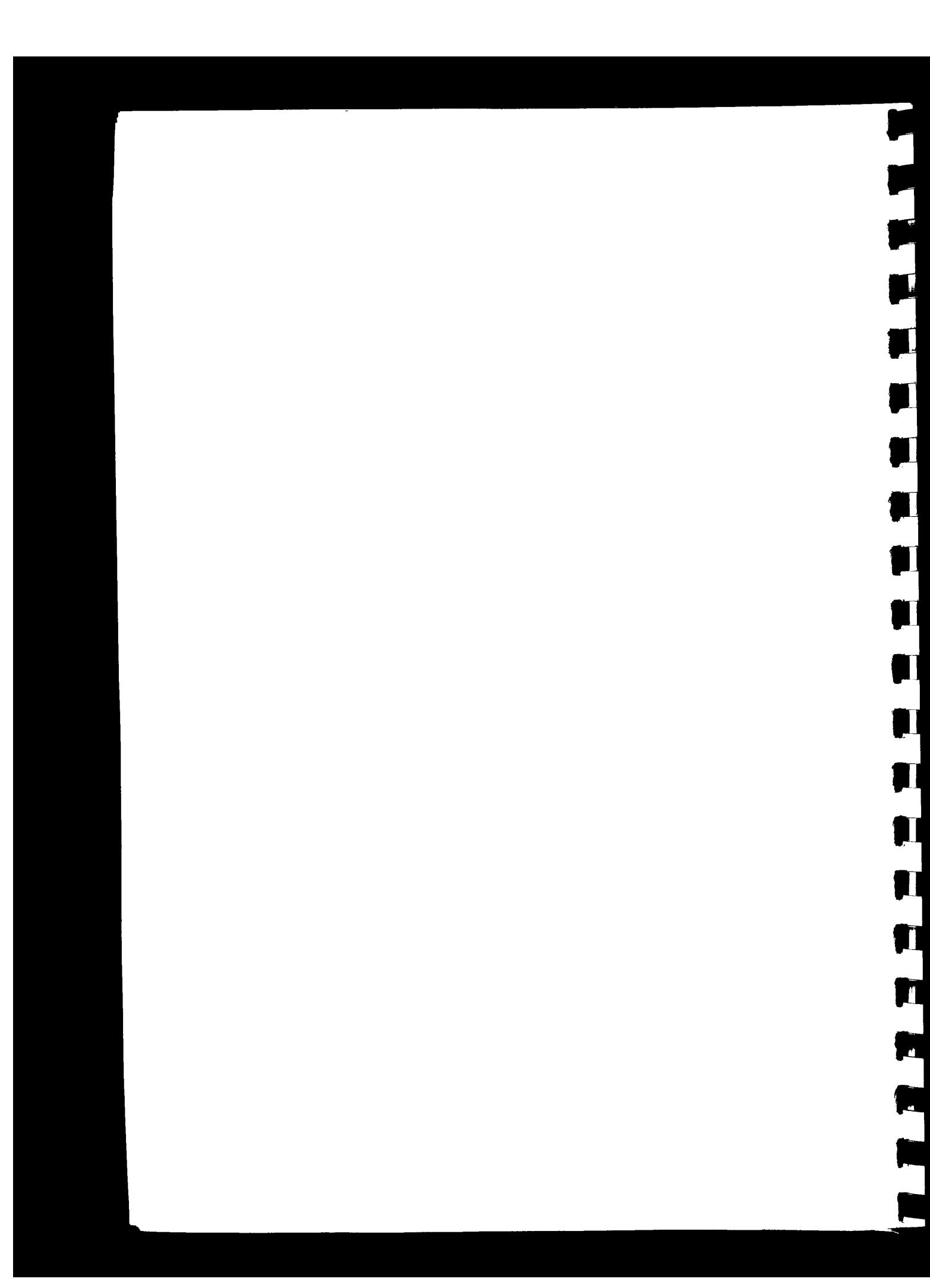
(b) Some tape items will need to be prepared specially for the course. They are as follows:

- 1.2.3. Tape Item 1: special uses of the alphabet.
- 1.4.4. Tape Item 6: getting students to pronounce names properly (you can use the item available as an example if your own recording facilities are poor).
- 2.7.1. Tape Item 15: A list of the names of the English people best known to your students, eg supervisors.
- 3.3.2. Tape Item 23: Instructions for cleaning floors.
- 3.6.4. Tape Item 28: special instructions concerning safety.

(c) Two sets of slides are referred to throughout the course. Series A are available with the course. Series B you should take yourself in the hospital where you are teaching.

Taking photographs in hospitals can be a sensitive matter. Make sure that your request to take slides goes through the correct channels (the Domestic Manager may need to get authority from the hospital administrator). It is usually simplest to make your request in writing, adding the list of slides you wish to take (see the list below) and assuring the hospital that no patients will be involved and that the slides will be used for teaching purposes only.

<u>List of Series B Slides</u>	<u>Items where they occur</u>
General slides of the ward showing kitchen, bathroom, day room, general view a patient's locker etc	Item 1.5.1. 1.5.3. etc
A domestic clocking on The domestics' rest room	Item 2.1.3.
Sink area in the kitchen	Item 2.6.3.
Cleaning equipment for floors	Item 3.3.1.
Someone washing the floor in the correct way	Item 3.3.2.
Specific safety hazards	Item 3.6.3. Item 5.4.2.
Hospital notices	Item 1.2.3. 3.6.5.
Different jobs cleaning toilets cleaning baths collecting jugs washing up collecting rubbish etc	Item 4.7.1. etc



4 A TIME TABLE FOR A DOMESTICS COURSE

	<u>Contact</u> Initial contact with the hospital through: personnel or training the hospital administration the domestic department
One or two days	<u>Investigation</u> Initial assessment of language needs. Testing a selection of the worst English speakers, and selecting a class of up to fifteen. A tour of the hospital and a close examination of the domestics' daily work, equipment, the hospitals particular safety concerns etc.
One day or two half days	
Several visits and phone calls	<u>Preparation</u> Negotiating the time of the class, the place of the class etc. Informing the proposed students by letter that they have been selected and getting their consent to join the class. Meeting supervisors to explain what the course aims aims to do and how they can help.
Twelve to fourteen weeks	Teaching the course, four or five days per week, with time allowed for special preparation of materials relating to your particular hospital. A weekly round of all wards or areas from which your students are drawn to stimulate interest among those working with them (nurses, housekeepers, supervisors etc) and to distribute your weekly sheets.
One full day or two half days	Testing all the students who have completed the course. Marking the test.
Several visits	Collecting from the supervisors the assessment sheets that they have filled in on each student (distributed by you to the supervisors at the end of the course).
One or two days	Writing up your report on the results of the course for the hospital

document follows:

the following:

transcript

been obtained to determine
what our different factors are
responsible for the results
obtained by this technique
and this may be done
by the following methods:

1. to determine the
percentage of protein
in the diet that is
available to the animal
and the percentage of
protein that is absorbed
by the animal.

2. to determine the
percentage of protein
in the diet that is
available to the animal
and the percentage of
protein that is absorbed
by the animal.

3. to determine the
percentage of protein

in the diet that is
available to the animal
and the percentage of
protein that is absorbed
by the animal.

4. to determine the
percentage of protein

5 THE CONTENTS AND STRUCTURE OF THE COURSE: A QUESTION OF FOCUS

At first sight this course may seem confused and patchy to the teacher who is used to working through a clearly set out syllabus, probably based on selected and graded structures. This seeming confusion is due to the fact that there are four 'syllabuses' or 'aspects' to the course, operating concurrently.

- The functional aspect
- The structural aspect
- The situational aspect
- The behavioural/cultural aspect

Each item may contain elements of each aspect but it is likely to focus on either a function, a structure, a situation or a cultural factor, throwing the other three elements into the background. Thus for example, Item 2.5.1. focuses on the function of making a polite request; Item 1.6.1. focuses on the structural topic of subject pronouns with the verb be; Item 4.1.3. focuses on the situation of a consultation with the doctor, requiring no more than passive comprehension of the structures, and Items 5.1.3. and 5.1.4. focus on the cultural/behavioural aspect of birthdays and festivals and how they are celebrated by the British and the particular group of foreigners in your class.

The layout of the items is intended to show the teacher quickly which aspect the item is focussing on. Items are laid out under headings as follows:

Context Cultural background you need to know eg 2.3.1. parts of the body; information you need about the domestic's job before you embark on the item eg 4.3.1.; behavioural factors regarding confidence etc, eg 3.4.1. and so on.

Language function Apologising; making a request; greetings, initiating friendly conversation etc.

Vocabulary Items of vocabulary either individually or in sets. Vocabulary teaching has an important place in this course as the load to be mastered by the domestic is relatively heavy (see Item 1.3.1.).

Pronunciation Any specific pronunciation problems, particularly where they affect intelligibility eg the teen/ty distinction in numbers.

Equipment This gives the teacher a list of the bits and pieces he will need to present or practise the item.

The teaching material itself with suggestions for presentations and practice.

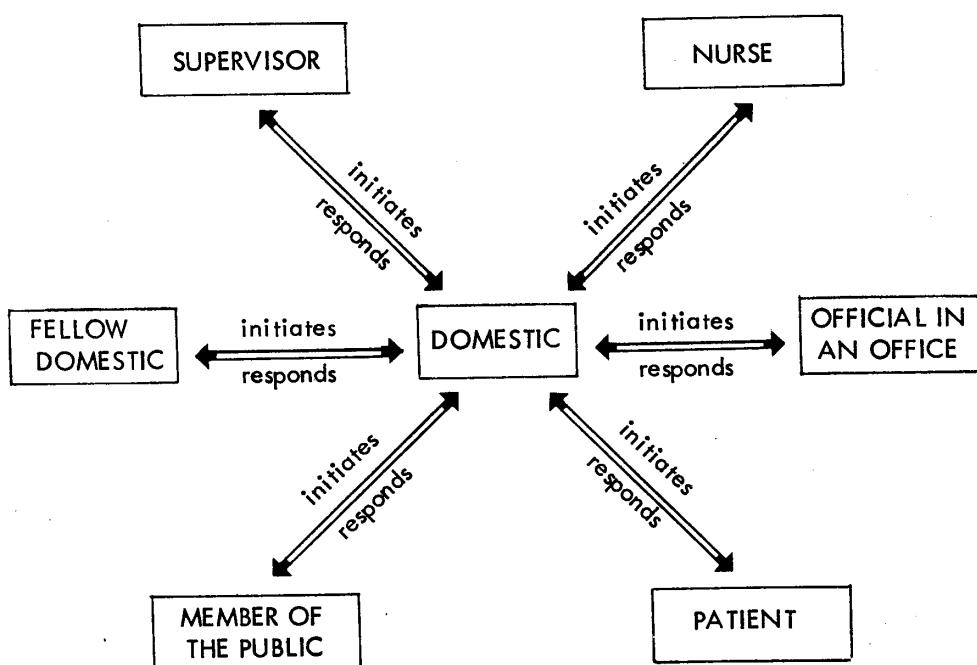
Follow-up activity In some cases a follow-up activity is suggested eg item 1.5.1.

Not every heading appears in every item; for example, if there is no new vocabulary, the heading Vocabulary does not appear.

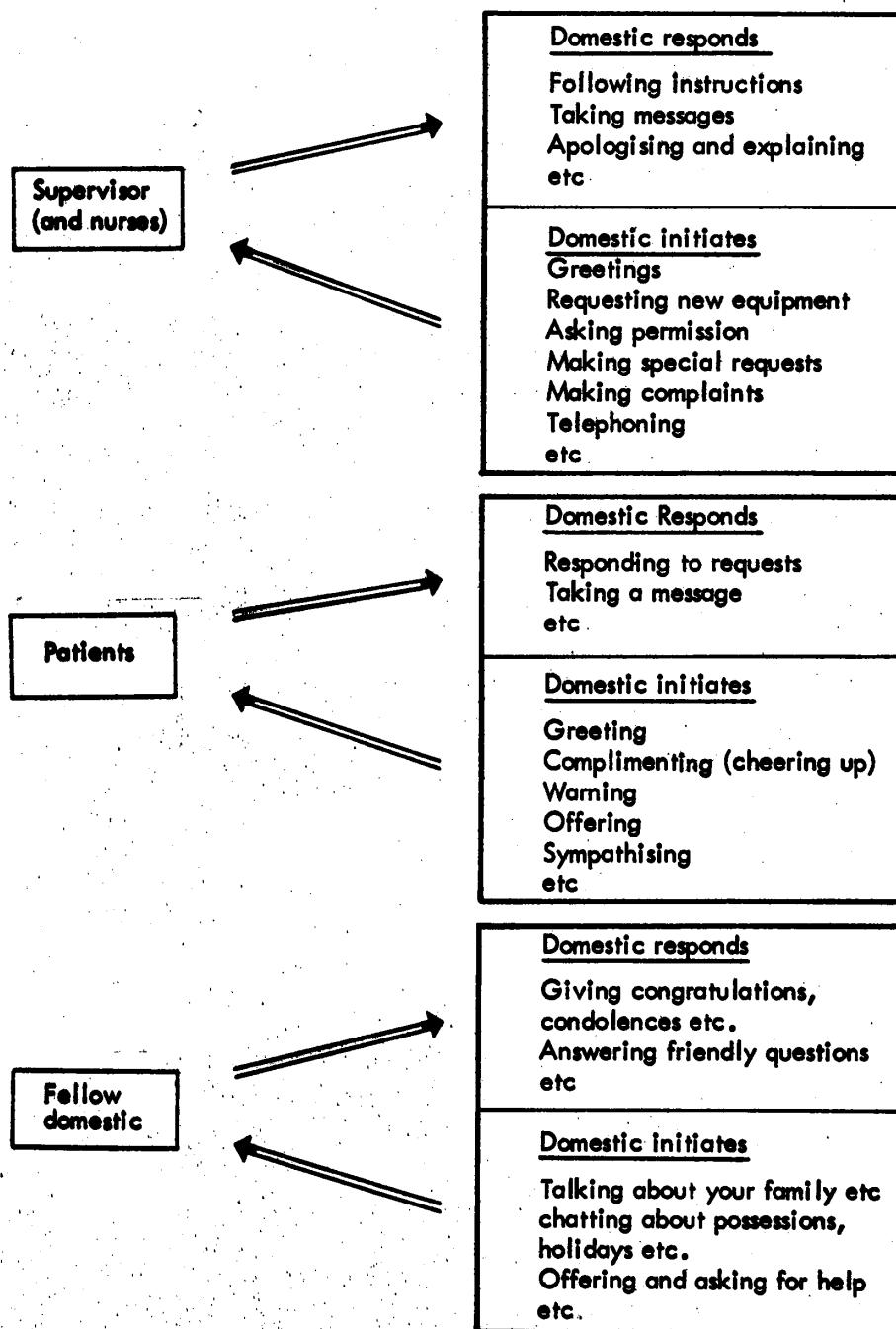
We will now look in more detail at each of the four aspects of the course - functional, structural, situational and behavioural.

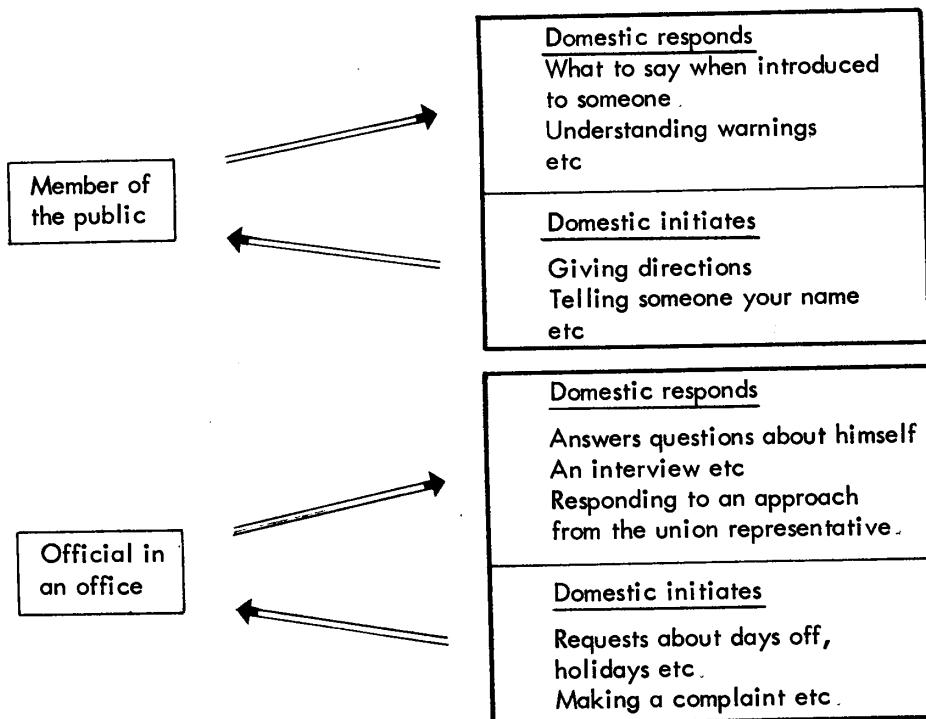
(a) The functional aspect

The first step in devising a functional syllabus is for the course writer to become fully familiar with the language needs of the learner. To do this, three different jobs were undertaken by three different observers: one worked for a period as a ward orderly, one as a housekeeping assistant, and one as a male domestic in charge of corridors and floor buffing. All these periods of participant observation were carried out in different hospitals. From these experiences it became clear that a hospital domestic's major language needs were in relation to the following people:



When the most frequently occurring and important transactions between the domestic and the others had been analysed, we were able to arrive at a broad set of functions, examples of which are given below:





It was on the basis of this functional analysis that we arrived at the actual selection of language functions that appear in the teaching items.

The concentration of the course on the language used in the hospital may make it appear that the overseas worker is being given only a very limited level of English, that is relevant only to his job as a hospital domestic. We feel, however, that the wider aim of equipping a foreign worker to live in Britain is also to some extent being achieved, because for most, the place of work is the primary place of adjustment to British society. Indeed, many will have almost no contact with British people outside the hospital. Once he has the knowledge and confidence to communicate successfully at work, the foreign worker's ability to do so elsewhere will quickly follow. In any case, the functions we have chosen to teach have a much wider application than the work situation. Greetings, apologies, simple questions and answers about oneself, asking for help, using the telephone etc, though taught within the context of the job, form a core of language as essential and useful outside as inside the hospital.

(b) The structural aspect

The way structures are taught in the Domestics' course will probably not be familiar to many teachers of English as a Foreign Language. The grading for example, is not along structural lines. In item 2.2.2. for instance, the students are taught to ask the patients 'Did you sleep well?' as an extension of their morning greetings, although the Past Simple Tense is not presented as such until Section Three of the course. Here the focus is on the function, rather than on the structure, and the students are required to learn the question as a formula.

Certain large structural areas have been omitted, for example the continuous tenses. Ruthless decisions have had to be made, as a course in a hospital can only work on a short, intensive basis (See 3 How to set up a course in a hospital). The need to achieve limited objectives in a short time has led to decisions being made which may seem unusual to teachers.

(c) The situational aspect

Some parts of the course focus specifically on situations. Such situations may either be specific tasks eg washing up, cleaning floors which involve a heavy load of vocabulary, or they may be particular kinds of transaction in which more than one function is involved, for example, a consultation with a doctor, which involves answering different questions, receiving instructions concerning treatment and so on. In such cases, where we have felt that the material groups itself naturally round a specific situation, we have used the opportunity to teach new vocabulary, revise old material, introduce less controlled material for passive comprehension, and help to build the students' confidence in coping with situations which may previously have been stressful.

(d) The behavioural/cultural aspect

Items which focus on the behavioural/cultural aspect of the course are designed to help the students to come to grips with aspects of British life, particularly as experienced in the hospital, which may be unfamiliar to them. Examples range from fairly trivial matters (eg the weekend, which may be a new concept to those from a rural background unused to a time-tabled work schedule) to more sensitive areas; for example, the need for a tactful remark or explanation to English people present when foreigners are speaking together in their own language (see item 5.6.1.). Other 'behavioural' items include how to behave and what to say if you don't understand; how to introduce yourself; how to give your name clearly to an English person who may find it difficult to grasp, etc.

Illustration of the four aspects and focus of different items

	FUNCTIONAL	STRUCTURAL	SITUATIONAL	BEHAVIOURAL/ CULTURAL
Item 2.5.3.	<u>FOCUS ON FUNCTION</u> Making polite requests	← Questions with 'can'	← Asking for food in the canteen	← When and how to use polite forms
Item 3.1.4.	→ Explaining where things are	<u>FOCUS ON STRUCTURE</u> Irregular past tense forms	← The ward	← Building confidence in quick questions and answers
Item 3.6.3.	→ Giving warnings	→ Imperatives	<u>FOCUS ON SITUATION</u> Special hazards in the hospital	← Awareness of and responsibility for safety
Item 5.1.5.	→ Social formula for special events	→ Exclamations	→ Certain social relationships	<u>FOCUS ON BEHAVIOUR</u> Appropriate verbal and social behaviour at a birthday, engagement, birth, death etc.

6 METHODOLOGY

The students you are likely to teach on a domestics' course may be:

- unfamiliar with modern teaching methods
- lacking in self-confidence in their ability to learn and use English
- either completely illiterate or semi-literate in English.

For these reasons, there is a strong confidence-building element in the course, and an almost total absence of written material.

The Domestics Course is in the form of a manual for the teacher, and therefore is open to adaptation and change to suit the individual teacher's references and style. This is so particularly in the initial presentation of each item, although suggestions for presenting items are given throughout. Some of the methods suggested are, however, central to the thinking of the course, and, we believe, are important in overcoming the students' considerable learning problems. Although these methods are likely to be unfamiliar to the students, and may perhaps be new to the teachers, we feel that they should be attempted and consistently applied from the beginning of the course.

These methods (discussed in more detail below) are:

Practice work in small groups of three or four.

Carrying out non-useful activities in response to language using objects common in the domestics' work.

Use of tape-recorded material for both listening and practice.

(a) Group work

By group work we mean a period of time during a lesson when the class is divided into groups of three or four learners. They practise amongst themselves language items which have been initially presented to the class as a whole and which have been sufficiently practised for the majority of the class to have grasped the material accurately.

A very large number of items in the course, particularly practical activities, games, short dialogues, and question and answer sequences, have been designed for this sort of practice.

If the teacher does not practise the material in this way, he will find that there is not enough variety in the material or the examples to hold the interest of the whole class. The question in Item 1.7.2. about the learners' families illustrate this. If the teacher practises these questions by getting individual students to ask him: Where does your father live? Where does he work? etc the class will quickly become bored by hearing the same answers each time, and by their lack of participation.

Some teachers may feel that the natural way to avoid this is to change elements in the question, keeping 'Where?' and 'What time?' constant. Certainly, wider practice may be needed with some structural features. But by giving it at this stage, the teacher increases the learning load and extends the length of the course, or finds himself compelled to exclude other items which may be more important. Teachers are used to teaching on the assumption that the learner has all the time he needs to master whatever he is learning, but in any in-hospital course the time is very strictly limited. There is, however, a more fundamental objection to a teacher indiscriminately extending the structural drilling of a piece of language, in doing so he may alter the language function. In items which focus primarily on the function, rather than the structure, of the language being learned, any extension of material for the purposes of structural drilling must very carefully take the function into account. The way to get students to practise limited material without boredom is to get them to ask each other the questions, and it is more natural and much more economic of time to do this in small groups, rather than across the public classroom.

Group work also means that all the students are directly involved in what the class is doing. It is far more difficult to be a passenger in a group of four than in a class of sixteen. Obviously, the amount of time directly spent in practice for each student is greatly multiplied, as, instead of the teacher and one student speaking, there is a total of eight students practising at any one moment in a class divided into four groups.

Both of the above arguments for group work relate to saving time on a type of course in which there is a shortage of time. But there are also strong pedagogic arguments for using

group work and for spending time on establishing it from the very outset. Some teachers have suggested that students would not have the confidence to use group work until far on in the course. But we have always successfully worked in groups from the start and have found that group work is a means of building the type of confidence that a student must acquire from the outset if he is to start using the English he is learning on his own. A group situation comes far closer to real communication than teacher/student exchanges across a classroom ever can.

Your students will probably have been accustomed to very formal methods in their previous education, and will need to be weaned away from teacher-centred learning and towards accepting for themselves the more active role which is essential for learning and using spoken English. Group work forces this upon the learner. It also helps to overcome the shyness that the students are likely to feel at saying anything to one another in English when they have a more fluent language in common. The group situation also provides a much more relaxed and realistic social situation than the full class does for practising English. Speaking out across a formal class in a foreign language is essentially a stressful situation which does not encourage easy practice.

Since group work will be unfamiliar to the students, the teacher, when introducing it, should organize one group first with the rest of the class observing, so that they see what they have to do. It is also often a good idea to divide the best students between groups so that they can take a lead in organizing the work, although other factors, such as friendships and work relationships must also determine group membership. The other essential for organizing group work is to make sure the language material given for group practice at the beginning is easy and short. It is enough to start group work with periods of only three or four minutes. Even at a later stage, it is seldom useful to spend more than about ten minutes at a time on group work when using this course.

It will be obvious to the reader that we feel strongly that group work should be used from the outset with these materials. This fact needs to be remembered when choosing a classroom and arranging it. Chairs in rows, or arranged in a semi-circle, or around one central table, should be avoided. Students are best grouped in fours or fives round individual tables.

(b) Practical activities

The practical activities suggested throughout the course perform several important purposes:

(i) They allow the students to listen and absorb language while giving a non-verbal response before being asked to give a verbal response. This gives them time to assimilate the new language accurately before being required to reproduce it. This idea is the basis of our strategy for vocabulary teaching, explained in detail in Item 1.3.1.

(ii) Practical activities also relax the class, and release tensions. The handling of familiar objects while carrying out familiar tasks in response to English instructions, gives the class a break from the necessity of giving purely verbal responses and also gives an important sense of achievement (cf item 1.3.2.).

(iii) The ability to carry out instructions given in English also increases the students' confidence in the language they use in their daily work.

(iv) Handling objects gives the student a secure base when he is learning a language sequence. The effort and tension involved in speaking the foreign language seem to be diminished, possibly by channelling them into physical activities. In Item 3.5.1., for example, Words of Quantity are learned while the students, practising in groups, work with jars and a liquid or powder to pour.

(c) The tape recorder

Tape recorded items serve three main purposes in this course:

(i) To provide ear training with a variety of voices. It is actually more difficult to listen to a tape recorder than to a person because of the removal of all gestures and visual cues, and because there is an inevitable degree of distortion. The use of tape recorded items from the outset, even if the material is provided by the teacher, trains the learner in the effort and concentration that accurate listening demands. This is particularly important with immigrants who have grown used to switching-off mentally during the floods of English which flow over them at work, or when watching television. The breaking of this 'switching-off' mechanism, which may have developed over several years, is an important first objective.

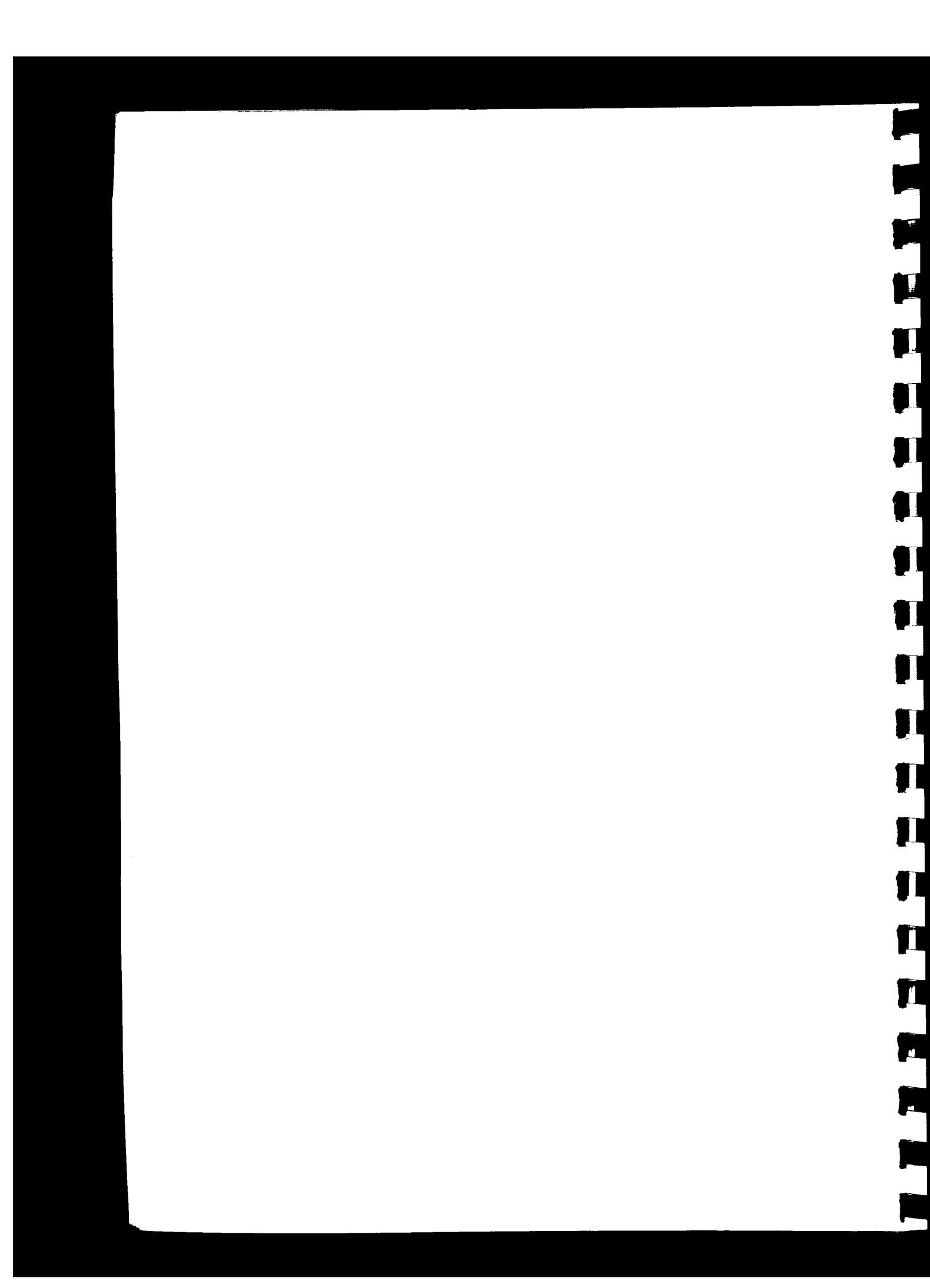
(ii) To provide a variety of context and realism which the teacher alone cannot create in the classroom. This is done mainly in the form of dialogues, set in the hospital situation, and contextualized in many cases with the slides of Series A.

The dialogues usually contain only one speaker's part as a target for the learner. The other side of the dialogue is only intended for listening comprehension eg Item 5.3.1... The language of the listening side of the dialogue is not as tightly controlled as the language of the learning side, because it is characteristic of the immigrant's position that he is subject to native speakers addressing him with unfamiliar language in real situations. The use of one-sided learning dialogues also gives the opportunity to cast the learner in realistic roles and situations. The dialogues are usually recorded three times for a three-phase use:

- (i) listening
- (ii) listening to one character repeating the other
- (iii) filling in one character's part (which has been blanked out) against the other parts on the tape .

This third use is often a little difficult for students and teacher to grasp initially. Very clear guidance is needed from the teacher or the practice breaks down. This means that the teacher must show conviction in the method from the outset or it may be unworkable. This would be a pity, as it is only in this third phase that the student has to make a thoughtful and realistic response.

We have reservations about too extensive a use of recorded material with courses of this kind, but we have found that tape items can serve a purpose for which there is no simple alternative. The disadvantages are that the tape recorder is a machine which encourages mindless repetition in this type of learner, and that carrying on a dialogue with a machine is unreal at the very least, whereas immigrant learners desperately need real contact with English speakers involving their own feelings and personalities.



7 HOW TO TEACH THE COURSE

Obviously, the needs and learning capacities of your students will differ greatly, depending on such factors as their previous educational experience, age, and intelligence, but teacher expectations are a vital factor in determining the learner's performance and progress. In our experience, the teacher on an in-service course of this kind should set his expectations fairly high, and give the students some of the confidence they so badly need by expecting them to do well.

The hospital will expect a dramatic improvement in English from the learners, and the teachers must expect the same. You have perhaps three months in which to lift the student from his slough of failure and isolation to a level at which he can really communicate; to a firm base from which he can take off and continue to learn after the classes have ended. The teacher must expect and insist on no less.

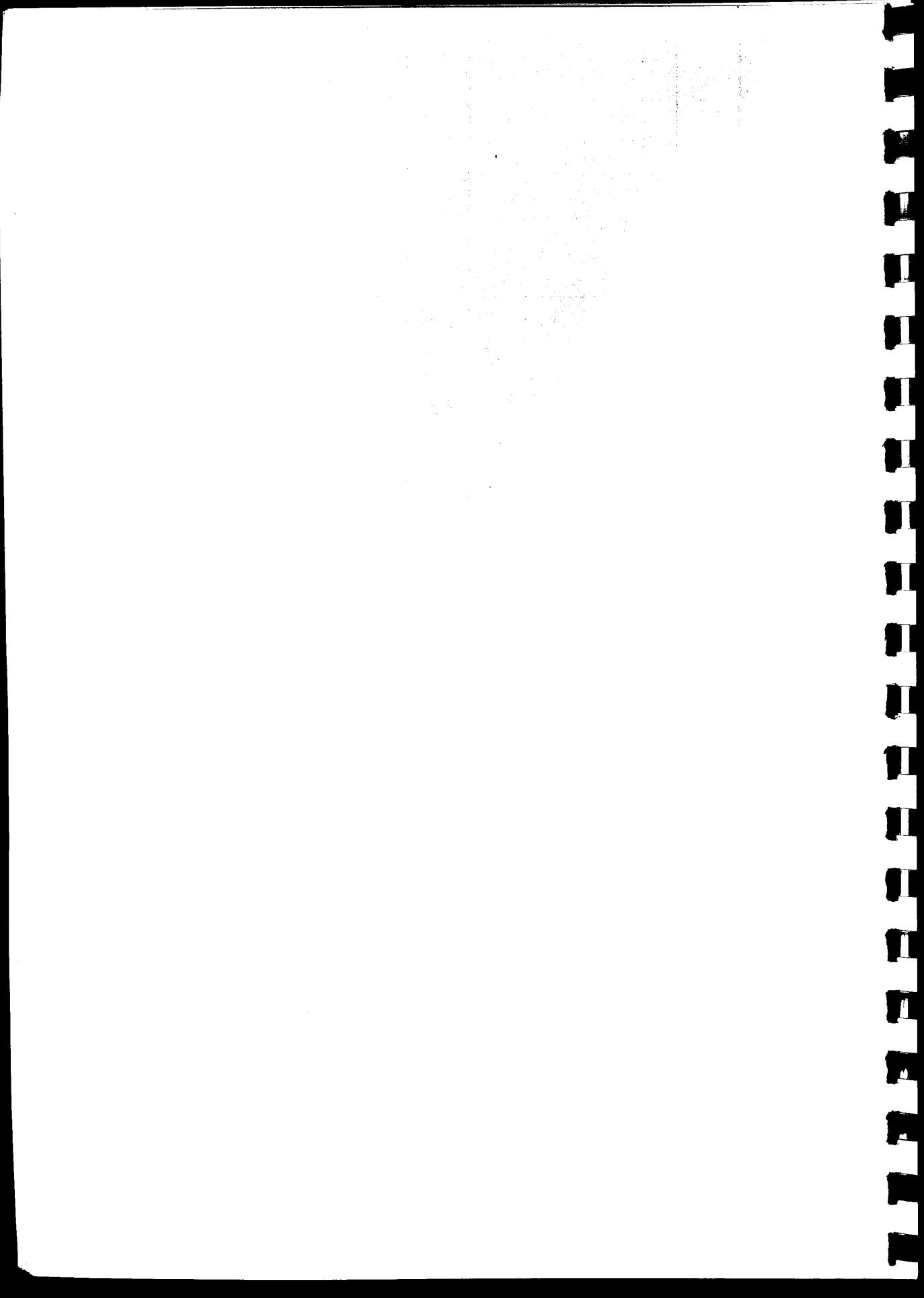
There are some factors which will help in what seems to be a very difficult task. Some have been already mentioned (eg the immediate relevance of the language learned to the learner's situation). But another very important factor is the extent to which the learner has already been exposed to a great deal of English, sometimes over a long period of time, and if the teacher can tap this 'passive' knowledge, progress can be surprisingly fast. It may be as much a matter of giving the student the confidence to use language partly known and understood, as of teaching entirely new language.

All these factors mean that the course must be kept going at a considerable pace. The amount of material given here (which is after all, only a basic minimum needed in the hospital domestic's situation) can only be covered if the teacher steadfastly refuses to be delayed by inessentials, and sticks to a fairly relentless pace. Whenever you are tempted to spend an excessive amount of time on a particular point, ask yourself: 'how important is this to the students' real needs and situation? How much will this point affect intelligibility and real communication?' For example, the -s form in the present simple tense will probably not be crucial to the learners' real need to communicate, nor to his intelligibility, but the difference between fifteen and fifty probably will.

The concentration needed to keep learning going at this pace can only be maintained if there is constant variety in the organization of lessons. The course itself is laid out in sections, parts and items, and the items are grouped into parts by topic. This does not mean that the items should be taught consecutively, one finished before the next started, one part taught directly after the previous one, etc. On the contrary, there should be a mixture of different items drawn from different parts in each lesson. You should not normally spend more than fifteen minutes on any one item, though later in the course you may be able to keep the class's concentration for twenty minutes. Normally one needs to bring an item into three or four lessons before it has been fully mastered. It will of course be necessary for the teacher to go back and revise earlier items from time to time, though provision for revision has been built into the course to a certain extent.

An example of the arrangement of teaching items in the first week of the course

	Section 1 Part 1	Section 1 Part 2	Section 1 Part 3	Section 1 Part 4	Section 1 Part 5
<u>Monday</u> Getting the students' names and settling the class will take some time. Use an interpreter to give a short introductory talk about the course and to give the students a chance to ask questions.	Items 1.1.1. (10 minutes)	1.2.1. (15 minutes)	1.3.1. (10 minutes)		
<u>Tuesday</u>	Items 1.1.1. (5 minutes)	1.2.1. (10 minutes)	1.3.1. (15 minutes)	1.4.1. (15 minutes)	
<u>Wednesday</u>	Items 1.1.2. (10 minutes)	1.2.1. (10 minutes)	1.3.1. 1.3.2. (15 minutes)	1.4.1. (10 minutes)	
<u>Thursday</u>	Items 1.1.2. 1.1.3. (10 minutes)	1.3.2. (10 minutes)	1.4.2. (10 minutes)	1.5.1. (5 minutes)	
<u>Friday</u>	Items 1.1.2. 1.1.3. (10 minutes)	1.2.1. 1.2.2. (10 minutes)	1.3.2. (5 minutes)	1.4.2. 1.4.3. (15 minutes)	1.5.1. (5 minutes)



8 INVOLVING OTHER PEOPLE IN THE HOSPITAL

One of the major advantages of teaching in the work place is the immediate relevance of the language learned in the classroom to the situation to which the student returns. It is only by fully involving the English people the domestic works with day by day, however, that this advantage can be properly exploited.

The English people the domestic encounters most frequently are fellow workers (unless all these are from overseas), patients, supervisors and nursing staff. There are several important steps that need to be taken to involve some or all of these people in the language training:

initial explanation

attendance to the classes by English staff

weekly sheets summarizing the language learned handed to everyone who comes in contact with the student.

(a) Initial explanation

It is important to be properly introduced by some recognized person in the hospital management (usually a domestic supervisor) to all the people likely to be involved in the language training programme. It is vital to explain to nursing staff why their domestic is going to disappear from the ward for a certain time every day, and to explain where necessary that this is a training programme authorized by the hospital. This can best be done by going round each ward from which a domestic will be coming to the class and meeting the sister personally.

The domestic supervisors also need to be informed of the type of training involved. It is most important to secure their cooperation at an early stage, as these are the people most likely to be able to attend the language classes and give the students the practice and encouragement they need. You may like to invite the supervisors to a meeting, to explain the course to them, invite them to play an active role, and answer any questions. In other cases it may be better to meet them individually.

While going round the hospital and visiting the wards from which your students will be drawn, take note of any English, or English-speaking domestics working with your students and, where this is possible, explain the aims of the language teaching programme. In some cases this may need a tactful approach, as those not receiving training may resent the 'special treatment' of those going on the course.

It is a good idea to ask the Domestic Manager if you can meet the shop steward of the union most active in the hospital. The Trade Union may be a channel of communication with the domestic workers generally. In any case, it is important to have the Union's backing and to use it if there is any criticism from fellow workers.

(b) Attendance at the classes by English staff

This usually means domestic supervisors. Patients, of course, cannot attend, nursing staff are very unlikely to be able to, and other domestics are usually needed to keep the work going while the students are at the class, although it may be possible for one or two representatives such as the shop stewards to attend from time to time.

You should make it clear to the Domestic Manager or Superintendent from the outset that supervisors are very welcome in the class, and that their presence will enhance the chances of the students to learn, as they will be able to continue practising out of class time. In most cases, we have found supervisors interested and keen to take part, and some hospitals have set up a rota system so that supervisors can take it in turns to attend the classes.

(c) Weekly summary sheets

Sheets outlining the week's work should be duplicated **every week** and taken round to each ward from which the students are drawn. They can be given to nursing staff, other domestics, supervisors, and, where nursing staff are willing, to patients, particularly patients in long-stay wards who are able to follow a domestic's progress.

Different teachers will have different styles and methods of approaching this, but it is a good idea to give your sheets as much interest as possible. A straightforward list of items learned is unlikely to catch the eye of a busy person, who has difficulty enough in keeping

up with the amount of paper work involved in running a hospital ward. Eye-catching cartoons, drawings or suggested games or activities of a simple kind will make your weekly sheets an event, and will be much more likely to engage everyone's interest and result in continual practice for the student.

An example of a summary sheet illustrating the first week's work is given on the next page. It reflects a particular teacher's personal style. Your own talents and ingenuity will suggest how you should tackle this problem.

MIDDLESEX HOSPITAL

ENGLISH LANGUAGE TRAINING

Week 11 June 30 - July 4

This week the domestics have learnt

1. How to ask for replacement equipment and materials;
I've run out of Vim. Can I have some more please?

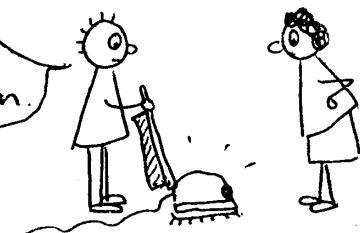
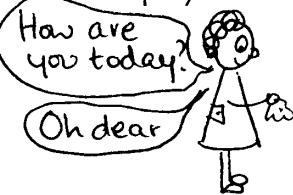
I've run out of soap
I've run out of milk

Can I have another cloth please?



2. BETTER WORSE and I HOPE
You look better today

I hope you feel better tomorrow



3. Serving food
Asking questions and getting the quantities right;

Do you want a cup of tea?
How much milk do you want?
How much sugar?



How many potatoes do you want?



4. Talking about health and explaining what's wrong
I've got a headache
I feel sick
I've got a bad back
I've got a sore throat



9 EVALUATING THE COURSE

Since the course has been in hospital time, and has in effect been a form of in-service training, the hospital will expect a thorough evaluation of the results, set out clearly in the form of a report.

We have found that the following methods give an adequate evaluation:

(a) Administering a post-course assessment test

To give a clear-cut indication of specific improvement, it is a good idea to include in the final test some of the items given in the original test ie The English Language Assessment Interview for Hospital Ancillary Staff published by the King's Fund (see e (a)), though naturally you will need to add new items more closely related to the contents of the course.

The following is an example of a final test:

SECTION A	Acceptable	Unacceptable
SOCIAL CONVERSATION		
Good morning. How are you?	1	0
How do you spell your name?	1	0
Where do you live?	1	0
What time do you come to work every day?	1	0
Are you married?	1	0
Have you got any children?	1	0
What did you do last weekend?	1	0
When did you come to England?	1	0
Where do you work in the hospital?	1	0

SECTION B	Able	Hesitates	Unable
INSTRUCTIONS			
Pick up the piece of paper	2	1	0
Give it to me	2	1	0
Touch the pencil	2	1	0
Don't pick it up	2	1	0
Take the piece of paper	2	1	0
Put it on the pencil	2	1	0

SECTION C

TALKING ABOUT THE JOB

What time do you clock in?	2	1	0
What do you do in the morning on the ward?	5	3	1
When do you damp mop the floor?	2	1	0
Tell me how you wash the floor	5	3	1

SECTION D

THINGS USED ON THE WARDS

Show pictures or objects and ask the domestic to name them;

Total (max 10)

CUP saucer bucket flowers jug knife trolley

slippers bottle dustpan (or any other objects you have taught)

SECTION F

TALKING TO THE PATIENTS

What do you say to the patients when you see them in the morning?

Show a picture of a locker with some things on it:

What do you say to the patient about the things on his locker?

SECTION F

ASKING FOR NEW EQUIPMENT

Show the domestic some broken equipment	3	2	1
Get her to ask you for a replacement			

Ask her why she needs it	3	2	1
--------------------------	---	---	---

SECTION G

TALKING TO THE OFFICE

Say; When you are ill at home you have to telephone the supervisors office and that you can't come to work	7	5	3
What do you say to the supervisor?			
If you want to change your day off what do you say to the supervisor?	7	5	3
(Ask the domestic why)			

(b) The supervisor's own assessment

In the week immediately following the course, ask the supervisors to administer their own assessment test. This, more than any other method, will be of interest to the hospital when they are looking at your results.

Here is an example of the kind of assessment sheet you might ask supervisors, nurses, or housekeepers (whoever is most closely involved with your students) to administer:

ENGLISH LANGUAGE TRAINING

Dear Mrs Smith,

We have now finished the language course for Carolina on your ward and we would like to have your opinion on how she has done. Can you please ask her the questions on this sheet and put ticks in the boxes which represent your answer? When you ask these questions, please try not to let her know that you are testing her, but use natural opportunities as they arise.

May I take this opportunity for thanking you very much for your interest and cooperation on the course.

Yours sincerely,
(Teacher's name)

1 Greetings

Does the domestic greet you when she sees you in the morning?

Example: Good morning. How are you?
or whatever you normally say.

Unable	Hesitates	Able

2 Social Language

Can she talk to you on a personal topic?

Examples:

- (a) Tell you what she did on her last day off
- (b) Tell you about her family.

You could ask her some questions to introduce these subjects such as:

Where did you live in Spain?

Have you got any brothers and sisters?

Did you have a nice day off?

What did you do?

or whatever you might normally say.

Unable	Hesitates	Able

3 Things around the ward

Can she name everyday objects around the ward?

To test this, ask her to bring you a few small items you normally use every day

Examples: bed linen: sheet
towel
pillowcase etc

dishes: cup
plate
saucer etc

Unable	Hesitates	Able

4 Telling the time

Ask her:

What's the time?

Unable	Hesitates	Able

5 Polite forms

Does she use the polite forms 'please' and 'thank you' in normal conversation?

Unable	Hesitates	Able

6 Giving a message

Ask her to give a simple message in English to another person on your ward, and check up to see if the message was delivered correctly.

Examples: Can you ask Annie to come and see me please?

Can you ask Josie to bring another cup and saucer please?
or whatever you might normally say.

Unable	Hesitates	Able

7 Understanding instructions

Can she carry out straightforward instructions correctly?

Examples: please count the knives on the trolley.

how many are there?
please put the map away or
whatever you normally say.

Unable	Hesitates	Able

(c) General reactions to the students progress

It is difficult to invent rigorous tests for evaluating the students' improved ability to communicate, and their improved motivation and efficiency at work. The only practical method is to ask for the opinions of those most closely involved with the students. Obviously, this kind of evaluation is unreliable, but it can be a useful indicator of results. Remarks like:

'She's much more confident now. She comes and asks me herself when she wants something rather than spend half the morning looking for someone to say it for her', indicate a good deal in terms of improved efficiency.

The following are examples of the kind of questions you might put to supervisors during an informal chat;

(i) Since the course began have you noticed a change in X's English?

1 none	3 better
2 a little better	4 a lot better

(ii) Has X made more attempt to chat to you, the patients, and other people at work?

1 none	3 medium effort
2 a little	4 a great effort

(iii) As a result of the course do you think X is a more useful and flexible worker?

1 about the same.
2 more useful and flexible.
3 a lot more useful and flexible.

(d) Producing a final report

Your report should aim to cover the following areas:

How the language course was organised:

initial link with the hospital

dates of course

times of classes

where the course was held

The problems of communication in the hospital uncovered during your preliminary investigation.

The contents of the course (a brief summary):

The trainees' improvement in English:

It is easiest to give this information in a very simple format as follows:

No change	General Level of English	Following Instructions	Giving Explanations
A little improvement.			
Fair improvement			
Great improvement			

The trainees' ability to use English at work:

Insert here a summary of the supervisors' assessment.

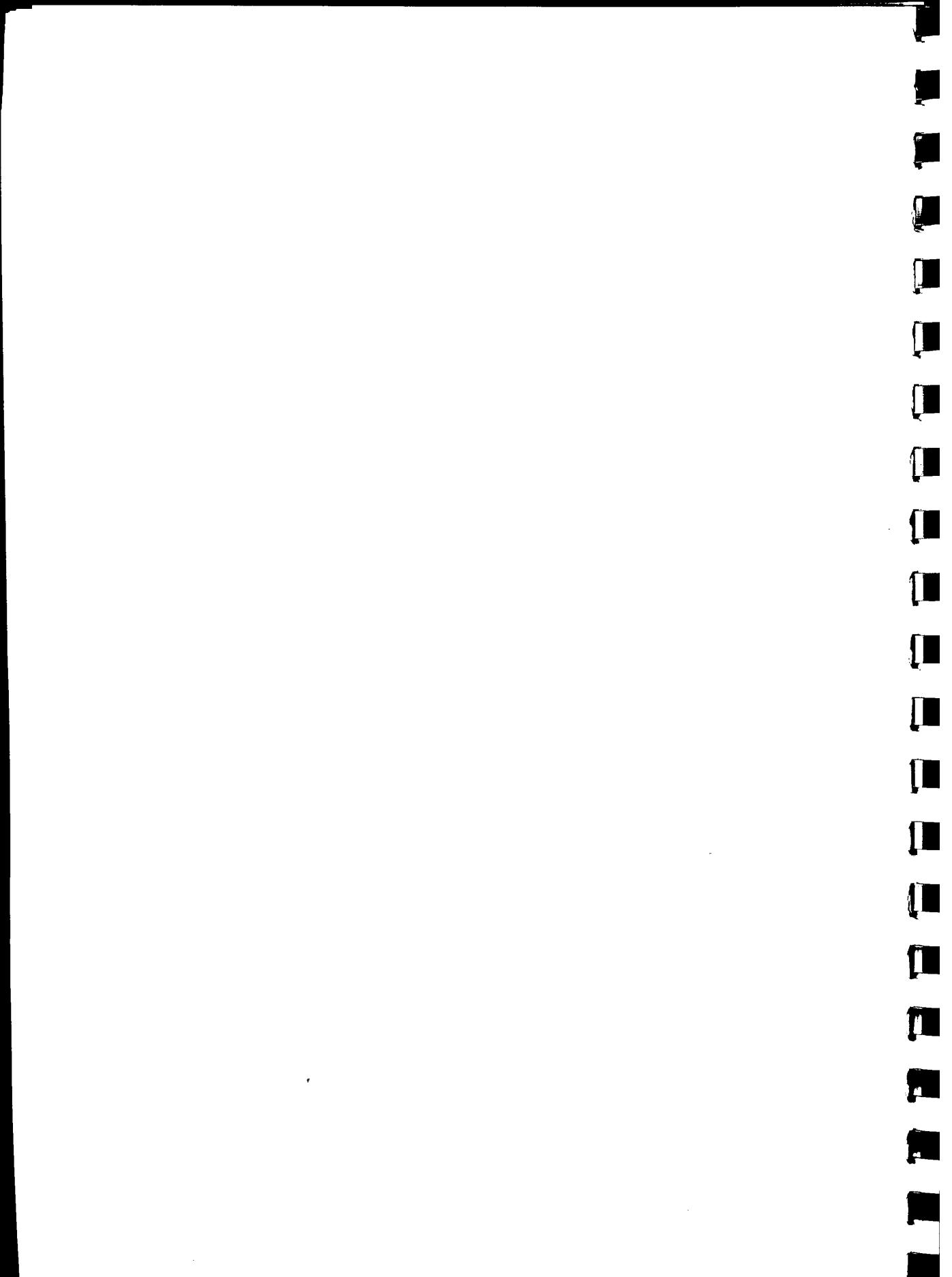
Supervisors' and nursing staff's reactions to the course:

Note here any comments made, or any overall impressions you have received.

Conclusions:

You may wish to recommend another training course for other domestics at this point.

Appendix: showing detailed marks of the 'before' and 'after' tests.



CHECKLIST A:

TAPE ITEMS

Section One

Tape item 1	Reading words	Item 1.2.3.
2	Instructions	Item 1.3.1.
3	Instructions	Item 1.3.2.
4	Sets of greetings	Item 1.4.1.
5	Greeting dialogue	Item 1.4.3.
6	What's your name?	Item 1.4.4.
7	Asking patients how they are	Item 1.4.5.

Section Two

8	Did you sleep well?	Item 2.2.2.
9	Parts of the body	Item 2.3.1.
10	Asking about special ailments	Item 2.3.3.
11	Serving tea to the patients	Item 2.4.5.
12	Responding to requests	Item 2.5.2.
13	In the canteen	Item 2.5.3.
14	Responding to requests	Item 2.6.2.
15	Names of people in the hospital	Item 2.7.1.
16	Using names correctly	Item 2.7.2.

Section Three

17	Answering questions about yourself	Item 3.1.1.
18	Talking about your holiday	Item 3.1.3.
19	Questions about coming to England	Item 3.1.6.
20	Complimenting: cheering patients up	Item 3.2.1.

21	Chatting to patients	Item 3.2.2.
22	Vocabulary: floor cleaning equipment	Item 3.3.1.
23	Instructions for cleaning the floor	Item 3.3.2.
24	Asking for more materials	Item 3.3.3.
25	What to say when you're not understood	Item 3.4.1.
26	Asking patients how much they want	Item 3.6.3.
27	Warning a patient about a hazard	Item 3.6.3.
28	Special instructions to do with safety	Item 3.6.4.

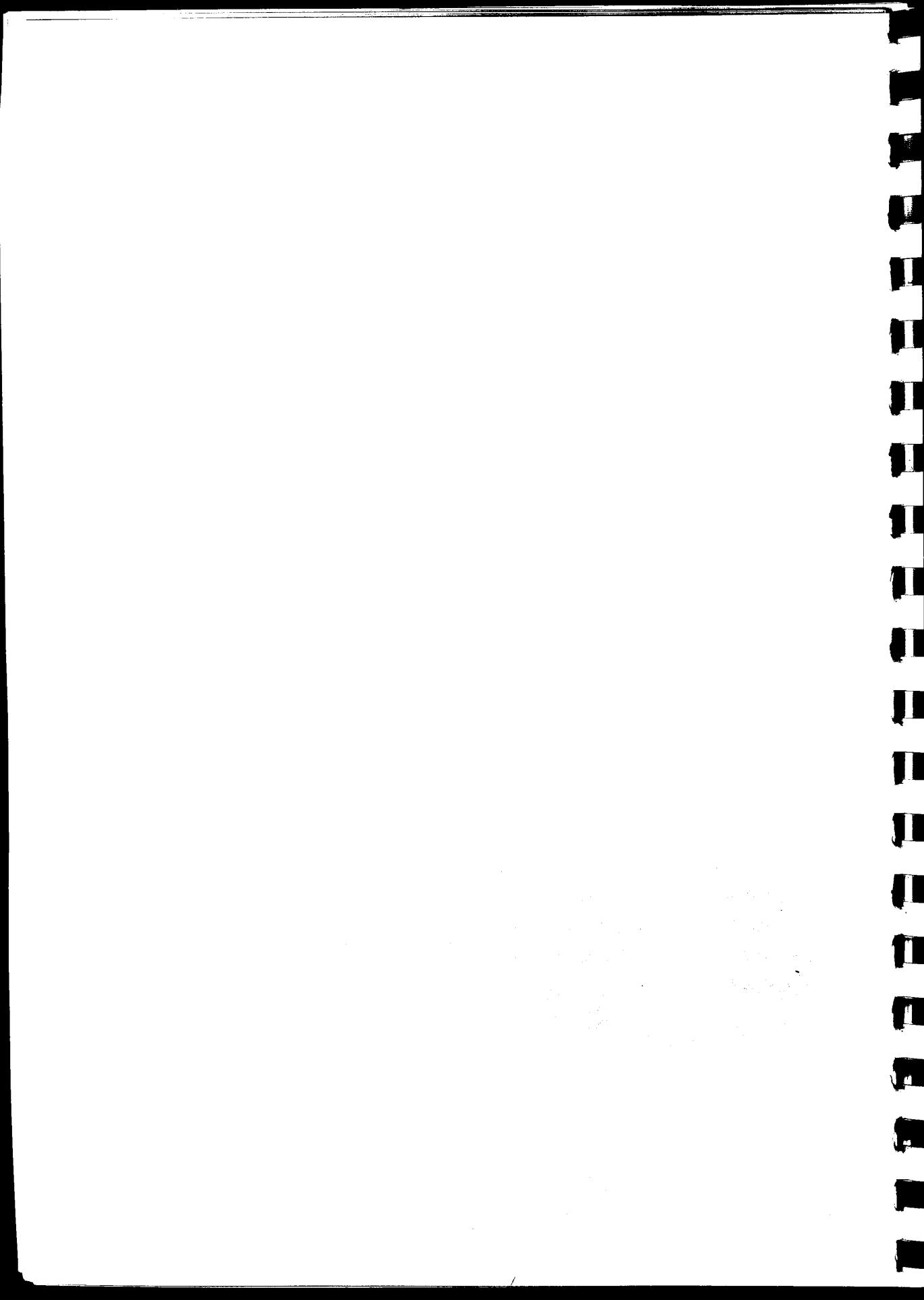
Section Four

Tape Item 29		
30	Saying you're not well	Item 4.1.1.
31	Making tentative statements	Item 4.1.2.
32	A consultation with the doctor	Item 4.1.3.
33	Sympathising with patients	Item 4.1.4.
34	Getting amounts right	Item 4.2.3.
35	<u>From and for</u>	Item 4.3.2.
36	Delivering a message for a patient	Item 4.3.5.
37	Vocabulary: bed linen	Item 4.4.1.
38	Instructions for making beds	Item 4.4.2.
39	Dialogue on bed making	Item 4.4.4.
40	<u>Better and worse</u>	Item 4.6.1.
	The sequencing of jobs	

Section Five

41	Talking about a birthday	Item 5.1.2.
42	Talking about Christmas	Item 5.1.3.
43	What to say on special occasions	Item 5.1.4.

44	Reasonable and unreasonable requests	Item 5.2.2.
45	Giving reasons for a request	Item 5.2.3.
46	Justifying yourself	Item 5.2.4.
47	Making a special request	Item 5.3.1.
48	Giving reasons for a special request	Item 5.3.2.
49	The present perfect with <u>yet</u>	Item 5.4.4.
50	Asking for someone on the telephone	Item 5.5.1.
51	Phoning in to report sick	Item 5.5.2.
52	Fetching someone to the telephone	Item 5.5.3.
53	Talking in your own language	Item 5.6.1.
54	Noise in the hospital	Item 5.6.2.
55	Coping with an official interview	Item 5.7.1.
56	Meeting the shop steward	Item 5.7.3.



CHECKLIST B

SLIDES IN SERIES A

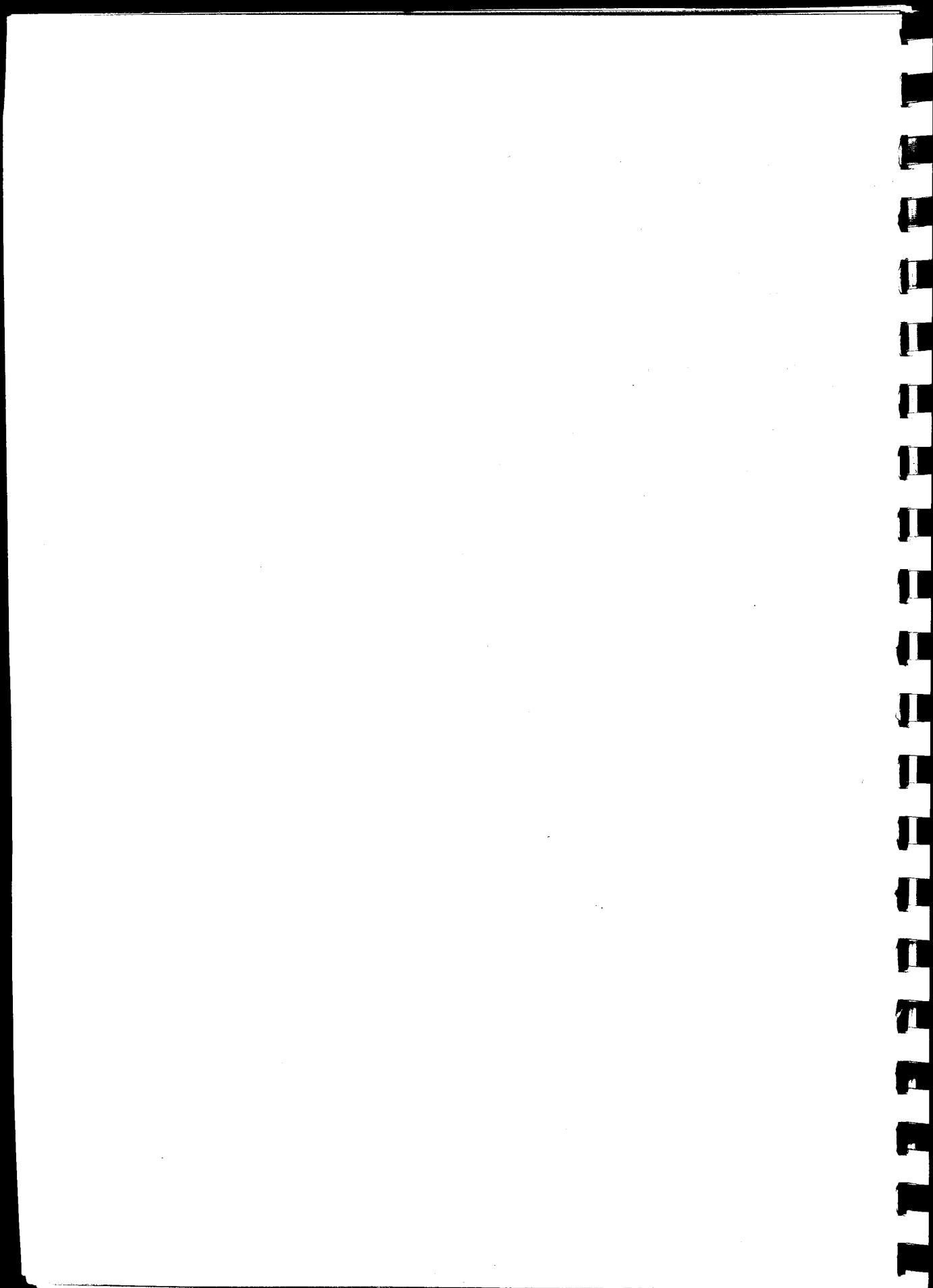
A1	Portrait of Joyce (the domestic)
A2	Joyce leaving home
A3	Joyce arriving home
A4	Joyce leaving work
A5	Joyce with her overall on
A6a	Mr Evans (in bed in a general hospital)
A6b	Mr Evans (in a chair in a psychiatric hospital)
A7	Mr Evans waking up
A8	Joyce talking to Mr Evans
A9	Breakfast
A10	Coffee
A11	Lunch
A12	Tea
A13	Supper
A14	Joyce offering tea
A15	Joyce responding to Mr Evans's request
A16	Joyce in the canteen
A17	A new domestic being interviewed officially
A18	Joyce admiring the objects on a patient's locker
A19	Joyce offering tea to Mr Evans
A20	Joyce warning Mr Evans about the wet floor
A21	Joyce cheering Mr Evans up
A22	Joyce giving food to Mr Evans
A23	Mr Evans giving Joyce a message
A24	Joyce giving a message to the nurse
A26	Joyce being ticked off by Mrs Cooper (the supervisor)
A27	Joyce talking to Mrs Cooper in the office
A28	Joyce talking to a nurse

Author's acknowledgements

This course is a development of the work pioneered by Tom Jupp and the Pathway Industrial Unit on teaching English to immigrants. The basic conception of language teaching done in work time is his, and this course rests heavily on his experience and ideas, as embodied in Industrial English by T C Jupp and S Hodlin (Heinemann 1975). Tom Jupp has also helped and guided every stage of the course and has given most valuable advice and criticism.

The tape and slide materials are the work of R L Goddard of the Pathway Centre, whose expertise and high standards have contributed greatly to the course. The manuscript has incorporated many useful suggestions made by those who have taught the course in the preliminary stages, including especially Jacek Opienski, and Alix Henley. My very special thanks to Evelyn Davies, Principal of the Pathway Centre, who has created the necessary environment and excellent work conditions that have provided the opportunity for this work to be carried out.

E M Laird



English for Domestic staff

SECTION ONE

{
8
4
P

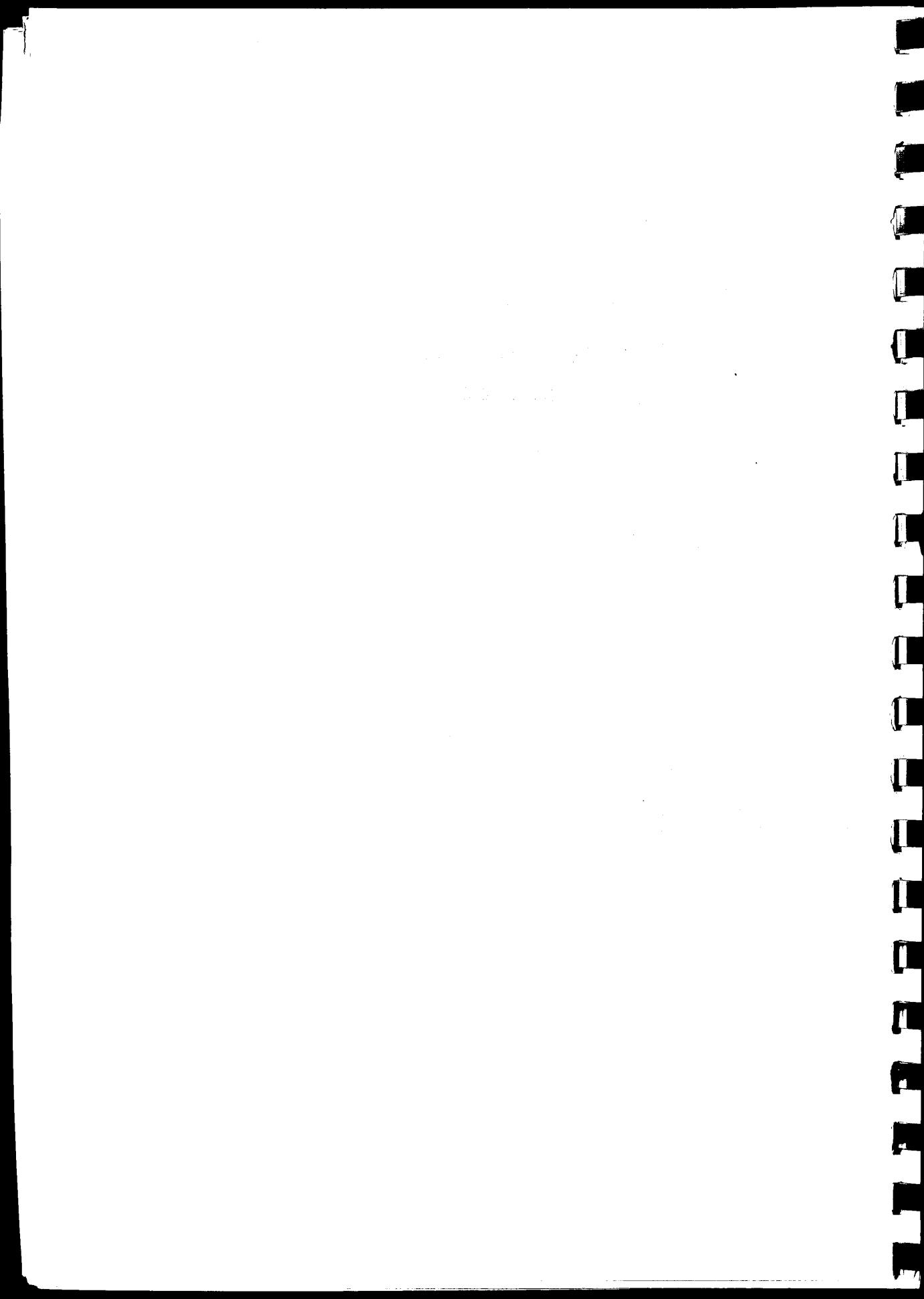
English for Domestic staff

SECTION ONE

An English language training course

for

overseas domestic staff



CONTENTS

	page
<u>Part One: Numbers</u>	3
1.1.1 Numbers 1 – 10	4
1.1.2 Larger Numbers	5
1.1.3 One, two, three etc more	6
<u>Part Two: Letters</u>	7
1.2.1 The Alphabet	8
1.2.2 Spelling your name	9
1.2.3 Special Uses of the Alphabet in the Hospital	10
<u>Part Three: Simple sequences of instructions</u>	12
1.3.1 Important verbs used in instruction	13
1.3.2 A sequence of instructions	15
<u>Part Four: Greetings</u>	17
1.4.1 Common greetings for meeting and parting	18
1.4.2 Talking about the weather	19
1.4.3 How are you? Fine, thanks	20
1.4.4 How to tell someone your name	21
1.4.5 Asking the patients how they are	22
<u>Part Five: Where things are in the ward</u>	24
1.5.1 Names of areas of the ward	25
1.5.2 Items of furniture used on the ward	26
1.5.3 Where things are in the ward	27
1.5.4 Simple instructions in the ward	28

	page
<u>Part Six: Personal pronouns and possessives</u>	30
1.6.1 Subject pronouns: I, you, he, she, it	31
1.6.2 We and they	32
1.6.3 Possessive determiners: my, your, his, her, x's	32
1.6.4 Possessive determiners: your, our, their	33
1.6.5 Object pronouns: me, you, him, her, it, them, us	34
 <u>Part Seven: Talking about yourself</u>	 36
1.7.1 Questions and answers about yourself	37
1.7.2 Talking about the family	38

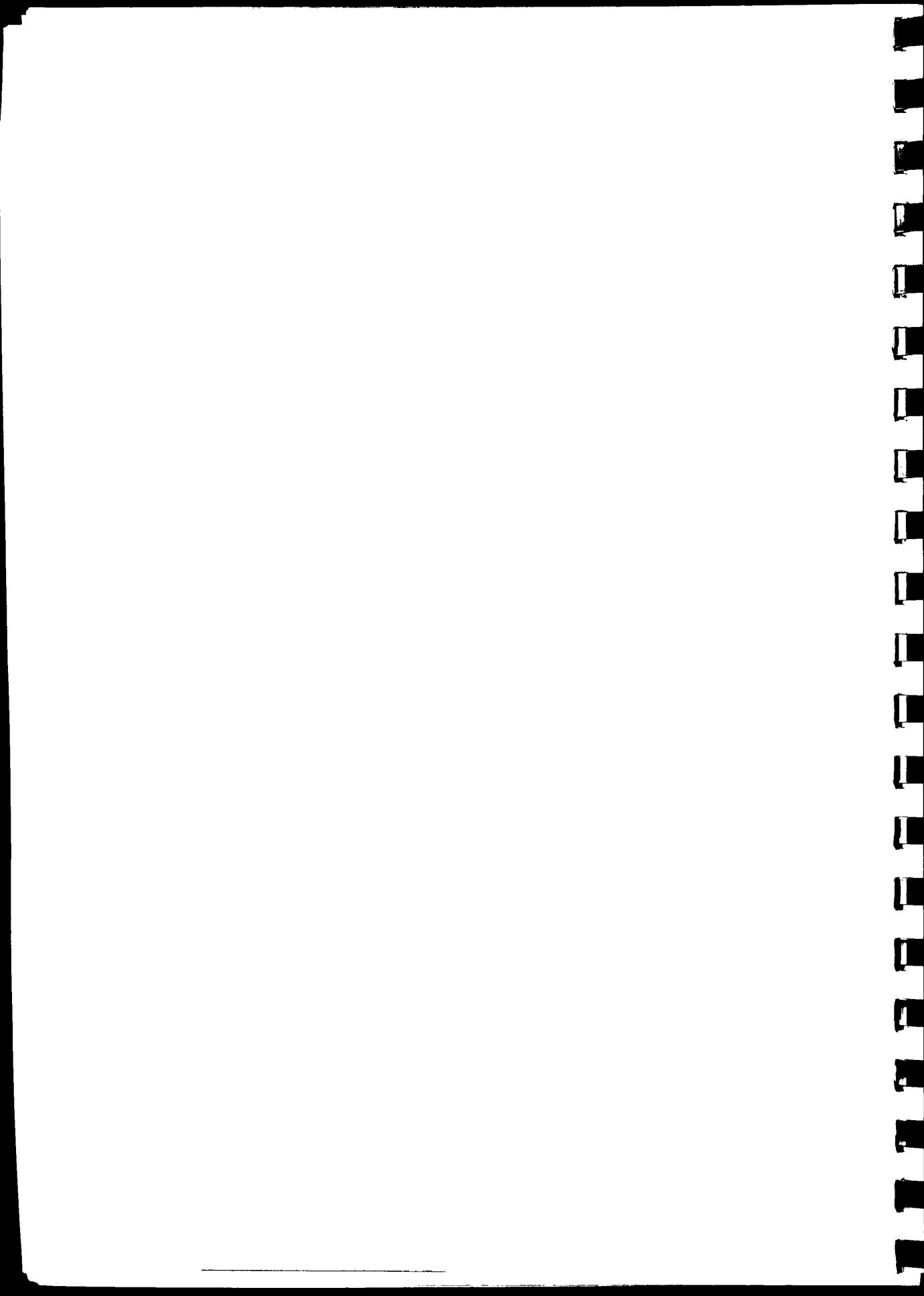
SECTION ONE

PART ONE

Numbers

The aim of this part is to develop initial confidence in the language learning process and to relax the class as well as to teach or revise numerals.

These small items are not meant to be taught consecutively in a block, but should be put into a number of different lessons with items from other parts of Section One.



1.1.1 NUMBERS 1 - 10

Context: These numbers will usually be known (though not always). In some cases, students may not be able to read numbers. Where this is the case, there may be considerable anxiety about illiteracy, and it would be best to teach numbers by counting small objects, rather than writing numbers down. Later in the course, written numbers should be taught, but to introduce them at the very start may sap the confidence that this early, easy work is aiming to build up. The main aim of this work is to give the students confidence, to get them to speak on their own in front of the class, and to relax the class.

Vocabulary: Numbers 1 - 10

Equipment Small items such as beans or matches

Cards with numbers written on them if the students are familiar with them

Make sure the numbers 1 - 10 are known. Count out small objects to teach the numbers if they are not known. Establish good habits from the first by making sure that the students listen to each number several times before trying to repeat them. Practise round the class using numbers written on cards or groups of small objects. Make sure the students are producing the sounds reasonably accurately.

Game: Number recognition

Introducing games early on in the course will help the students to get accustomed quickly to the course methods, and should reduce their self-consciousness.

Give each student a card with a number (1 - 10) on it, or a number of small items, eg matchsticks. Ask one student to hold up her card or her matchsticks and another to say the number.

Game: Number calling

Each student has a number. One student calls out a number (not her own) and the student whose number she has called responds by calling another number, and so on.

Game: Number passing

Lay numbers out on the table face up. Say: "Give me one, Give me five, Give me six" etc. Students race to pass you the right number. This can either be done with numbers written on cards or with groups of objects.

1.1.2 LARGER NUMBERS

Context: Accuracy in recognising numbers is often very important on a ward where patients beds are numbered, different numbers of meals are ordered and sent up from the kitchen, and different numbers of trays have to be laid for meals.

Vocabulary 11 - 20, 30, 40 - 100

Pronunciation The distinction between -teen and -ty
eg thirteen / thirty

Make sure the numbers 11 - 20 are known. Practise as before using flashcards or numbers written on a blackboard, or where students cannot read numbers, by counting out small objects. Use the games in 1.1.1 for practice. Then go on to teach 30, 40, 50 etc up to 100.

Games: teen/ty Make sure that -teen numbers are well established before you introduce -ty numbers.

1. Hand round to the class cards which each have one of the following numbers written on them: 13, 30, 14, 40, 15, 50, 16, 60, 17, 70, 18, 80, 19, 90. Call out the numbers and ask the students to hold out their card when their number is called.

2. Give each student a card with a teen or ty number on it. Ask a student to call out a number. If the right person answers, she calls out a number herself. If the wrong person answers she does not get a turn.
3. Students compete in pairs. Take two students to the blackboard together, and call out teen/ty numbers. The students point to the numbers called out. The student who gets the most correct wins.

1.1.3 ONE, TWO, THREE ETC MORE

Context: Where numbers of patients are constantly changing on the ward, numbers of meals etc are always being adjusted. Domestics often have to respond to hasty requests from nursing staff for eg Two more trays! One more pudding! etc.

Present addition with "more".

Hold up three small objects, eg cards, matches, pencils, keys and say

Here are three pencils

Hold up two more and say

Here are two more pencils. Look. Five pencils.

Practise with other objects.

eg Give me two matches, please

Give me two more matches.

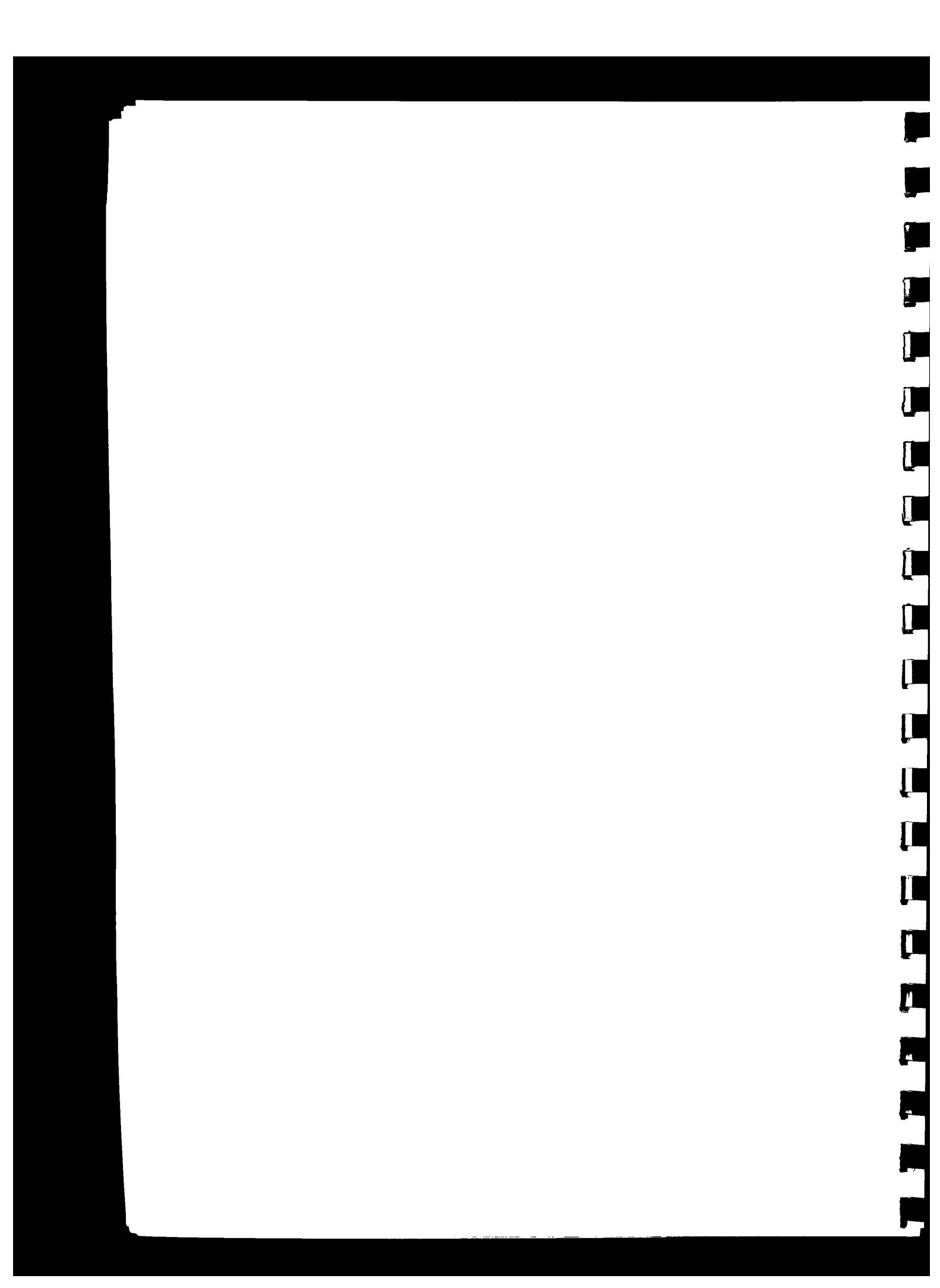
Hand out a number of pencils or other small objects to the class. Get pairs of students to practise together in front of the class. This will be a useful introduction to pairwork and group work which will be very important later on.

When more has been thoroughly grasped, you can introduce less.

eg Here are three pencils.

One more - four pencils.

Two less - two pencils. etc.



SECTION ONE

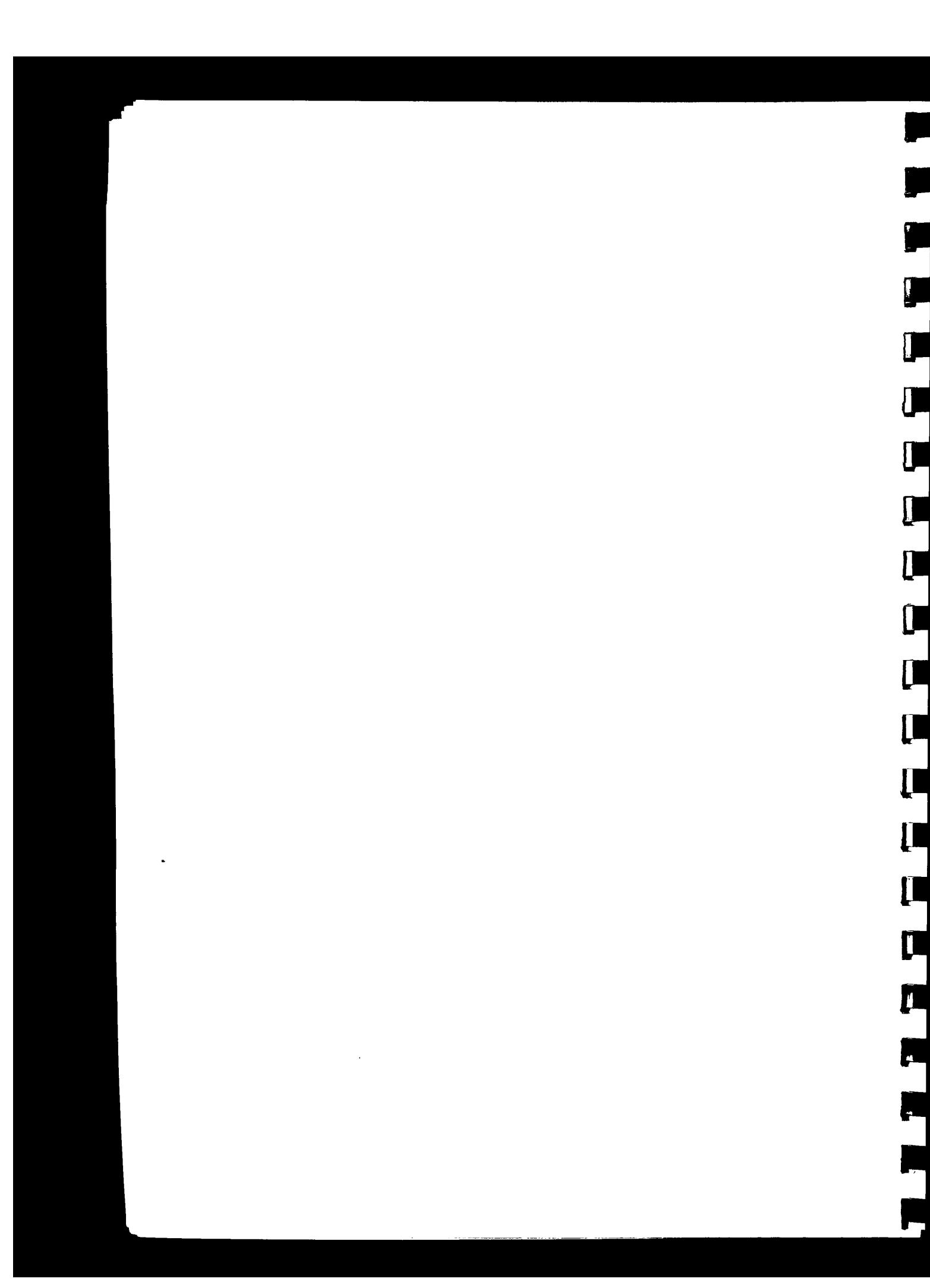
PART TWO

Letters

Domestic workers in British hospitals come from a wide number of different backgrounds and may have had very varying standards of education. Some may be literate in another script eg Arabic, Hindi, Greek etc, but unable to read and write in English. People in this category will probably be happy to tackle the English alphabet. Others (especially from Southern Europe) may be unable to read and write at all, and may be very anxious about this deficiency. Where this is the case, this Part may seem to be threatening, and should be left until much later in the course, or indeed, omitted altogether.

The literacy aims of this course are, in any case, very limited. Where students have obvious difficulties in this area, limit your aims to teaching them to recognise and spell their own name.

As with Part One, these items should not be taught consecutively but should occur with other items in a number of lessons.



1.2.1 THE ALPHABET

Context: The literacy level of your students will define your aims here. If they are complete beginners you may be able to aim only at upper case letters. With others who are already partly literate you may be able to teach recognition of both upper and lower case. Where students are illiterate in their own language, they may experience considerable anxiety at being faced with learning letters. If this is the case, leave the alphabet till much later in the course, when confidence has already been established. In some cases you may be able to aim only at teaching students to recognise and spell their own names.

Language function: Recognition is the aim here, not accurate reproduction, so do not spend time in getting the students to write letters down, unless they can deal with the material very easily.

Equipment: Sets of 26 cards with upper case letters written on them, and, where lower case letters are to be taught, sets of 26 cards of lower case letters.

Write on the blackboard or show on cards the upper case letters. Where students are quite illiterate, no more than four or five can be presented in one lesson.

Game: Passing letters

Put cards with letters on them face up on the table and call out "Give me A ; T, S, E" etc. The students look for the card, and the first to find it and hand it to the teacher calls the next letter, etc.

Game: Letter recognition and letter calling

Exactly the same as the game in 1.1.1 but using letters instead of numbers.

1.2.2 SPELLING YOUR NAME

Context: Foreign workers in Britain constantly need to deal with administrative matters such as work permits etc. It is of great advantage to them if they can spell their names clearly, especially when their names are hard for English people to grasp at a first hearing.

Language function: The student responds positively when someone does not understand her name.

Equipment: Sets of letter cards

Make sure that each student can spell her own name and practise with any that are unsure.

Now present and practise the following dialogue:

A: What's your name?
B: Rodriguez, Pedro Rodriguez.
A: How do you spell it?
B: R-O-D-R-I-G-U-E-Z
A: Thank you.

Practice first with three or four students, then divide the class into groups. (Please refer to the section on group work in the Introduction.)

Group work will be unfamiliar to the students (and may be unfamiliar to you!). Introduce it gradually to the class, making sure that the students understand clearly what to do at each step.

Suggestions for introducing group work: Organise a small group (three or four students) in front of the class, and get them to practise the dialogue with each other.

Divide the rest of the class into small groups and make sure each group understands that they must practise with each other in the same way as the first group.

At first, do not practise in groups for more than three or four minutes. Later, groups can work for longer periods, though never for more than ten minutes at a time. It can be a good idea to spread the good students equally among the groups, though individual friendships of course may in fact determine group membership.

When supervisors or visitors attend and observe classes, attach them to different groups.

When the groups have practised the dialogue, give each group sets of letter cards, so that student A can pick out the letters as student B spells his name.

1.2.3 SPECIAL USES OF THE ALPHABET IN THE HOSPITAL

Context: In some hospitals, domestics need to use the alphabet or some limited reading for different purposes.

eg A ward name (eg Nightingale) or code number (eg F/6) may be put on the clockcard of a domestic on relief who is then expected to go to that ward.

It may be important to read OFF/ON on a vacuum cleaner, oven, fridge, or other kitchen equipment.

Some domestics are required to sort linen in the linen cupboard under labels eg Pillowcase, Draw sheet, Counterpane, etc.

Language function: Recognition of a few necessary words or codes.

Equipment: Flashcards with words clearly written on them.

During your investigation (See Introduction) find out what if any the literacy needs of the domestics are in your hospital.

Write the necessary words or codes down on cards. Teach the students to recognise and say the words written on the cards.

It is important not to go on for too long at one time with this work as it becomes boring. Practise the words often for very short periods.

Tape Item 1: (to be prepared specially)

Record a few of the words you need to teach on tape. Lay the cards out on the table and get students to point to the card as they hear it read on the tape. This is the first time the tape recorder is used, so it is essential that they learn at this stage to listen carefully and attentively. Do not therefore repeat the words yourself after they have been played on the tape recorder, but insist that the students rely absolutely on listening properly to the tape.

Follow-up activity: As you do your weekly hospital round, point out to the students the words you have taught them where they actually occur, eg in the linen cupboard, on machinery, on signs just outside the ward etc.

SECTION ONE

PART THREE

Simple sequences of instructions

The work in this part is the first real attempt to come to grips with the work situation, and is often greeted with interest by supervision. Imperative forms of the verbs are used, as being the least complex, and the seeming severity that this introduces into the items is diminished by a natural use of please and thank you. The students are required to respond in a practical and non-verbal way to the language. This has the effect of reducing demands on them, and building up confidence. It also seems to generate a great deal of pleasure, as comprehension is manifested in a practical way.

Equipment: Pens and paper

Cleaning equipment borrowed from the domestics department.

Teach the first set of nouns using the procedure for teaching new vocabulary suggested above.

Present the instruction verbs in the imperative form with the first set of nouns, using please and thank you to a natural extent.

eg Pick your pen up

Put your pen down.

When the instructions can be carried out unhesitatingly by the class, play Tape item 2.

Tape Item 2 (available)

Pick your pen up

Hold your pen

Put your pen down

Pick your paper up

Pass your paper

Get your paper back

Put your paper down

Touch the table

Touch the floor

Touch your chair

As the students become thoroughly familiar with this material, they can repeat the instructions as they carry them out.

Now introduce the second set of nouns, using objects borrowed from the domestics department.

Practise these with the same instruction verbs.

If the students are confident enough, you can divide the class into groups and the students can take turns in instructing their own group using the instruction verbs with the two sets of nouns. If this is the first time that group work is introduced, please refer to the Suggestions for introducing group work in 1.2.2. (See notes on group work in the introduction.)

1.3.2 A SEQUENCE OF INSTRUCTIONS

Language function: Understanding and responding to a sequence of instructions.

Structure: As in item 1.3.1.

The pronouns "them" and "it", and the prepositions "with" and "to" occur for the first time. Do not stop to teach them at this point.

Vocabulary: Nouns: cloth, spoon, fork, teacher, neighbour.

Verbs: fetch, sit down, leave, wipe, wrap, unwrap, stop.

Equipment: A fork, spoon and cloth for each member of the class.

Present the new nouns first, then the verbs. Make quite sure these are fully understood before you play the tape item. As the tape item is rather long, it may need to be broken up and presented in parts before the full version is played. Each student will need a fork, spoon and cloth.

Tape Item 3 (available)

Get a cloth from the table.

Get a spoon and fork from your teacher.

Sit down.

Put the spoon down.

Leave the spoon.

Wipe the fork with the cloth.

Wrap the fork in the cloth.

Pass it to your neighbour.

Unwrap the fork.

Put it down

Pick the spoon up.

Leave the fork.

Wipe the spoon.

Stop.

Put the spoon down.

Pick the fork up.

Pass the fork to your neighbour.

Pick the spoon up.

Wrap the spoon and the fork in the cloth.

Put them down.

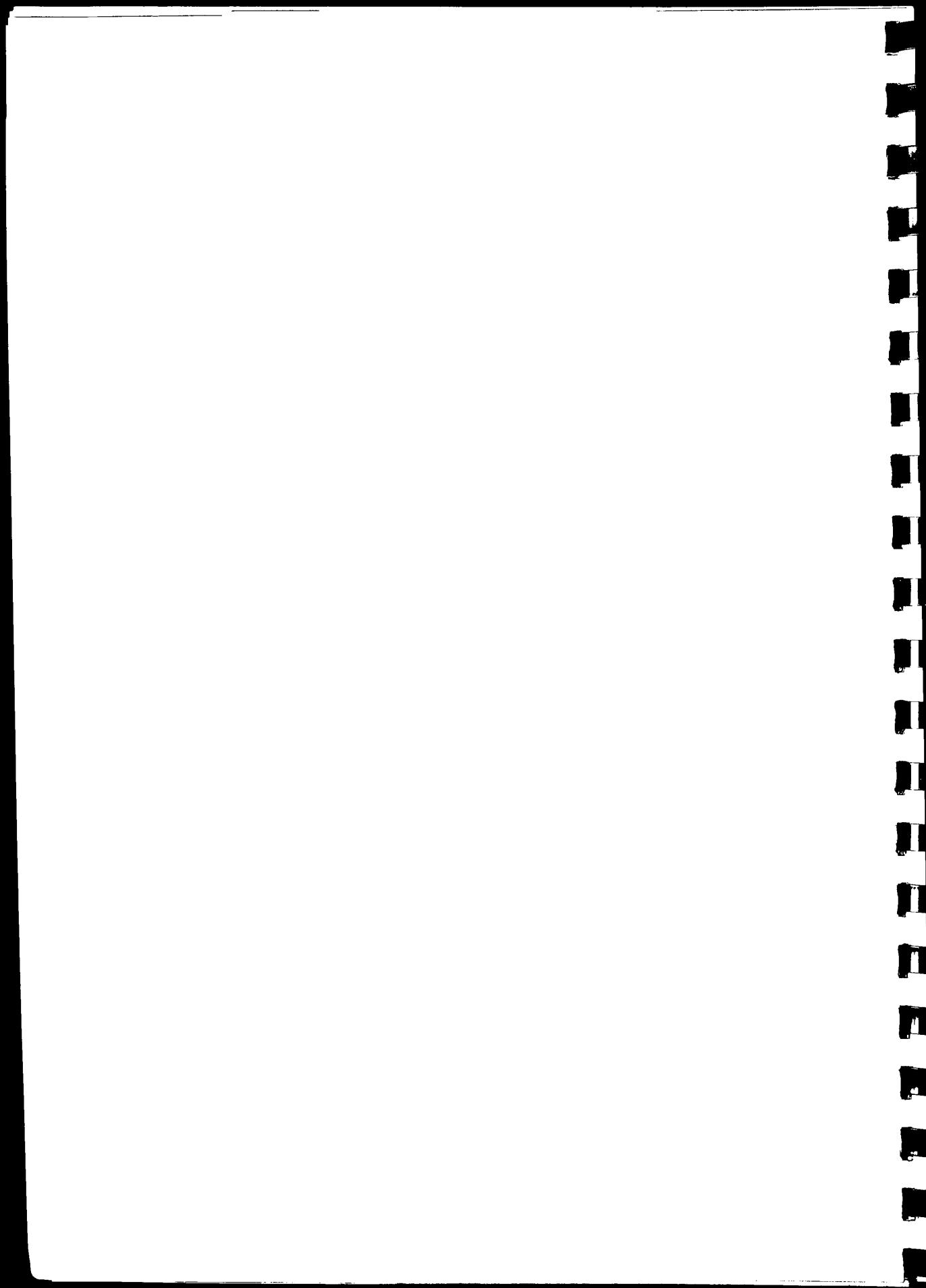
SECTION ONE

PART FOUR

Greetings

This Part introduces the use of language in social situations. Much of the material may be familiar, but students will need encouragement to use greetings in their daily life in the hospital.

The items should be spaced out through a long teaching period. Some may need to be left until work on Section Two has started.



1.4.1 COMMON GREETINGS FOR MEETING AND PARTING

Context: Use of greetings in the work place has a very great effect on working relations.

The students should be encouraged to use these with the people they work with every day.

Language Function: Initiating and responding to greetings.

Vocabulary: Many of these formulae (eg good morning, hello, etc) will be familiar, but they may be only half-known. Others may be quite unknown.

Present and practise the following pairs of items making quite sure that the students have heard them accurately and can reproduce them accurately. It is not usually necessary to present these items in a context, as they are already familiar.

You can substitute names of people (supervisors etc) known to the students for those given in this tape item.

Tape Item 4 (to be prepared specially or available)

Good morning, sister. Good morning, Mrs Samuels.

Good afternoon, sister. Good afternoon, Mrs Samuels.

Good morning, Mrs Adams. Good morning, Mr Brown.

Good afternoon, Mrs Adams. Good afternoon, Mr Brown.

Morning, Nurse. Morning, Mr Clark.

I'm Liz. I'm Tom.

Hello, Liz. Hello, Tom.

Pleased to meet you. Pleased to meet you.

Good bye. Good bye.

Bye. Bye.

Cheerio. Cheerio.

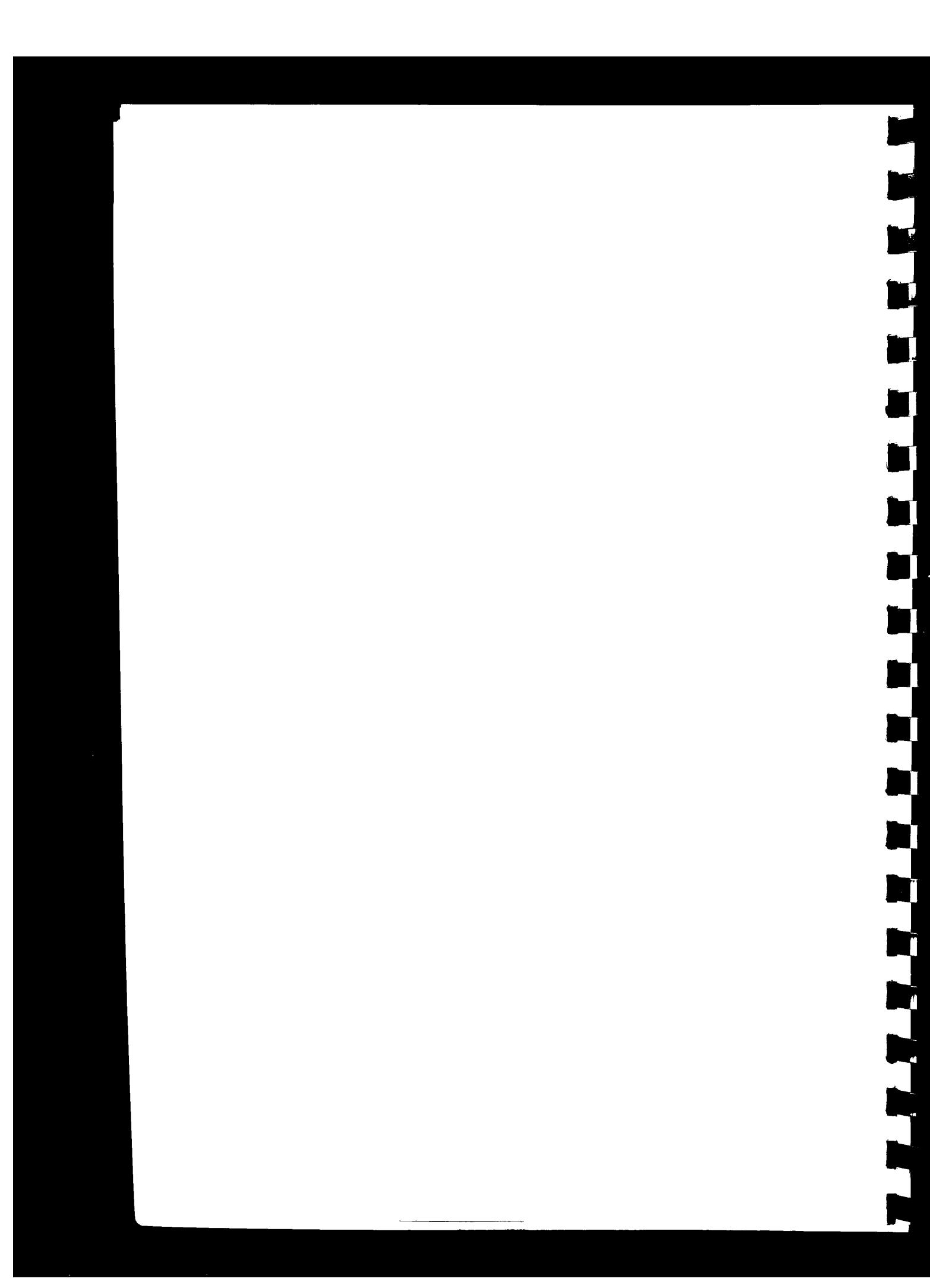
Ta ta. Ta ta.

See you tomorrow. Yes, see you.

See you, bye.

(Substitute if necessary any other formulae used locally in your part of the country.)

Listen and repeat.



1.3.1 IMPORTANT VERBS USED IN INSTRUCTION

Context: In this item, students are asked principally to respond to language with a physical activity, manipulating simple objects. This takes the burden of verbal response off them, and has the effect of building confidence, as well as giving a strong sense of achievement.

Language function: Understanding and responding to an instruction.

Structure: Imperative forms.

The determiners "your" and "the" are used, but do not stop to teach them at this point.

Note:- Note verbs with adverbial particles are used in the following pattern with nouns.

Pick your pen up.

Verb + noun + adverbial particle.

The alternative pattern:

Pick up your pen.

is not used here in order to avoid confusion.

Vocabulary: A set of instruction words: pick up, put down, hold, pass, get back, touch.

A first set of simple nouns: eg pen, paper etc.

A second set of nouns: items of cleaning equipment. Please and thank you.

There is a heavy emphasis on teaching vocabulary in this course, partly because the domestic's work comprises so many areas of the ward in which large numbers of different objects are used and need to be learned, eg crockery, cutlery, furniture, bed linen, cleaning equipment, food, etc.

The following procedure is suggested for teaching vocabulary:

Present only a few items (four or five) in one lesson.

Use the item itself in presentation wherever possible, eg food items, or a slide or flashcard where necessary, eg items of furniture such as sinks, beds etc.

Say the words clearly several times before the class repeats them.

Get the class to manipulate the items or the cards representing the items so that they become thoroughly familiar, before asking them for a verbal response. There are games and activities suggested for this throughout the course.

Ask the students to name the items themselves and finally, get them to incorporate them into sentences. eg Can I have the _____ please?

When these forms have been fully practised, divide the class into pairs, and get each pair to practise as many forms as they can remember.

Follow-up activity: It is very important to insist on using these forms at the beginning and end of each lesson.

1.4.2 TALKING ABOUT THE WEATHER

Context: The recurring and automatic use of weather chat in British conversation has the effect of extending a greeting to a further stage of friendliness. Students may have met this phenomenon, but may not understand the language involved, or the cultural function of the formulae.

Language function: Responding to and initiating efforts to establish friendliness.

Structure: Set formulae for talking about the weather. Tag questions are introduced, but teach them only as part of the formulae.

Vocabulary: lovely, terrible, cold, hot.

Equipment: Flash cards showing good and bad weather (to be prepared specially).

Present the meaning of lovely day, terrible day, cold and hot, using your own pictures or mime. Then present the following:

Lovely day, isn't it?

Terrible day, isn't it?

Cold, isn't it?

It's hot, isn't it?

Follow up activity: Practise these with the greetings at the beginning of each lesson until the students are thoroughly familiar with the way weather language is used.

1.4.3 HOW ARE YOU? FINE, THANKS

Context: How are you? is a formula question which normally expects a formula response, such as Fine, thanks (or any local variant), except in special cases (see 1.4.5). It is important to get the students to realise that the question should be asked by both people in a greeting situation.

Language function: Responding politely to a greeting question by repeating it.

Vocabulary: Thanks introduced. Probably half known.

Present the question and answer formulae.

How are you?

Fine thanks. How are you?

Make quite sure the students understand that they must ask the question back. Practise in pairs or groups, and when it is fully mastered, play the following tape item.

Tape Item 5 (available)

A Good morning. How are you?

B Fine thanks. How are you?

A Fine thanks.

B Lovely day, isn't it?

A Yes, lovely.

B Well, goodbye.

A Yes, cheerio.

B Bye!

Listen.

Listen and repeat.

Follow-up activity: Practise How are you? at the beginning of every lesson, always insisting that the students ask the question back.

1.4.4 HOW TO TELL SOMEONE YOUR NAME

Context: Students may panic if they are not understood immediately and may repeat their name again hurriedly and unclearly or may relapse into silence. This item aims to teach them to repeat themselves slowly and clearly, and also to ask someone else to repeat their name if they do not understand at once.

Language function: Clarifying a misunderstanding. The student takes the part both of initiating and responding.

Structure: Question: What's your name?

Pronunciation: It is important to get over the idea of mispronunciation to the class, and that other people may have difficulty in pronouncing the students' names.

Equipment: Glove puppet or pictures.

Present the following dialogue with your own name, acting out both sides yourself and using a glove puppet or referring to a picture of another person to make it clear that you are engaged in a dialogue. When the dialogue has been understood, play the following tape item (for listening comprehension only).

Tape Item 6: (available)

What's your name?

Elizabeth Perkins

Sorry?

Elizabeth Perkins

I beg your pardon?

E-liz-a-beth Per-kins

Oh! E-liz-a-beth

Yes, Eliz-a-beth Perkins

Oh, I see. Elizabeth Perkins.

When the students have grasped this dialogue, practise with members of the class, feigning difficulty with their names. Finally, practise in groups.

1.4.5 ASKING THE PATIENTS HOW THEY ARE

Context: In the case of patients in hospital, the question How are you? has a greater load of meaning than it has in every day life and many different answers can be expected. This item may not be suitable to teach in certain psychiatric or care hospitals.

Language function: The student initiates the question and understands the response.

Equipment: Flash card series 1 (available).

Present these or any other responses and sympathetic noises to the patients' statements about their health. Introduce them with mime, and practise with Flashcards series 1 (representing patients' facial expressions).

I feel terrible.	Oh dear.
Not very well.	Oh dear.
How are you?	OK really.
	Good
	Oh all right.
	Good.
	Fine, thanks.
	That's good.

Practise in pairs, the students taking it in turns to ask the questions or give the answers.

Prompt where necessary with flash cards. Present the following short dialogues

This is the first time that a taped dialogue is used where only one side of the dialogue is the target for the learner. The other side of these dialogues (in this case the patient's responses) is only intended for listening comprehension. The language of the listening side of the dialogues is not as tightly controlled as the learning side, because the foreign worker is always subject to native speakers addressing him in an unpredictable and real situation. The dialogue is three-phase as follows:

- 1 listening
- 2 repeating individually/chorally one part
- 3 filling in one part (blanked) against the other parts on the tape.

The second and third phases are sometimes hard to grasp. The teacher needs to show conviction from the outset and give very clear guidance in the responses or these dialogues become mere exercises in listening comprehension without the student being forced to make a realistic response.

Introduce the method slowly, insisting on accurate repetition and filling in.

Tape Item 7: (available)

Domestic: How are you today?

Patient: I feel terrible.

Domestic: Oh dear.

Domestic: How are you today?

Patient: Not very well

Domestic: Oh dear.

Domestic: How are you today?

Patient: OK, really.

Domestic: Good.

Domestic: How are you today?

Patient: Oh all right.

Domestic: Good.

Domestic: How are you today?

Patient: Fine thanks.

Domestic: That's good.

Listen.

Listen and repeat.

Now you ask the questions.

Follow-up activity: Encourage the students to ask the patients each morning how they are and check with nursing staff that they are doing it.

SECTION ONE

PART FIVE

Where things are in the ward

Relating the language learned to the actual hospital where the course is taking place engages the interest not only of the domestics, but also of the supervisory and nursing staff.

Next, introduce the following questions and answers. Use the unshortened form Where is before you shorten it to Where's.

Where's the kitchen?

Next to Sister's office.

Where's the sluice?

Next to the bathroom. etc.

If necessary, practise first with the students' names:

eg Where's Maria?

Maria is next to Juanita.

Where's Paramjit?

Paramjit is next to Arima. etc.

Follow-up activity: On your weekly hospital round check individually with each domestic that she knows the name of each area on the ward.

1.5.2 ITEMS OF FURNITURE USED ON THE WARD

Context: The ward.

Vocabulary: This is a purely vocabulary learning item. Some of the vocabulary has been taught (chair and table in 1.3.1) but the rest is new, though likely to be familiar.

Equipment: Flash cards Series 2 showing articles of furniture.

Present and practise the following words till they are thoroughly known, using the procedure outlined in 1.3.1.

chair, table, bed, locker, cupboard, door, window, fridge, bath, toilet, trolley.

Game: Put the flashcards showing different items of furniture face up on the table. Group the students round the table and call out the names of the different items. The students race to touch the right picture. If this is too hard to control, get one pair of students to compete at a time.

1.5.3 WHERE THINGS ARE IN THE WARD

Structure: Quick and confident questions and answers with where. Plural nouns with -s. Present tense forms of be, is/are.

Vocabulary: Prepositions in and on.

Equipment: Multiple sets of small objects. Appropriate slides from Series B.

Present the plural form of nouns with -s. Use small objects first to illustrate

eg fork, forks

 pencil, pencils

 spoon, spoons

 etc.

Now with slides from Series B, point out plural sets of furniture.

 beds

 lockers

 chairs.

Practise thoroughly, using slides, sets of objects, chairs in the room etc.

Using appropriate slides from Series B present the plural verb form are and the preposition in as follows:

Where are the beds?

In the ward.

Where are the chairs?

In the ward.

... und kann nicht mit dem Ergebnis der Praxis aneinanderreihen.

10.10.1981

Welt am Abend 86

TV am Sonntag

Quelle der Quellen

... und kann nicht mit dem Ergebnis der Praxis aneinanderreihen.

10.10.1981

Welt am Abend 86

Quelle der Quellen

Quelle der Quellen

... und kann nicht mit dem Ergebnis der Praxis aneinanderreihen.

10.10.1981

Welt am Abend 86

Quelle der Quellen

Quelle der Quellen

... und kann nicht mit dem Ergebnis der Praxis aneinanderreihen.

10.10.1981

Welt am Abend 86

Quelle der Quellen

Quelle der Quellen

... und kann nicht mit dem Ergebnis der Praxis aneinanderreihen.

10.10.1981

Welt am Abend 86

Quelle der Quellen

Quelle der Quellen

... und kann nicht mit dem Ergebnis der Praxis aneinanderreihen.

10.10.1981

Welt am Abend 86

Quelle der Quellen

Quelle der Quellen

SECTION ONE

PART SIX

Personal pronouns and possessives

This part seems to contain a lot of heavy, structural material. In fact, it may not be arduous to teach as some of the material is likely to be known already.

Teach these items separately, and spread the material over a period of time.

100-100000

100-100000

100-100000

100-100000

100-100000

100-100000

100-100000

100-100000

1.6.1 SUBJECT PRONOUNS: I, YOU, HE, SHE, IT

Structure: Subject pronouns and present tense forms of be. To establish the pattern accurately, it may be easier at first to use the unshortened forms:

I am

You are

He)

She) is

It)

and to shorten them later.

Vocabulary: Some subject pronouns. Revision of cleaning equipment from 1.3.1.

Equipment: Cleaning equipment as in 1.3.1. Furniture flashcards.

Present and practise:

I'm Janie Brown. (Known from 1.4.1)

You're Juana Perez.

He's Ali Hussein.

She's Maria da Silva.

Everyone should say this sequence accurately. As the students repeat each sentence, make sure they are referring correctly to the people mentioned in the sentence, or they may simply be repeating without properly understanding the meaning of the different pronouns.

Now introduce What's this?

It's a dustpan etc. using the articles of cleaning equipment.

When the students have fully grasped the question and answer, practise in groups, using cleaning equipment, other objects in the classroom already known and furniture cards for revision.

1.6.2 WE AND THEY

Vocabulary: We, they

near

Teach near.

Divide the class into three groups. Attach yourself to one of the groups, and describe each group using gestures to indicate your meaning as follows:

We are near the door.

You are near the window.

They are near the cupboard.

Break up the groups and indicate clearly the meaning of you, we and they.

eg Mrs Mendes and Mrs Husain are near the door.

They are near the door.

Mrs X and I.

We are near the door. etc.

Contradiction game

Point to a group and say something false.

eg You are near the window.

They contradict you.

eg No, we are near the door.

You are near the window.

1.6.3 POSSESSIVE DETERMINERS: MY, YOUR, HIS, HER, X'S

Concept: It is very important to use items that really do belong to a particular person.

This is used in this item. Do not give it special emphasis but use it naturally where necessary.

Equipment: Objects such as watches, pencils, bags, coats, etc belonging to the students.

First introduce items of your own,

eg This is my watch.

my bag.

my pen.

etc.

Then introduce:

This is your coat.

his pencil.

her bag.

Maria's bag.

Juan's pencil.

Game: Claiming your possessions

Students contribute small objects to the teacher who gives them back to the wrong person.

The class contradicts, stressing the possessive determiner.

eg Teacher This is your watch (offering it to a student)

Class No, it's her watch.

it's Maria's watch.

it's my watch.

If collecting personal possessions is too difficult, give out a number to each person and get them to claim their number.

1.6.4 POSSESSIVE DETERMINERS: YOUR, OUR, THEIR

Vocabulary: your, our, their

simple colours: red, yellow, blue, green.

Equipment: Sets of cards or discs, or crayons one set coloured red, one yellow and one blue.

Divide the class into three groups giving each group a colour and a set of cards, discs or crayons of that colour.

Present the possessives as follows:

Red is your colour.

Red is their colour.

Yellow is your colour.

Yellow is their colour.

Join yourself to a group and present

Blue is our colour.

Game: Claiming the cards

Mix the colour cards up in the middle of the table and give them to the wrong groups saying:

It's your card.

The groups have to contradict you as follows:

No, it's our card.

No, it's their card.

1.6.5 OBJECT PRONOUNS: ME, YOU, HIM, HER, IT, THEM, US

Concept/Vocabulary: These pronouns may cause confusion if presented too quickly after the earlier ones. If you feel that this will be the case, leave them until later. Revision of earlier instruction words from 1.3 and 1.5. Revision of objects.

Present the object pronouns in instructions as follows:

Pick a cloth up.

Pass it to me.

Give it to him.

Push it to her.

When these have been fully mastered, divide the class into three groups and instruct the groups.

Pass the spoons to us.

Give the forks to them. etc.

Teach the object pronoun you by getting the students to say:

This is for you.

when they pass something to someone.

300 MOTION

EV 174

EXTERIOR IN 900-2000

1.5.1 NAMES OF AREAS OF THE WARD

Context: Each hospital has its own type of ward, and names for the different areas vary greatly from hospital to hospital. However, the following names are commonly used for ward areas:

kitchen
bathroom
toilet
sluice
side-ward
sister's office
treatment room
linen cupboard/store
day room
etc.

Language Function: The students both ask and answer questions about the ward.

Structure: Questions with Where?

Concept/Vocabulary: The names of ward areas (revision). Preposition: next to

Equipment: Slides from series B

There are two sets of slides referred to throughout the course. Series A are available on hire with the tape. Series B are those to be taken in the actual hospital where the course is taking place (see Introduction).

The slides are used mainly to place items in clear contexts, relating the language learned in the classroom to the daily work of the domestic.

Use your own slides in Series B of different areas of the ward to introduce the names of the ward areas. This will usually be very quick because the students are likely to be familiar with them. Make sure the students pronounce the different names of ward areas clearly.

Where are the spoons?

In the kitchen.

Where are the tables?

In the day-room. etc.

and revise next to

Where are the lockers?

Next to the beds. etc.

Do not present on until in is fully practised. Present on first in the classroom.

Where are the spoons?

On the table.

Where are the pencils?

On the chair. etc.

And then present other such sequences with slides.

1.5.4 SIMPLE INSTRUCTIONS IN THE WARD

Language function: Responding to and giving instructions.

Structure: "Don't" introduced.

Vocabulary: All the verbs are new, and will need thorough teaching.

Present the following verbs:

move, lift, push, pull, open, close.

In order to avoid confusion in presenting pairs such as push/pull and open/close, present them separately. Teach move, lift, push and open first, and when these have been very thoroughly mastered, introduce pull and close, in a later lesson.

Give instructions using the nouns taught in 1.5.1 and these verbs, adding please where this is natural:

eg Move the table, please.

Lift the chair.

Open the door, please. etc.

Present don't and practise with the instructions. Make sure students carry out the instruction correctly:

eg Don't push the table, please.

Open the window, please.

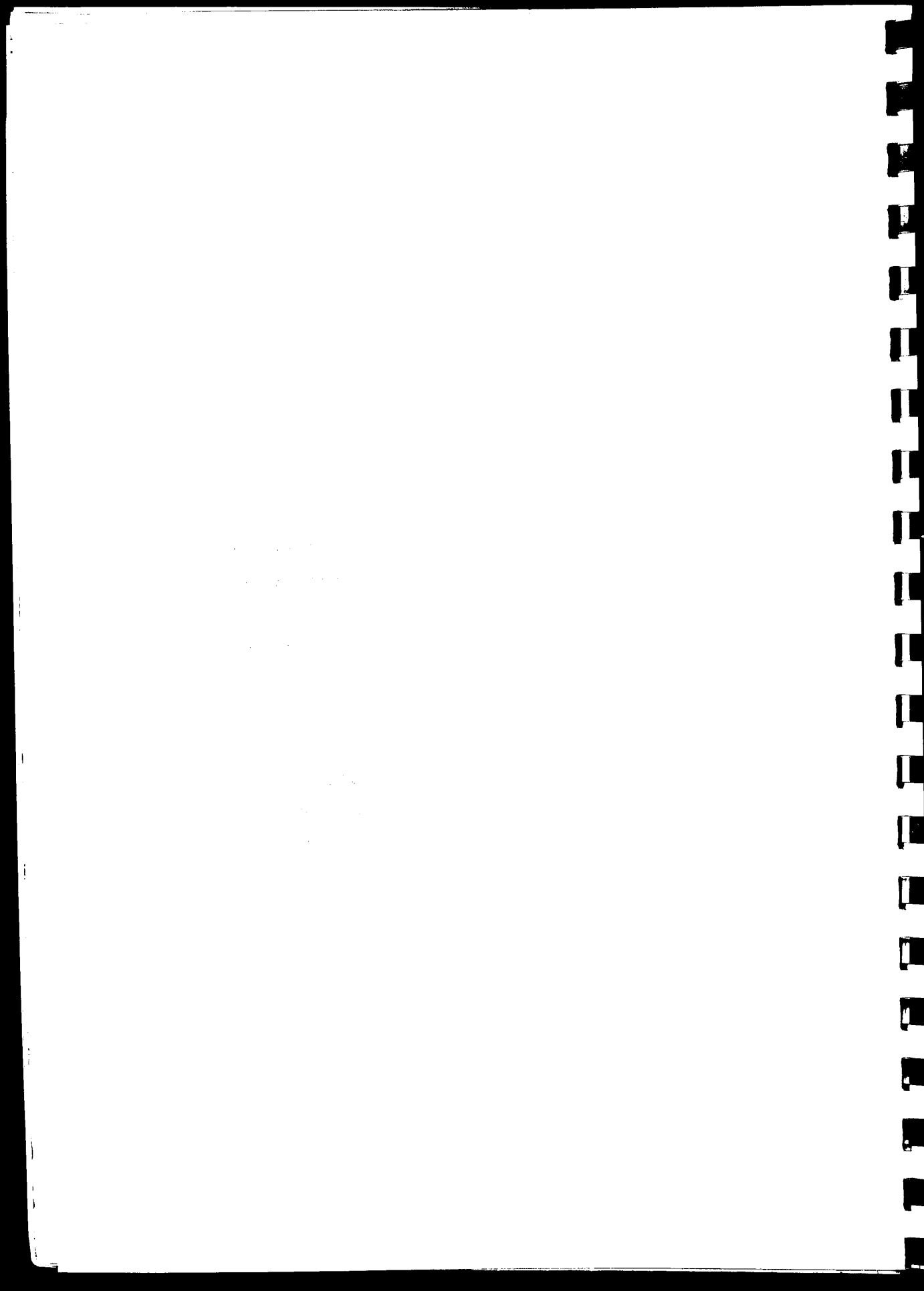
Don't move the chair, please. etc.

SECTION ONE

Part Seven

Talking about yourself

This part is primarily organised on functional criteria and offers inadequate structural practice on the forms introduced. As an introduction of the Present Simple Tense it is somewhat sketchy. This is because a heavy block of structural work precedes it (Section One Part Six) and a great deal of further practice is given in Section Two.



1.7.1 QUESTIONS AND ANSWERS ABOUT YOURSELF

Context: Social chat in the context of getting to know people. It is important for students to use these questions with confidence and accuracy so that they can initiate friendly conversation with people they meet.

Language function: Students initiate questions and give information about themselves.

Structure: Present simple statements and questions – (^{where/who}
^{wh?} + do/does)

Verb have

Vocabulary: work, live, young, old, married, children

Equipment: Slide A 1

Using slide A1 introduce the domestic Joyce, who will crop up in many dialogues later in the course, with the following sentences:

This is Joyce.

She is quite young.

She is married.

She has two children.

She lives in Hounslow. (Substitute the name of your own town)

She works in St John's Hospital.

Now apply this description to yourself:

I am quite young/old.

I am/am not married.

I have one/two/no children.

I live in Hounslow.

I work in Richmond. (Substitute the places where you live and work)

I work in Richmond,

Ask the students the following questions and elicit these or similar answers:

Are you married?

Yes, I am married.

Have you got any children?

Yes, I have three children.

Where do you live?

I live in Hounslow.

Where do you work?

I work in Southall.

Where do you come from?

This series of questions and answers is ideal for group work. Practise first with one group in front of the class. If supervisors are present, attach a supervisor to each group and get them to join in with the questions and answers. In this way, genuine conversations may sometimes be built up for the first time between supervisors and domestics.

1.7.2 TALKING ABOUT THE FAMILY

Context: Being able to talk about your own and other people's families is very important in normal social conversation. Domestics may also need to talk about family problems with the management, if a member of their family is ill, for example, or if family problems affect their work in any way.

Language function: Questions and answers as part of social conversation.

Structure: Practice with where.

Introduce who.

Vocabulary: Family members.

Equipment: Photographs of your family, and students' photographs if they wish to bring them.

Show the class photographs of your own family and present:

This is my husband/wife.

father.

mother.

son.

daughter.

brother.

sister.

Fill the pictures out with comments on where they work and live:

My father lives in.....

My brother works in.....

My son goes to school. etc.

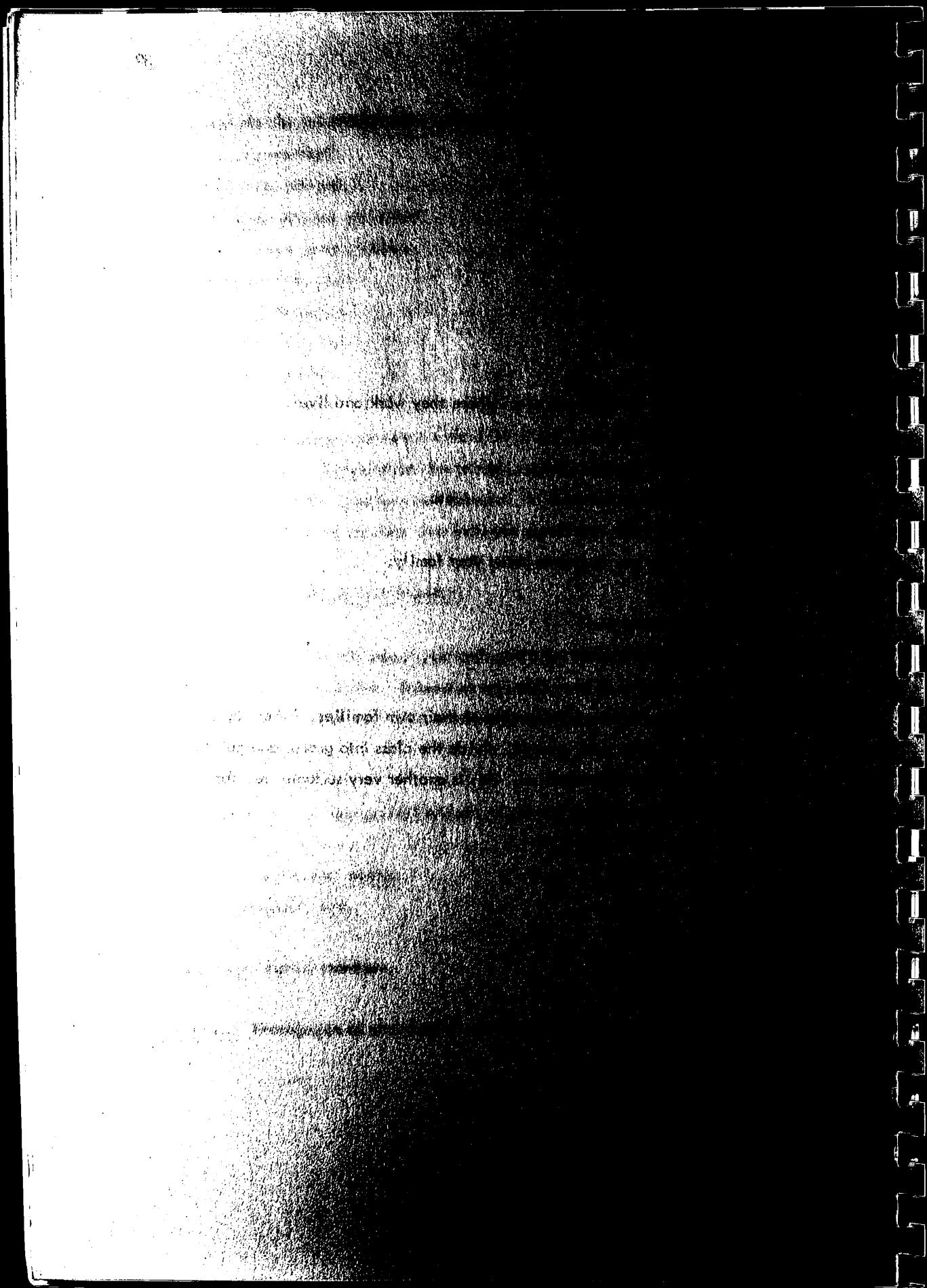
Get students to ask you questions about your family:

Who's this?

Where does he live?

Where does he work?

Encourage students to bring photographs of their own families. When the question and answer sequences have been grasped, divide the class into groups and get them to ask each other questions about their families. This is another very suitable item for supervisors to take part in.



English for Domestic staff

SECTION TWO



English for Domestic staff

SECTION TWO

An English language training course

for

overseas domestic staff

for Domestic Staff

SECTION TWO

Employer's obligations regarding working hours

not

changes domestic staff

CONTENTS

	page
<u>Part One: Days and Times</u>	3
2.1.1 Days of the Week	4
2.1.2 Telling the time	5
2.1.3 Questions with "when"	6
2.1.4 Parts of the day: morning, afternoon, etc.	7
2.1.5 Special jobs and days of the week	8
2.1.6 Before and after	8
 <u>Part Two: With the patients first thing in the morning</u>	 10
2.2.1 Introducing a patient - Mr Evans	11
2.2.2 Asking patients if they slept well	11
 <u>Part Three: Parts of the body</u>	 14
2.3.1 Parts of the body	15
2.3.2 Parts of the face	16
2.3.3 Asking about patients' special ailments	16
 <u>Part Four: Food and meals</u>	 18
2.4.1 Names of meals	19
2.4.2 Some basic food items	19
2.4.3 Names of dishes on the hospital menu	21
2.4.4 Serving food to the patients	21
2.4.5 Reporting the patients' wants	22
2.4.6 Game: Does Mrs X want sugar?	23

	page
<u>Part Five: Polite requests</u>	25
2.5.1 Making polite requests	26
2.5.2 Responding pleasantly to requests	26
2.5.3 Asking for things in the dining room	27
 <u>Part Six: Looking after crockery and cutlery</u>	 29
2.6.1 Who's got my cup?	30
2.6.2 Some important adjectives	31
2.6.3 Washing up	33
 <u>Part Seven: Using names correctly</u>	 34
2.7.1 Names and titles in the hospital	35
2.7.2 Using surnames and christian names	36
 <u>Part Eight: The ward</u>	 38
2.8.1 Some essential locatives	39
2.8.2 Giving directions in the ward	39
2.8.3 Suggested games for practice	40

SECTION TWO

PART ONE

Days and Times

Much of this material is likely to be at least partly familiar. Where this is the case, students may need extra help in accurately mastering the work. Insist on careful listening, and take time to practise reasonably accurate pronunciation.

As the material in these items is fairly detailed and complex it should be presented in small chunks over a number of lessons.

ONE HUNDRED

WHO IS A?

ଶରୀର କାନ୍ଦୁ ମୁଦ୍ରା

2.1.1 DAYS OF THE WEEK

Context: The British concept of the weekend as a time of leisure may be unfamiliar to people from a rural background where "days off" do not exist. Your students are likely to work at the weekend even now they are in England. Find out if this is the case. They may need to learn the significance of the weekend to the British, particularly with reference to their English work mates and the patients.

Language function: Responding to friendly questions about your weekend/day off.

Structure: The past tense is used in this item but don't stop to teach it at this point.

Concept/Vocabulary: Days of the week

Distinction between today/yesterday/tomorrow. This may be difficult for Indian students to grasp, as there is no distinction between yesterday and tomorrow in Hindi, Punjabi and Urdu.

The weekend

Equipment: Calendar

Teach the days of the week using a large calendar. Illiterate students may in fact be used to calendars and may be able to guess the days from their positions on the calendar once they have been learned. (If students are anxious about literacy, teach the days of the week orally only.) Point to different dates on the calendar and get the students to tell you which day it is:

Monday, Tuesday, Wednesday, Thursday, Friday, Saturday, Sunday.

Teach along with the days and dates:

The weekend. The day-off.

Did you have a nice weekend?

Did you have a nice day off?

Today is.....

Yesterday was.....

Tomorrow is.....

Follow-up activity: Ask the students often about their days off.

eg When is your day off this week?

Did you have a nice day-off?

2.1.2 TELLING THE TIME

Concept/Vocabulary: Revision of numbers.

Time expressions, o'clock, half past etc.

Adverb: after

Equipment: A set of teaching clock faces with moveable hands

The clock faces required for this part can be simply made. Cut rounds of card and draw in the clock faces. Cut out hands, and fix them to the clock faces with split pins.

The material in this item will of course need to be presented over a number of lessons unless it is already known.

In presenting each of the following expressions, be careful not to rely on automatic repetition. Make sure each stage is fully understood and that the language is meaningful.

A suggested procedure: Present the expression slowly, repeating it many times - eg.
It's one o'clock, it's four o'clock, it's six o'clock, etc.

Before you ask for any repetition or verbal response from the students, get them to respond non-verbally. Do this by calling out times and asking students to set the clock faces to the correct times. Alternatively, draw a clock face on the blackboard, and ask the students to draw in the hands.

After plenty of meaningful non-verbal practise, get them to practise verbally both chorally and individually.

If you have enough clock faces, practise in groups. One student sets the clock face, or draws in the hands on pre-drawn clocks, and another tells the time.

Teach each of the following expressions in the way suggested:

- a) Teach first:
It's five, six, seven o'clock etc.
- b) In practising a) present
What's the time?
- c) It's half past
- d) It's a quarter past
- e) It's five, ten, fifteen, twenty past/to etc.....
- f) If's after five to, it's nearly ten past etc.

There is no need to teach two, twelve, sixteen minutes past etc unless the class have found the item very easy.

Follow-up activity: Spot check questions in future lessons:

What's the time?

2.1.3 QUESTIONS WITH "WHEN"

Language Function: Responding to and initiating questions about the day's programme.

Structure: Present tense question form with when.

Equipment: Clock faces

Slides from series B of a domestic clocking on and off, the domestics' rest room in your hospital

Slides A2, A3 and A4.

Show B slide of a domestic clocking on, with the time clearly showing on the clock.

Present the question

When do you clock on?

And the answer

At x o'clock

Now show slides A2 (leaving home), A3 (arriving home), A4 (leaving work), and B slide of the domestics' rest room in your hospital.

Present:

When do you leave home?

When do you get home?

When do you have your coffee break?

When do you finish work?

Use any other appropriate slides to ask more questions.

Get the answers:

At six, seven, eight o'clock etc.

Make sure the students have listened carefully and have grasped the question properly.

Practise thoroughly, both chorally and individually. When they are able to make the questions properly, divide the class into groups. The students should practise asking each other questions and giving each other answers. Give out clock faces to the groups as prompts. If any domestic supervisors or other visitors are present at the class, attach one supervisor to each group. The students can ask them questions.

2.1.4 PARTS OF THE DAY: MORNING, AFTERNOON, ETC

Concept/Vocabulary: Parts of the day, morning, afternoon etc.

Present morning, afternoon, evening, night as additions to the answers given in item 2.1.3.

Examples: six o'clock in the morning.

nine o'clock at night.

If the students are quite unfamiliar with these words, show the extent of each period of the day on the clock face.

2.1.5 SPECIAL JOBS AND DAYS OF THE WEEK

Context: In some hospitals a special job is done on each day of the week. If this is not the case in your hospital, omit this item.

Concept/Vocabulary: Names for certain items on the ward.

Revision of days of the week.

Equipment: Slides or specially prepared flashcards from which the different tasks can be indicated.

Present the names for the special weekly jobs either from appropriate slides or cards. Some vocabulary will need to be presented or revised. The students will be very familiar with the jobs but may not know what they are called. Present each job with "do".

Examples: On Monday I do the windows.

On Tuesday I do the high-dusting.

On Wednesday I do the bed wheels. etc.

2.1.6 BEFORE AND AFTER

Context: The sequencing of tasks is often a difficulty with foreign staff and can cause annoyance to supervision. This item is in preparation for later work on instruction sequences.

Equipment: Clock faces

Flashcard series of faces

Slides A4 and A5.

Present "before" and "after" using a clock face:

Seven o'clock is before eight o'clock.

Twelve o'clock is after eleven o'clock. etc.

Practise before and after using flashcards from Series A of patients' faces.

eg This is the patient before breakfast.
This is the patient after breakfast.

Show Slide A4 of Joyce with her coat on.

Joyce gets to work at eight o'clock.

Here is Joyce before eight o'clock.

Show slide A5 of Joyce with her overall on.

Here is Joyce after eight o'clock.

and any other practice you can think of.

SECTION TWO

PART TWO

With the patients first thing in the morning

Throughout the course, the students will be encouraged to chat to patients, even though this may only be achieved on a limited level. Take the opportunity offered in this short Part to revise 1.7 and 1.4.

CONTINUE

CONTINUE

NUMBER OF CHILDREN

NUMBER OF CHILDREN

NUMBER OF CHILDREN

NUMBER OF CHILDREN

2.2.1 INTRODUCING A PATIENT - MR EVANS

Context: The inability to speak to patients often leads to lack of interest in them by the domestic and this in turn greatly reduces the interest of the job. It is important for the domestic to see patients as individuals each with their own background.

Language function: Revision of description in item 1.8.

Structure: Present simple tense.

Equipment: Slides A6 and A1.

Use slide A6a in a general hospital and slide A6b in a psychiatric hospital.

Present Mr Evans with the following description:

This is Mr Evans.

He's quite old.

He's got a bad leg. (omit in a psychiatric hospital)

He's married.

He's got two children.

Then revise Joyce using Slide A1 and the description given in 1.7.

2.2.2 ASKING PATIENTS IF THEY SLEPT WELL

Context: Domestic to patient.

Language function: Students initiate questions to indicate good will and interest to the patient.

Structure: The past tense question given here should be practised and learned thoroughly but as an isolated language formula at this stage.

Concept/Vocabulary: asleep/awake

Equipment: Slide A7

Flash card series of faces

Introduce asleep with mime. Establish this firmly first before you introduce awake in order to avoid confusion.

Show Slide A7 of a patient waking up and introduce the question:

Did you sleep well?

Practise until this is firmly established. Use flashcard series of faces to indicate possible patient answers to the question and teach the domestic's response to the patient's answers as given in the following tape item.

Now present and practise the tape item. Make sure the students really listen to the tape. Don't fall into the trap of repeating the tape yourself to make it easier!

Tape Item 8

Joyce: Did you sleep well Mr Evans?

Mr Evans: No Joyce, very badly.

Joyce: Oh dear.

Joyce: Did you sleep well?

Different voice: No, not really.

Joyce: Oh dear.

Joyce: Did you sleep well?

Different voice: Not bad.

Joyce: Oh.

Joyce: Did you sleep well?

Different voice: Quite well.

Joyce: Good.

Joyce: Did you sleep well?

Different voice: Yes, very well, thank you.

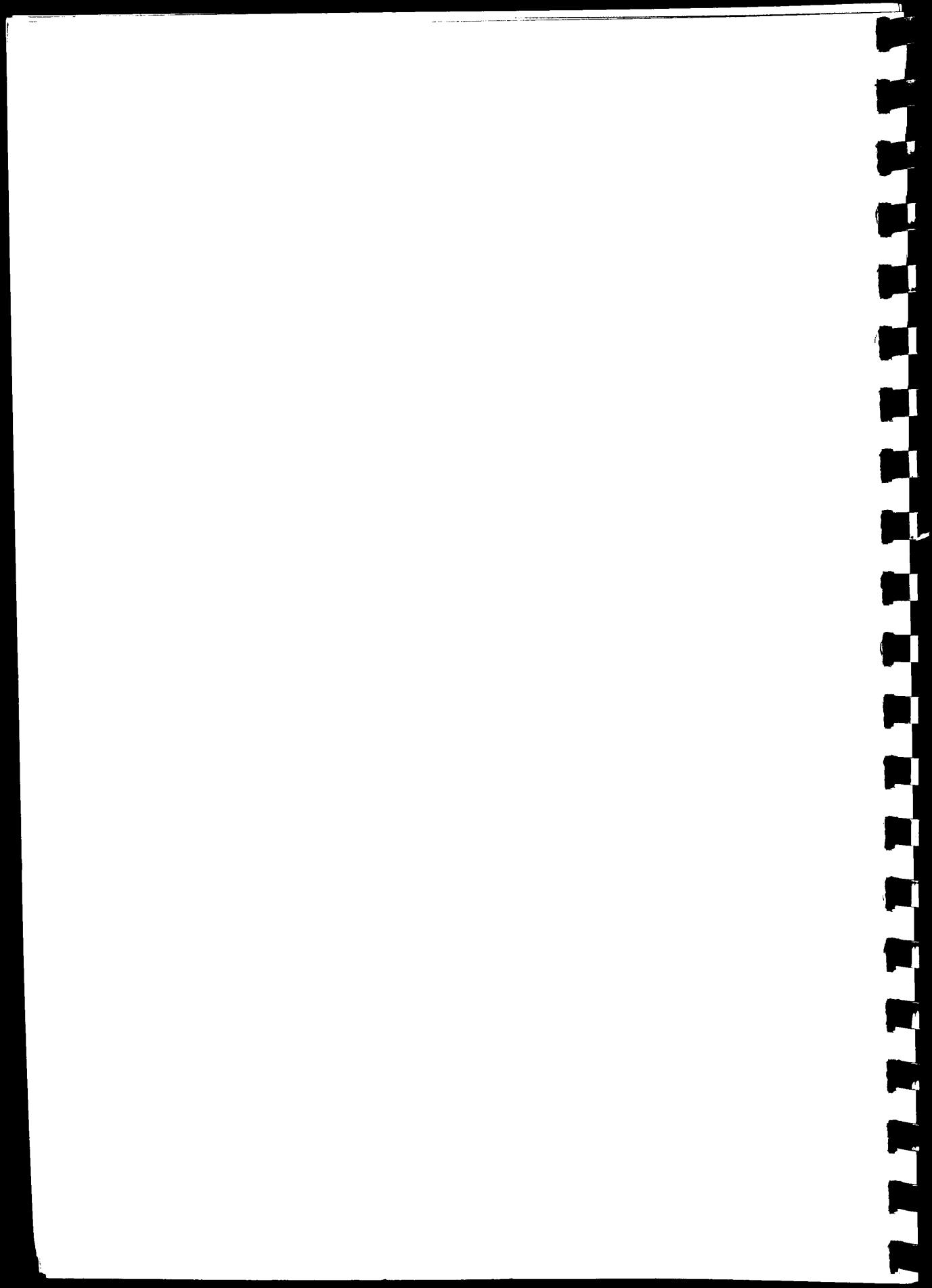
Joyce: Oh good.

Listen

Listen and repeat Joyce.

The students need not learn the patient's response, but they must learn to give some verbal feedback to the patient's response.

Follow-up activity: Encourage students to ask their patients how they slept. Check that they are doing this either by asking the students themselves, or asking patients or nurses when on your weekly round.



SECTION TWO

PART THREE

Parts of the body

The work in this part is in preparation for later items on health, particularly in Section 4 Part 1. The students are encouraged to learn parts of the body early on for the following reasons:

- (a) the work is conceptually simple and increases confidence
- (b) many students are anxious to learn the vocabulary involved in talking to the doctor
- (c) knowing the names for parts of the body enables them to chat to patients about their complaints.

CONTINUATION

33847 70

卷之三

Digitized by srujanika@gmail.com

1940-1941 ASSOCIATE EDITOR: ROBERT L. HARRIS

www.ijerph.org www.ijerph.org www.ijerph.org

What is the best anti-toxin?

2.3.1 PARTS OF THE BODY

Context: If your students come from a background where customs, clothes and attitudes are very different, eg from the Indian sub continent, it is as well to be tactful in indicating parts of the body or in asking students to indicate them, particularly if your class contains both men and women. There is likely to be much interest and enjoyment in learning this item, however, partly because it is conceptually obvious and undemanding, and partly because your students are likely to be concerned about consulting doctors in English.

Vocabulary: Parts of the body

Using the method recommended for teaching vocabulary in 1.3.1 teach the following words. Use the tape item to encourage accurate listening, once you have presented the words.

Tape Item 9

head	back
neck	chest
shoulder	tummy
arm	leg
hand	knee
fingers	foot

In special hospitals you might go on to teach other parts of the body in more detail, so that domestics can take a greater interest in the patients.

For example:	Dental hospital	teeth
		tongue
		lips
		throat
	Geriatric hospital	hip
		knee
		ankle
		etc

2.3.2 PARTS OF THE FACE

Structure: Revision of plurals.

Vocabulary: Parts of the face.

Present and practise:

nose	eyes	hair
mouth	ears	
chin	teeth	
	cheeks	
	lips	

Game: Consequences

Give each student a piece of paper and a pencil. Ask everyone to draw a circle for a face. They then pass the paper to their neighbour. Now ask everyone to draw two eyes. The papers are passed again, and everyone draws two ears. Continue until the faces are completed.

2.3.3 ASKING ABOUT PATIENTS' SPECIAL AILMENTS

Context: The domestic to the patients.

Language Function: The domestic shows interest in the patients by initiating questions expressing concern.

Structure: Present tense questions with how and what.

Equipment: Slide A8

Use slide A8 of Joyce talking to Mr Evans and present the following questions:

How is your leg?
What's the matter?
What's the matter with your leg?

Use a pad of cotton wool or lint, stained with red ink or paint if you want to be dramatic, to practise this. Apply the pad to different parts of your body to show that you are hurt, and get the students to ask:

How is your arm?
How is your back?
What's the matter with your leg? etc.

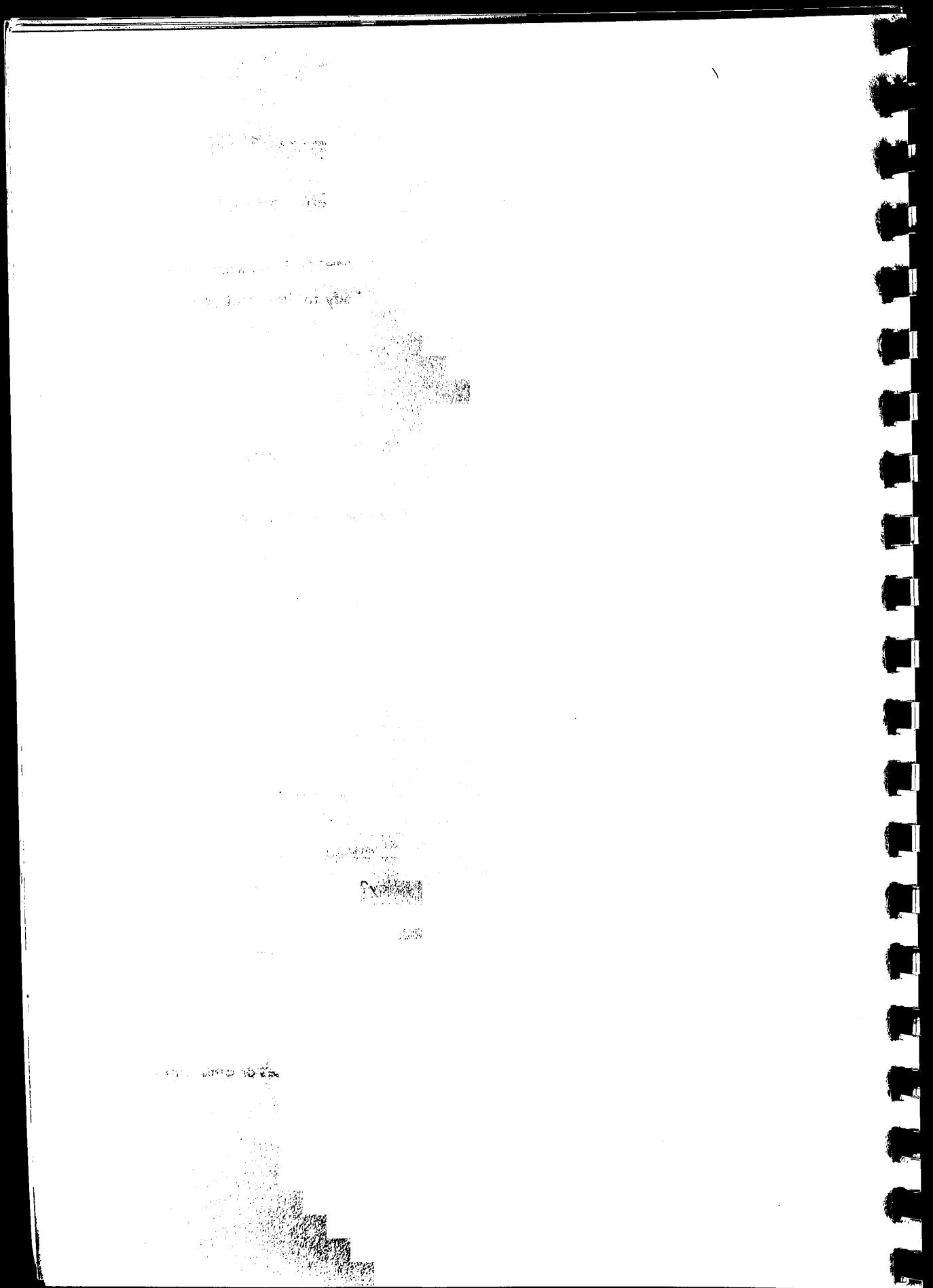
Do not at this stage teach them carefully the answers you give, but teach them passive understanding of such answers as:

I've broken it.
I fell over. etc.

Tape Item 10

Joyce: Hello Mr Evans.
Mr Evans: Oh, hello Joyce.
Joyce: Oh! What's the matter with your face?
Mr Evans: I fell down this morning.
Joyce: Oh dear. How's your back today?
Mr Evans: Not so bad, thanks Joyce.
Listen.
Listen and repeat Joyce.
Listen and take Joyce's part.

Follow up activity: Make a practice of asking after any cuts, bruises or other infirmities the students might have throughout the rest of the course.



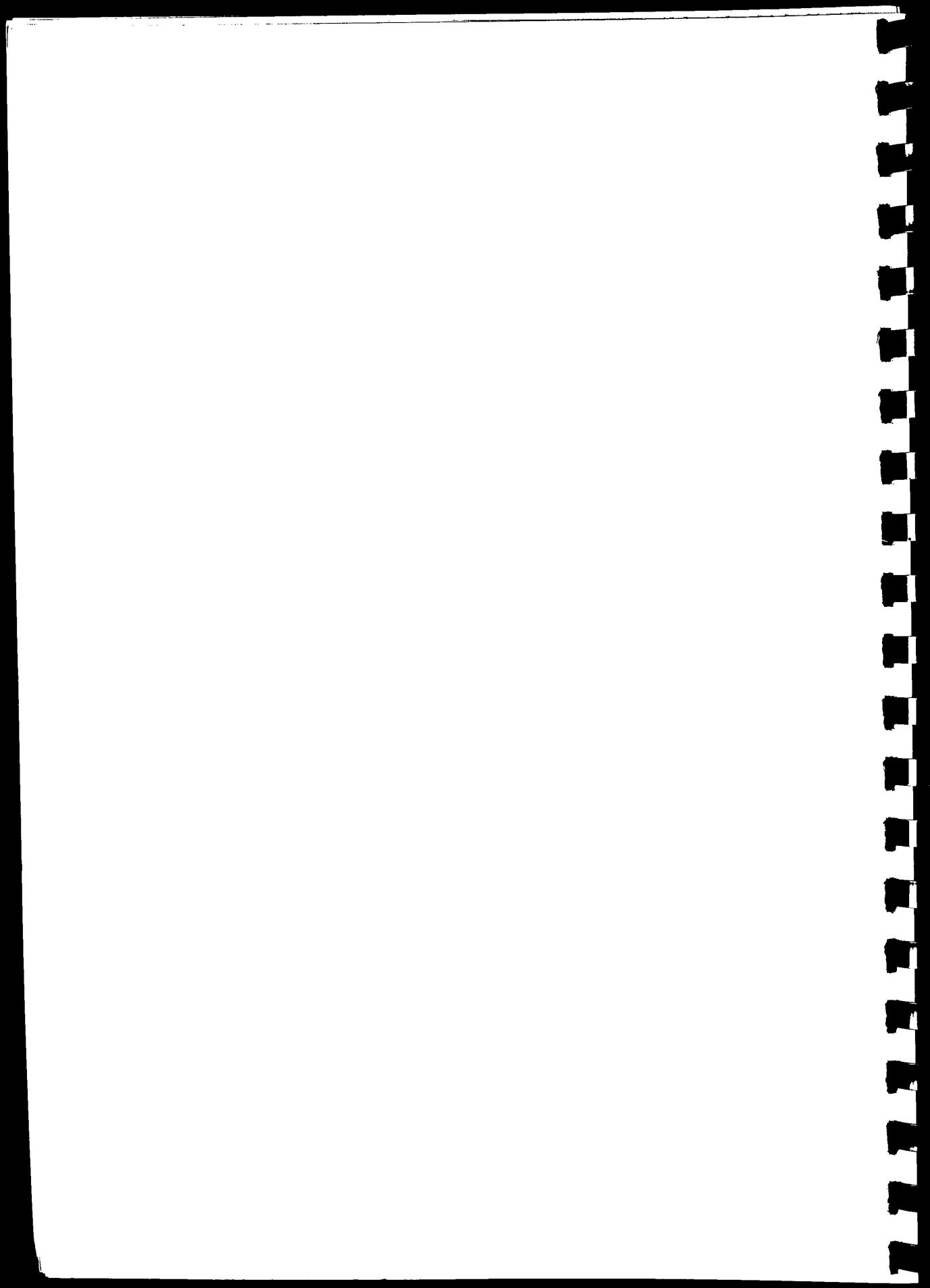
SECTION TWO

PART FOUR

Food and meals

In many hospitals, domestics help with serving out food and hot drinks to the patients, though the responsibility for this usually rests with nursing or housekeeping staff. The domestic's job is often to enquire about particular wants and needs (eg sugar in tea etc) and to report them back to the person actually serving out. The language functions in this section are thus rather complex and will need careful presentation.

Food items and dishes are of course very varied and the vocabulary in this section seems heavy. Much of the vocabulary in 2.4.2, however, is likely to be known, while the names of dishes in 2.4.3 should be taught gradually over several weeks.



2.4.1 NAMES OF MEALS

Cultural factor: Names of meals may differ from hospital to hospital and in different parts of the country. Check on the usage in your hospital.

Vocabulary: Names of meals and revision of times.

Equipment: Slides A9 - 13 of patients meals.

Use slides A9 - 13 to introduce the patients' meals. Check with the hospital the times of the different meals and present the following:

Breakfast is at seven o'clock.

Coffee is at half past ten.

Lunch (dinner) is at half past twelve.

Tea is at four o'clock.

Supper (dinner) is at six o'clock.

Use the clock face to indicate the different times. The students tell you the names of the meals. This item should be quick and easy as the students are likely to be familiar with meal names.

2.4.2 SOME BASIC FOOD ITEMS

Context: In some hospitals domestics handle food a good deal, in other hospitals hardly at all. Use your judgment and your knowledge of the domestics day to day work to decide which of the vocabulary items to teach.

Structure: Have you got? With short form answers.

Vocabulary: Names of food items.

Equipment: Packets of tea, coffee, sugar etc. A carton for each group.

Teach food items by bringing them into the class. Many of these items will be known, so the learning load is likely to be fairly light. Use the procedure for teaching vocabulary suggested in 1.3.1.

milk	meat	fruit	pepper
bread	potatoes	cake	sweets
eggs	vegetables	biscuits	chocolate
tea	fish	sugar	
coffee	butter	salt	

Give the items out to the students and present the question:

Have you got the milk/tea/cake/etc?

and the answers

Yes I have.

No I haven't.

When this has been thoroughly grasped, divide the class into at least three groups for Happy Families.

Game: Happy Families

Give each group a carton containing some food items. The first group to start asks the second group

Have you got the eggs (milk/tea etc)?

If the second group has the right item they hand it over, and the first group has another turn. If they do not have the item, it is their turn to ask for something. Once one new item has been found by a group, the ones already discovered can be asked for by the winning group. This game can be played by individuals in small groups with food items or any other sets of objects or cards used on the course.

2.4.3 NAMES OF DISHES ON THE HOSPITAL MENU

Context: Where domestics have to serve out food to patients, this item is an important one. Where they have no contact with food on the ward it will not be necessary to go into so much detail.

Vocabulary: Names of dishes.

Equipment: Hospital menus

Cards (cut from magazines etc) showing common dishes.

Slides A9-13 of patients meals.

Present the names of dishes with reference to the week's menu:

Yesterday it was roast lamb.

On Thursday it was stew.

On Wednesday it was fried eggs.

etc.

Where possible, illustrate with pictures cut from magazines etc. The names of some dishes may be familiar and will need revision and clarification rather than new presentation. Since dishes are likely to be very varied, teach this item over several weeks, introducing new dishes at intervals.

2.4.4 SERVING FOOD TO THE PATIENTS

Context: It is important to teach this item even when domestics are not directly involved in serving food to patients, because they are likely to need to offer tea, coffee or simply water to patients or other members of staff. The structural material of this item is very important.

Language Function: Offering. The student initiates. Polite acceptance and refusal of an offer.

Structure: Present tense question with do, cf. Item 2.1.3

Concept/Vocabulary: Yes please. No thank you. It is very important to establish the use of "please" and "thank you" as mechanical in accepting or refusing an offer.

Equipment: Food items as in item 2.4.2. Slide A14.

Offer food to the students using the question

Do you want sugar?

Do you want milk?

Do you want a biscuit?

etc.

Present replies:

Yes please.

No thank you.

Practise intensively until the replies have become mechanical. Now present the idea of the domestic offering food/tea etc to the patients with slide A14. Practise the questions:

Do you want tea?

Do you want milk?

etc.

Game:

Divide the class into teams. Give each a few food items or cards with food items drawn on them. One team of students offers the other food, handing it over when the response is "Yes please", and keeping it when the response is "No thank you".

2.4.5 REPORTING THE PATIENTS' WANTS

Context: Domestics involved in handing out food may often be required to report on what the patients want, or to understand when someone else tells them what the patients want.

Language Function: Reporting what someone wants to another person.

Structure: Revision of doesn't .

Equipment: Food items.

Offer food using "Do you want?" as in Item 2.4.4. When an item of food is accepted or refused, report it to the rest of the class:

Mr x wants milk.

Mrs y doesn't want sugar.

Divide the class into groups of three. One member of the group asks another:

Do you want cake?

The other answers "Yes please" or "No thank you".

The first one then reports to the third member:

He wants cake.

He doesn't want cake.

The group then changes round and acts the other parts. Practise this first with the whole class.

2.4.6 GAME: DOES MRS X WANT SUGAR?

Structure: Revision of present simple third person question forms.

The students are seated in a horseshoe with the teacher at one end. The teacher holds a packet of sugar. The teacher asks the student next to him:

Does Mrs ... want sugar?

(Insert the name of the student at the other end of the horseshoe).

The message is passed round the horseshoe to the student at the other end who says "Yes please", or "No thank you". The message "Mrs ... wants sugar" or "Mrs ... doesn't want sugar" is then passed back round the horseshoe to the teacher.

Tape Item 11

Nurse: Joyce, does Mr Evans want sugar in his tea?

Joyce: I don't know, nurse I'll ask him.

(Footsteps)

Mr Evans, do you want sugar in your tea?

Mr Evans: Yes please, Joyce, and milk.

Joyce: O K.

(Footsteps)

Oh, nurse, Mr Evans wants sugar and milk in his tea.

Nurse: All right Joyce.

(Sound of stirring)

Listen.

Listen and repeat Joyce.

Listen and take Joyce's part.

SECTION TWO

PART FIVE

Polite requests

It is important for the students to understand that the following expressions are considered rude by many English people:

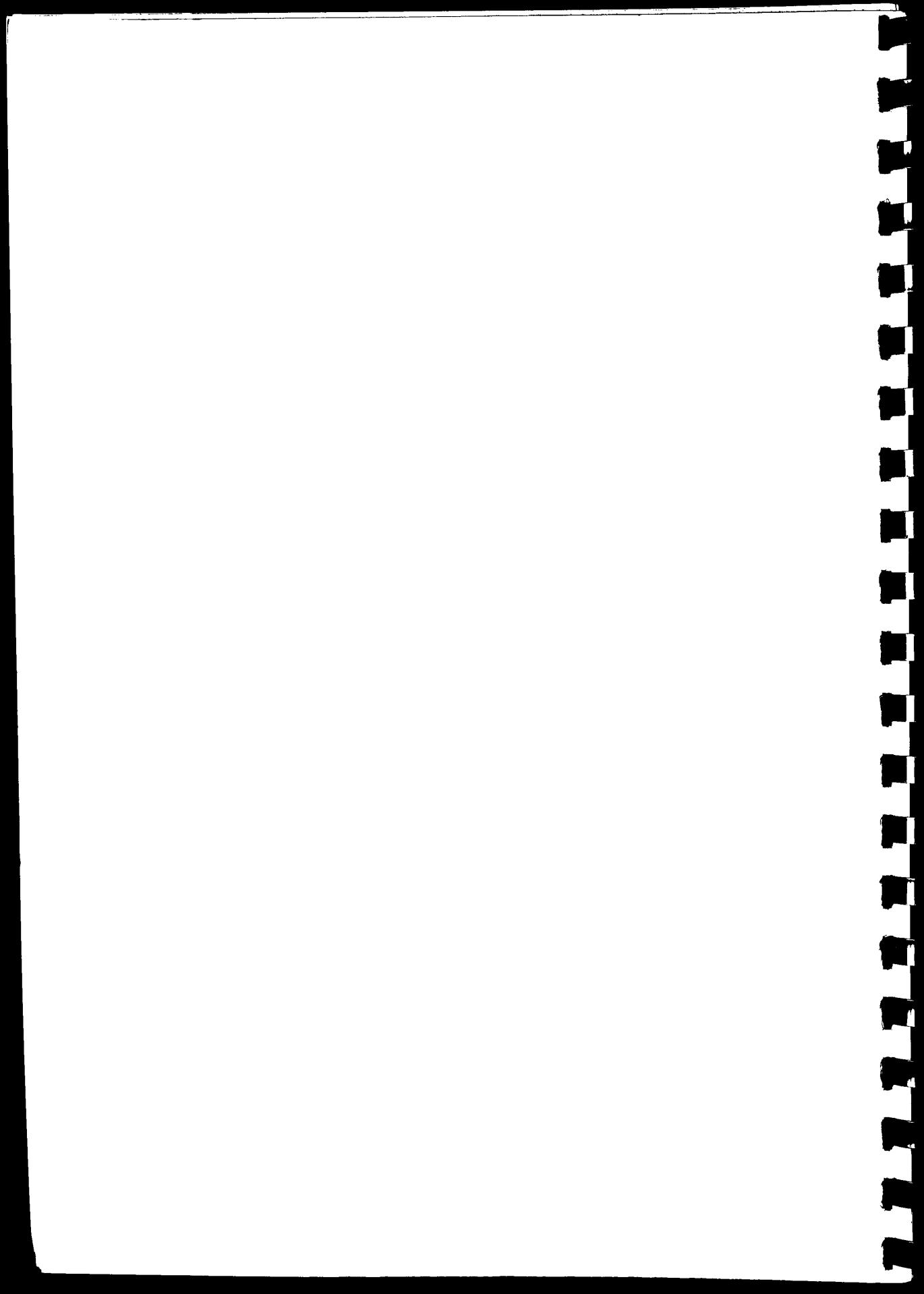
I want

I must have

Give me

Use of such expressions by foreigners sometimes leads to misunderstandings and hard feelings. Similarly, pointing to and naming an object when asking for it is often considered rude.

This part teaches a formula for making requests (Can I have x please?) in the first item, and the second item gives alternative forms of request for passive recognition.



2.5.1 MAKING POLITE REQUESTS

Language Function: The students make polite requests.

Structure: Question with can.

Equipment: Objects, (or flash card pictures) already learned.

Hand round to the class objects or cards already familiar. (Choose for this a series of objects which you feel may need revision). Ask the students to give you the objects in the following way:

Can I have the dustpan, etc please?

Practise until the question is thoroughly learned, then get the students to ask each other for objects. Finally, practise in groups. Insist on please being used with every request, and on thank you when the object asked for is received.

2.5.2 RESPONDING PLEASANTLY TO REQUESTS

Context: With patients on the ward.

Language Function: Responding pleasantly to requests.

Structure: The formula taught in 2.5.1 is expanded so that students can learn passive recognition of alternative forms of request.

Vocabulary: Simple items likely to be on the patients' lockers.

Equipment: Slide A15. Objects to be taught.

Introduce a few objects likely to be in or on the patients' locker eg.

a book, slippers, a letter, a glass, a box.

Using the items, revise some of the instruction words learned in 1.3 especially those occurring in the Tape Item below. Ask the students to give you the items one by one with a verbal response to your request

Introduce this tape item with Slide A15.

Tape Item 12:

Mr Evans: Can you pass my book, Joyce please?

Joyce: Here you are, Mr Evans.

Mr Evans: Could you get my slippers, please?

Joyce: Yes. Here you are.

Mr Evans: Oh and could you pick up my letter, please?

Joyce: Yes, all right.

Mr Evans: Would you take this tray away now, please Joyce?

Joyce: Yes OK, Mr Evans.

Listen.

Listen and repeat Joyce.

2.5.3 ASKING FOR THINGS IN THE DINING ROOM

Context: The domestic in the hospital dining room.

Language Function: The domestic making a specific request.

Equipment: Slide A16.

Show slide A16 of Joyce asking for food in the dining room. Present the following dialogue:

Tape Item 13:

Joyce: Can I have fish and chips, please?

Canteen Woman: There you are.

Joyce: Thanks. And pudding, please.

Canteen Woman: There you are. Do you want coffee?

Joyce: Oh, yes please.

Canteen Woman: There you are then.

Joyce: Thanks. How much?

Canteen Woman: That'll be ... 25p please.

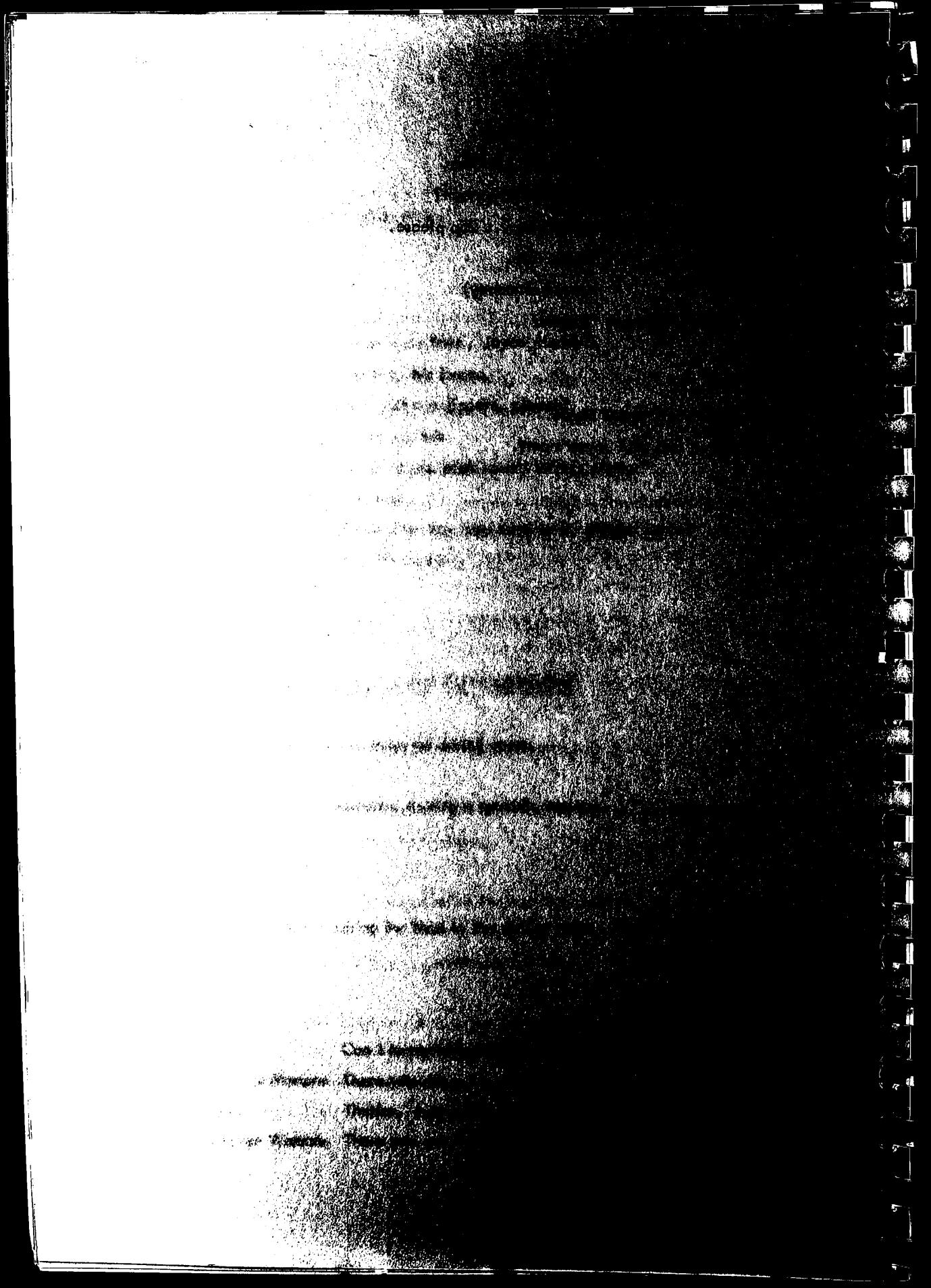
Joyce: Right, 25p.
(sound of money)

Canteen Woman: Thanks.

Listen.

Listen and repeat Joyce.

Listen and take Joyce's part.



SECTION TWO

PART SIX

Looking after crockery and cutlery

The overall aim of this Part is to increase confidence and fluency in the language associated with the everyday handling of the commonest objects used by domestics - crockery and cutlery. The items cover language used with other domestics or orderlies in the kitchen, with patients, and with supervisory staff.

OUT HORSES

八九三

Digitized by srujanika@gmail.com

... record of all the ships to have been captured by
the Japanese navy off the British coast, and
the names and numbers of the ships captured
are collated to determine which ships

2.6.1 WHO'S GOT MY CUP?

Context: The ward is a complex place where several people are doing different jobs at the same time. Questions and answers about possession crop up frequently.

Structure: Questions and answers with have got.

Vocabulary: Revision of food items.

Introduction of some items of crockery and cutlery.

Equipment: Items of crockery and cutlery. Some food items for revision.

Present and practise the following items of crockery and cutlery. Most of them are likely to be known already:

cup	knife
saucer	fork
plate	spoon
glass	

Give out the items taught to the class and present:

Mrs X has got the spoon.

She's got the spoon.

Mr Y has got the cup.

He's got the cup.

etc.

When the class has had ample opportunity to listen to and clearly grasp this form, practise it chorally.

Now introduce the question.

Who's got the knife/cup?

etc.

and get the students to answer

Mr X has got it.

Guessing game

Divide the class into groups. Give each group a set of cards with objects drawn on them (eg furniture, dishes, food, equipment etc). The cards are divided between the members of the group so that no-one knows which cards the other members hold. One member asks:

Who's got the fish and chips/pudding etc?

The others guess:

- or Mr X has got it
- or Mr Y has got it
- or You've got it.

The person challenged must either say

- Yes, I've got it
- or No, I haven't got it.

Continue until all the cards have been guessed.

2.6.2 SOME IMPORTANT ADJECTIVES

Context: The domestic with the patients.

Language Function: Understanding and responding to patients' complaints.

Structure: Noun + be + Adjective.

Vocabulary: Kitchenware

Water

Present any other items of kitchenware in common use in your hospital

eg bowl, saucepan, jug, tray, kettle, ladle, teapot etc.

When these have been thoroughly practised, present:

Look at this plate. It's dirty.

Look at this tray. It's wet.

Look at this jug. It's empty.

Practise the following:

This plate is dirty. Can you wash it please?

This tray is wet. Can you wipe it please?

My glass is empty. Can you fill it please?

Practise in groups, giving each group several kitchen items and some water.

When dirty, wet and empty are thoroughly learned, teach clean, dry and full.

Present and practise the following dialogue:

Tape Item 14:

Mr Evans: Oh, Joyce!

Joyce: Yes, Mr Evans?

Mr Evans: My glass is empty. Can you fill it please?

Joyce: Oh all right Mr Evans. (sound of pouring)

There you are. Now its full.

Mr Evans: Thank you, dear. Oh but look!

Now my tray is wet. Can you dry it please?

Joyce: Oh really, Mr Evans! All right then. (sound of wiping)

There you are. Now it's dry.

Mr Evans: Thank you Joyce. Oh dear, look, my locker's all dirty.

Can you wash it please?

Joyce: Oh, Mr Evans. You are a nuisance! All right then.

(sounds of sloshing)

There you are. Now it's clean.

Mr Evans: Thank you Joyce. You are kind.

Joyce: Oh get on with you!

Listen.

Listen and repeat Joyce.

Listen and take Joyce's part.

2.6.3 WASHING UP

Context: Each hospital has its own procedure for this job and you will need to find out what this is and adapt this item accordingly. Although a description of this kind is unlikely ever to be given as it stands, students may need to explain what they do to a supervisor when, for example, they are thought to be doing something wrong and wish to explain, when equipment breaks down, an accident occurs.

Language Function: The student describes how he does the washing up.

Structure: The present simple tense.

Vocabulary: Kitchen furniture.

Some new verbs.

Equipment: B slide of the sink area in your ward kitchen.

Prepare a description of the washing up procedure in your hospital and present it. You may need to present items of kitchen furniture first, using the slide,
eg sink, taps, rack, sterilizer.

Example: First I turn on the hot tap.

I fill the sink.

I wash the dishes

Then I put them in the sterilizer.

Then I take them out.

I wipe them.

I put them away.

SECTION TWO

PART SEVEN

Using names correctly

The correct use of names is essential to good relationships. The misuse of names is common by both the foreign and the English staff. Misunderstandings may occur for the following reasons: poor pronunciation, misuse of titles (Mr, Miss etc), an inappropriate degree of formality or informality, often arising from confusion over surnames and first names.

11. VENDRE

12. VENDRE

13. VENDRE

14. VENDRE

15. VENDRE

16. VENDRE

17. VENDRE

18. VENDRE

19. VENDRE

20. VENDRE

21. VENDRE

22. VENDRE

23. VENDRE

24. VENDRE

25. VENDRE

26. VENDRE

27. VENDRE

28. VENDRE

29. VENDRE

30. VENDRE

31. VENDRE

32. VENDRE

33. VENDRE

34. VENDRE

35. VENDRE

36. VENDRE

37. VENDRE

38. VENDRE

39. VENDRE

40. VENDRE

2.7.1 NAMES AND TITLES IN THE HOSPITAL

Context: The correct use of titles such as Miss or Mrs may not be familiar. There may, for example, be a tendency to use them with Christian names.

Language Function: The correct use and pronunciation of names as an essential part of a good relationship.

Vocabulary: Mr, Mrs, Miss, Dr, Sister, Nurse.

Pronunciation: Practising the pronunciation of the names of English people most closely associated with the students' work - eg supervisors, ward orderlies, ward sisters, the Domestic Manager, etc.

Equipment: Prepared list of names.

Slides from Series B of hospital personnel.

Present your own name and title very clearly (eg Miss Henley, Mr Smith etc).

Now pronounce carefully the names of the people known to your students from your prepared list. If possible, use slides from Series B to illustrate.

eg Mrs James

Sister Wright

Mr Kelly

Dr Simmons

Miss Spencer etc.

Make sure the sex differentiation of Mr, Mrs and Miss is understood.

Make a tape recording of the names on your list. Encourage the students to listen very carefully, and practise the names.

Tape Item 15: (to be prepared specially)

Follow-up activity: Check with the people whose names the students have practised that they are now pronouncing them correctly. Encourage other hospital staff to learn to pronounce the students' names correctly.

2.7.2 USING SURNAMES AND CHRISTIAN NAMES

Context: Because of the confusion that English people often experience over foreign names, the students may be called something quite incorrect by the hospital personnel. They may have been too shy or uncertain to get their name right in the first place.

Language Function: The student corrects a mistake made with his name, and tells someone the right way to address him.

Vocabulary: First name, surname (Where your students are christian, teach christian name)

Discuss the students' own names, and teach first name and surname. Decide with each person which of their names are which. Then discuss the names on your list in 2.7.1. Ask the student which name they use for each person, and check with the English staff that they are being called by the names they prefer. Introduce the word friendly.

Present the following dialogue.

Tape Item 16:

What's your name?

Janet Brown.

Oh, Mrs Janet?

No, Janet, or Mrs Brown.

Oh, I see. Mrs Brown.

Yes, but you can call me Janet. It's more friendly.

What's your name?

Bernarda Rodriguez.

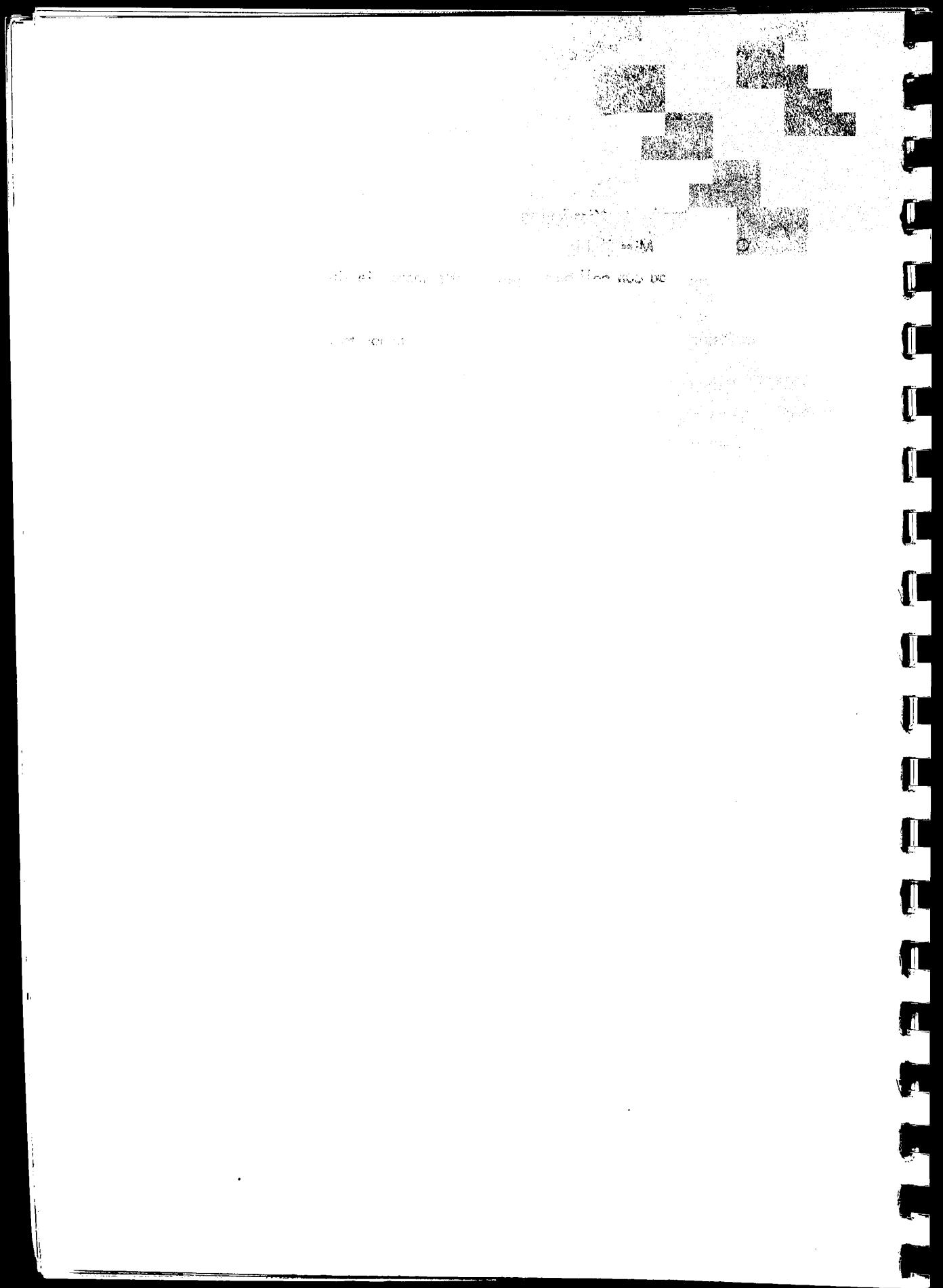
Oh, Miss Bernarda?

No, Bernarda, or Miss Rodriguez.

Oh, I see. Miss Rodriguez.

Yes, but you can call me Bernarda. It's more friendly.

Where necessary substitute in this dialogue names common to the nationality of your students.



SECTION TWO

PART EIGHT

The Ward

Locative questions and answers have a high frequency on the ward and in hospitals generally. Domestics are frequently asked to explain where people or objects are, to give directions etc. This Part is important in giving the students confidence when approached by strangers.

1949
1949
1949
1949

2.8.1 SOME ESSENTIAL LOCATIVES

Context: The geography of the hospital.

Concept/Vocabulary: Some important adverbs of place.

Equipment: A box divided in half.

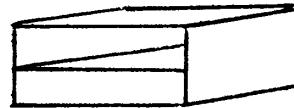
Use a box divided in half to teach the following adverbs:

inside

outside

upstairs

downstairs



Spend plenty of time on getting the students to handle the box, and to thoroughly familiarize themselves with the language before getting them to repeat it.

Teach them right and left.

Get the students to show their right hands and their left hands. Ask individual students to stand up, and then ask them to turn right, and turn left.

2.8.2 GIVING DIRECTIONS IN THE WARD

Context: Domestics are constantly asked for directions to different parts of the ward by new patients, visitors etc.

Language Function: The domestic gives directions.

Concept/Vocabulary: Prepositions into, out of, past, through.

Equipment: Draw a large cardboard plan of a typical ward in your hospital that can be laid out on a table and used like a games board. (see example overleaf) Coloured counters.

Using the specially prepared ward plan, revise the names of ward areas (1.5.1).

Here's the kitchen.

Here's the day room. etc.

Now take a coloured counter and put it on the plan, to represent the idea that you are in the ward. Put it on different parts of the board:

I'm in the bathroom.

I'm in the linen store. etc.

Now show how to get from one place to another introducing one by one the following expressions.

eg. I'm in the kitchen. I want to go to the day room.

I go out of the kitchen.

I turn right.

I go through the ward.

I go past the bathroom. etc.

2.8.3 SUGGESTED GAMES FOR PRACTICE

(a) Hunt the purse

One student goes out of the room while a small object (eg a purse, handkerchief etc) is hidden. The student is then called back into the room, and the others call out directions to lead him to the object.

eg Go to the window.

Go past the table.

Turn right.

Go straight on.

Stop.

Turn left.

Look under the chair. etc.

(b) Guessing game

One student has the plan of the ward and a counter. He puts the counter in one area of the ward so that the other students can not see where it is. They guess:

You are in the kitchen.

You are in the treatment room.

You are in sister's office. etc.

(c) Telling the visitor

One student pretends to be a visitor to the ward and puts his counter down on the plan. He asks the others to tell him the way to another part of the ward.

eg Where is the linen store?

The others give him directions, and the first student moves the counter round the plan, following the directions.

eg Go through the ward.

Go past the sluice.

Turn left. etc.

When the material is thoroughly practised, work in groups, the students giving directions to each other round the ward, or if they have enough confidence, round the hospital.

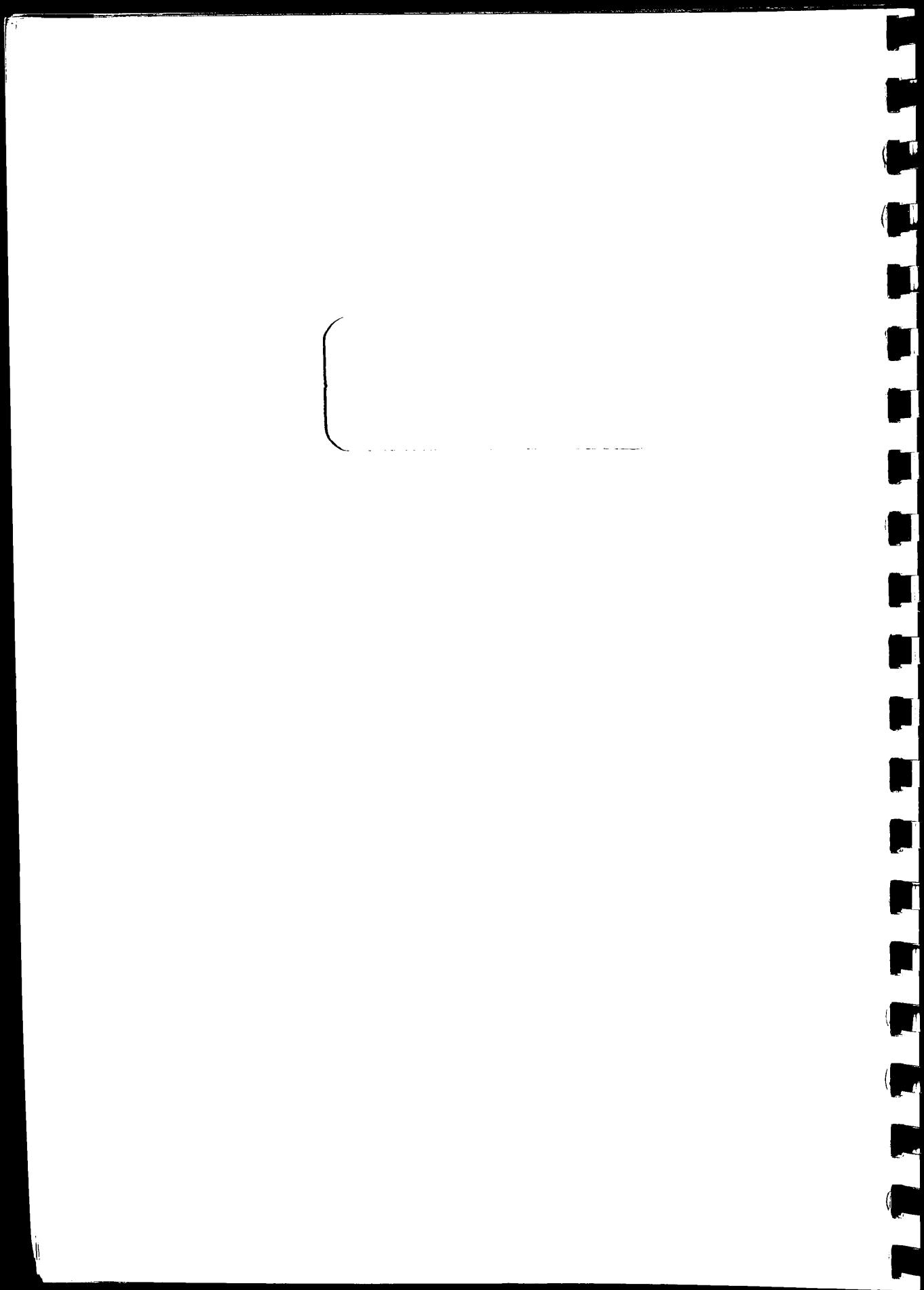
Follow-up activity: On your weekly round, ask individual students to give you directions to different parts of their own ward.

the first time in the history of the world, the
whole of the human race has been gathered
together in one place.

which are parallel to the plane, to illustrate the two main types of
parallel lines, which are parallel (2)

English for Domestic staff

SECTION THREE



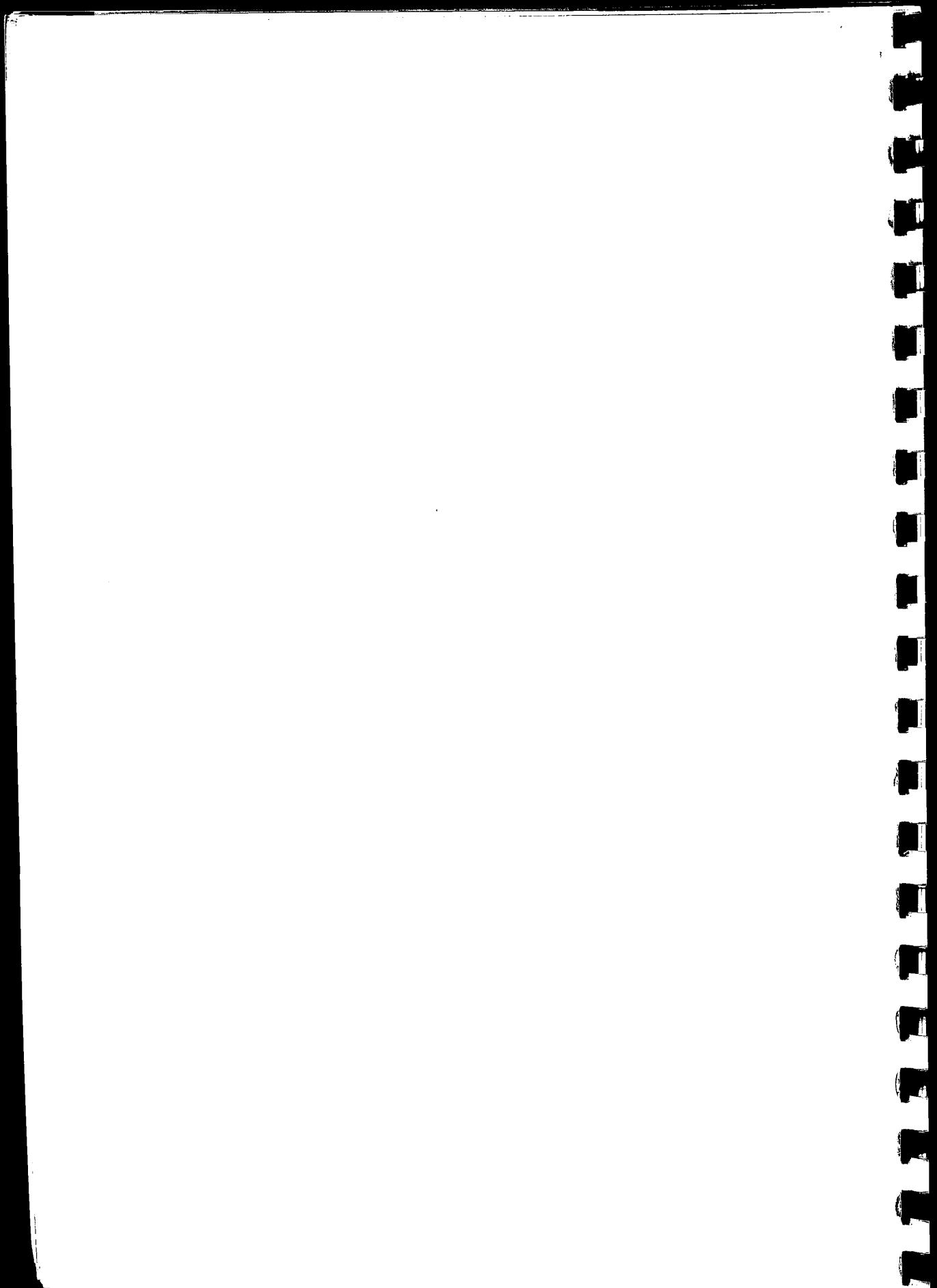
English for Domestic staff

SECTION THREE

An English language training course

for

overseas domestic staff



CONTENTS

	page
<u>Part One: The Past Tense</u>	3
3.1.1 The past tense	4
3.1.2 Your last day-off	5
3.1.3 Your holiday	6
3.1.4 Some important past tense forms	8
3.1.5 History of personal things	8
3.1.6 Coming to England	9
 <u>Part Two: Complimenting</u>	 11
3.2.1 Complimenting someone on their possessions	12
3.2.2 Complimenting someone on their appearance	13
 <u>Part Three: Cleaning floors</u>	 15
3.3.1 Floor cleaning equipment	16
3.3.2 Instructions for cleaning floors	17
3.3.3 I've run out of	18
 <u>Part Four: Understanding people</u>	 20
3.4.1 How to behave if you're not understood	21
3.4.2 How to behave if you don't understand	22
 <u>Part Five: Words of quantity</u>	 23
3.5.1 How much? a lot, a little etc	24
3.5.2 Asking patients how much they want	25
3.5.3 How many? a lot, a few etc	26
3.5.4 A lot more, a little less etc	27

	page
<u>Part Six: Safety</u>	
3.6.1 Safe and dangerous	29
3.6.2 Warnings	29
3.6.3 Dangers in the hospital	31
3.6.4 Awareness of safety in a daily task	31
3.6.5 Printed safety notices	32
 <u>Part Seven: Asking permission</u>	 33
3.7.1 Asking the supervisor's/sister's permission	34
3.7.2 Asking the patient's permission	34

SECTION THREE

PART ONE

The Past Tense

The work on the past tense given here represents a major load of new material, and the items are best not taught consecutively, but should be interspersed with other items.

Suggestions are given in this Part for widening the language taught, beyond the limitations of the given material, so that students can be encouraged to find out from you the language they need in describing their own personal situations.

EEN DRIE

310 T.

卷之三

Wij zijn de mensen die er niet zijn.

... for test environments.

„କାନ୍ତିର ପରିବାରରେ”

... and the first part for middle school students.

Journal of Health Politics, Policy and Law, Vol. 35, No. 4, December 2010
DOI 10.1215/03616878-35-4 © 2010 by the Southern Political Science Association

1996-1997 school year and early 1997.

3.1.1 THE PAST TENSE

Structure: Introducing past tense.. Statements and wh questions.

Equipment: Slide A17.

Revise the questions from 1.7.1.

Where do you work?

Where do you live?

Revise your own answers to these questions:

eg I work in Southall.

I live in Richmond.

Now present the following:

Before, I worked in

Before, I lived in

Present and practise the following dialogue, using slide A17 to introduce the idea of an official interview.

Tape Item 17:

Mrs Cooper: Good morning. What's your name?

New Domestic: Ahmed ben Ali.

Mrs Cooper: Yes. Where do you live?

New Domestic: In London.

Mrs Cooper: Good. And where did you live before?

New Domestic: I lived in Morocco.

Mrs Cooper: I see. And where did you work before.

New Domestic: I worked in a hotel in Morocco.

Listen.

Listen and repeat the new domestic's part.

Listen and fill in with your own details, the new domestic's part.

Note the new technique of students having to fill-in for themselves. Some special preparation will be necessary.

Practise the questions and answers in groups. By this stage in the course, the students can be encouraged to use language more freely and adventurously, and there is no need to stick rigidly to the questions and answers provided here. When practising in groups, introduce any other questions that are appropriate to your students.

ag When did you come from India/Spain etc?
When did your wife come?
Did you come by aeroplane? etc.

3.1.2 YOUR LAST DAY-OFF

Structure: Past tense statements and questions with when/where/what.

Concept/Vocabulary: last everyday activities

Equipment: Flashcards series Everyday activities. A calendar.

Establish with a calendar (unless your students are completely illiterate) the meanings of "your last day off" and "your next day off". Make sure these meanings are clearly understood.

Practise "last" with days, months, years etc.

Last Monday, last Tuesday

Last week, last month, last year.

Now ask the question:

What did you do on your last day off?

Present and explain the following answers, using the flashcard series of everyday activities.

I washed the clothes.

I ironed the clothes.

I cleaned the house.

I cooked the dinner.

I worked in the garden.

I painted the kitchen.

I made a dress.

I went for a drive/went to the park.

I went shopping.

Practise thoroughly, making sure the question "What did you do?" has been properly grasped. Use the visuals as a stimulus, and let the class ask and answer the questions in groups.

Follow-up activity: Ask the students regularly what they did on their last day off.

3.1.3 YOUR HOLIDAY

Context: Many foreign hospital workers pay visits to their own country in their holiday time every two or three years.

Language Function: The students are encouraged to talk about a subject of real interest, using language more freely than hitherto. They are encouraged to elicit language they do not know from the person they are talking to.

Structure: More practice with the past tense. Introduction of irregular forms: saw, came .

Equipment: The students' own photographs of their holidays.

Photographs of your own taken on holiday.

Briefly describe your own holiday, showing photographs if possible.

Example: Look, I've got some photos of my holiday.

I went to X.

I stayed with my brother/friend/ in a hotel etc.

I went swimming/shopping etc.

I came home by plane/car etc.

Present and practise the following dialogue:

Tape Item 18:

Joyce: Oh hello, Maria. Did you have a nice holiday?
Maria: Yes, lovely. I went to see my family in Spain.
Joyce: Oh yes! That's nice. Got any photos?
Maria: Yes, look. Here's my brother, I stayed with him and his wife.
Joyce: Lovely.
Maria: And here's their house.
Joyce: Very nice. Who went with you?
Maria: All of us. My husband and the two children.
Joyce: I bet your mother was pleased to see her grandchildren.
Maria: Oh yes, she was!

Listen.

Listen and repeat Maria.

Ask the students in advance to bring their photographs to the class, and to describe their holidays. Encourage them to elicit from you any language they need, using photos, mime etc as prompts.

Examples of questions to ask:

Where did you go on holiday last year,
How did you go?
What did you do?
Did you have a nice time?
Where did you stay?

Get the students to work in groups round the photographs, asking each other questions. Attach any supervisors or visitors to the class to each group so that the students can practise eliciting language from native speakers.

3.1.4 SOME IMPORTANT PAST TENSE FORMS

Language Function: Explanations.

Structure: Some irregular past tense forms.

Vocabulary: Revision of names of crockery and cutlery.

Equipment: Crockery and cutlery.

Run through the crockery and cutlery items for revision. Then, hide them in different places in the room, or give some of them to different students. Ask where the items are, and give the answers.

eg Where is the jug?

I gave it to Mr X.

Where is the kettle?

I put it under the chair.

Where is the knife?

I left it on the table.

Where is the saucepan?

I took it outside.

Ask the students to give you the answers, making sure they get the past tense forms right.

eg Where is the saucer? You put it under the table etc.

Now get students to hide items and ask each other where they are.

3.1.5 HISTORY OF PERSONAL THINGS

Context: Commenting with interest and approval on other people's possession is usually taken as a sign of friendliness between English people, and forms a useful part of a foreigner's social language.

Language Function: Initiating and responding to friendly questions.

Structure: Practice of past tense questions and statements.

Vocabulary: Clothing and personal items.

Present and practise a few items of clothing,

Example:	shoes	trousers
	coat	jacket
	skirt	tie
	jumper	blouse

etc.

Comment on the students' clothes and possessions and ask questions as follows:

I like your watch, Mrs X.

Where did you buy it?

When did you buy it?

These questions, once fully grasped, are ideal for group practice. If any supervisors are present, encourage them to join in the groups. The students will enjoy the opportunity of asking real questions to you, each other and any supervisors present.

3.1.6 COMING TO ENGLAND

Context: Most students will have been asked questions about themselves by officials, by other people in the hospital, at job interviews etc. This item attempts to increase the students' confidence in giving information about themselves.

Language Function: Answering confidently factual information about yourself.

Structure: Introduction of didn't.

Present questions and elicit answers about the students' arrival in England.

Examples:

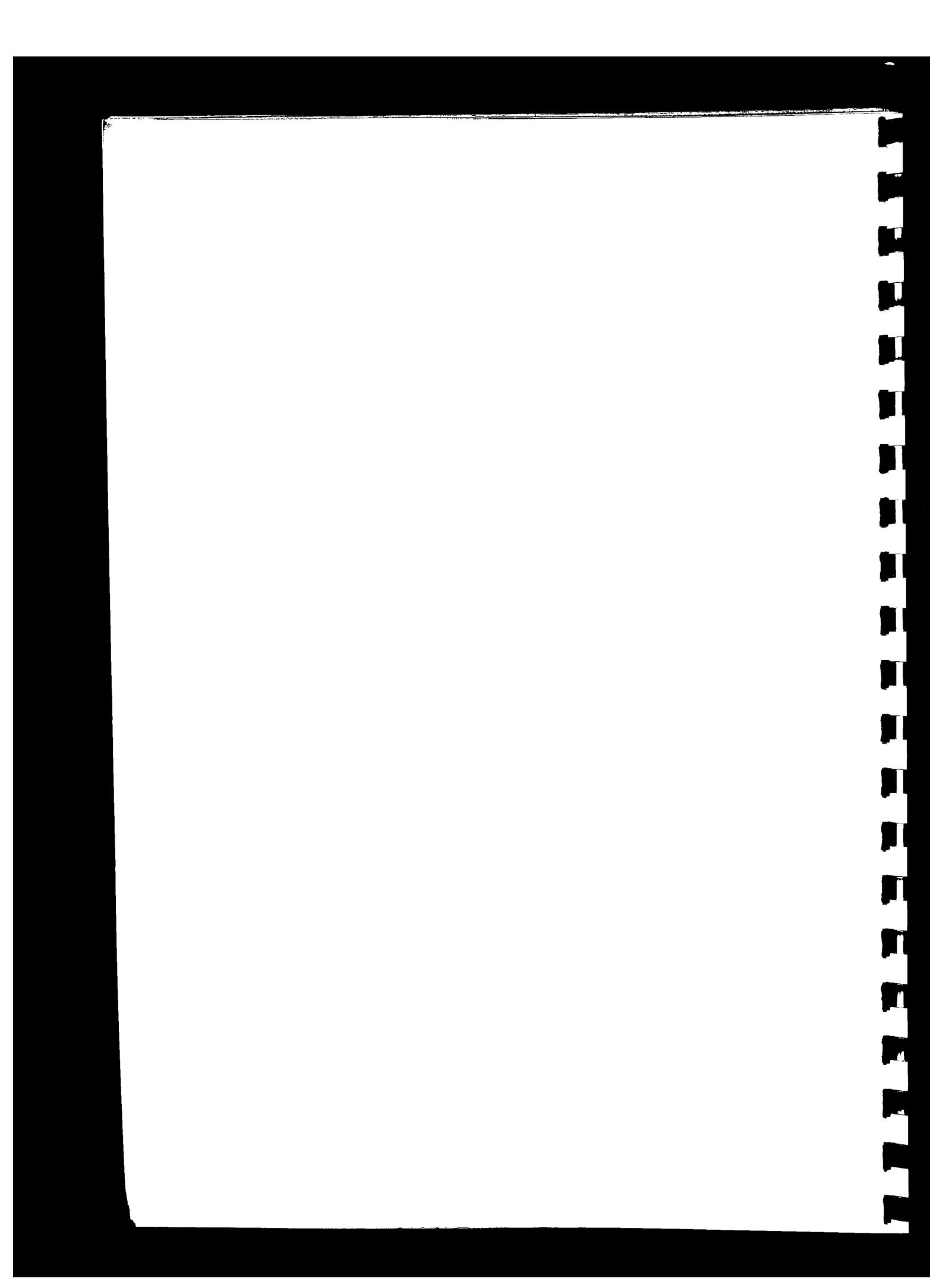
- Where do you come from?
- When did you come to England?
- Where were you born?
- Where did you live in Portugal/Spain/India etc?
- How did you come to England? (by plane etc)
- Did you come to London/Birmingham/Liverpool etc first?
- Yes I did. No, I didn't.
- Where did you live at first?
- Did your wife/husband come with you?
- Yes he/she did. No, he/she didn't.
- Did your children come with you?
- Yes they did. No they didn't. etc.

These questions are given as suggestions. Delete any that are inappropriate to your students and add any others that are relevant. Make sure that the new form didn't is properly heard and can be accurately reproduced.

The students work in pairs. Play the following tape item, using the pause button between each question. The students give the answers to each other, and help each other where there is difficulty in understanding or answering.

Tape Item 19:

- Where do you come from ?
- Where did you live in your country?
- When did you come to England?
- Where did you live first in England?
- How did you come to England?
- Did your family come with you?

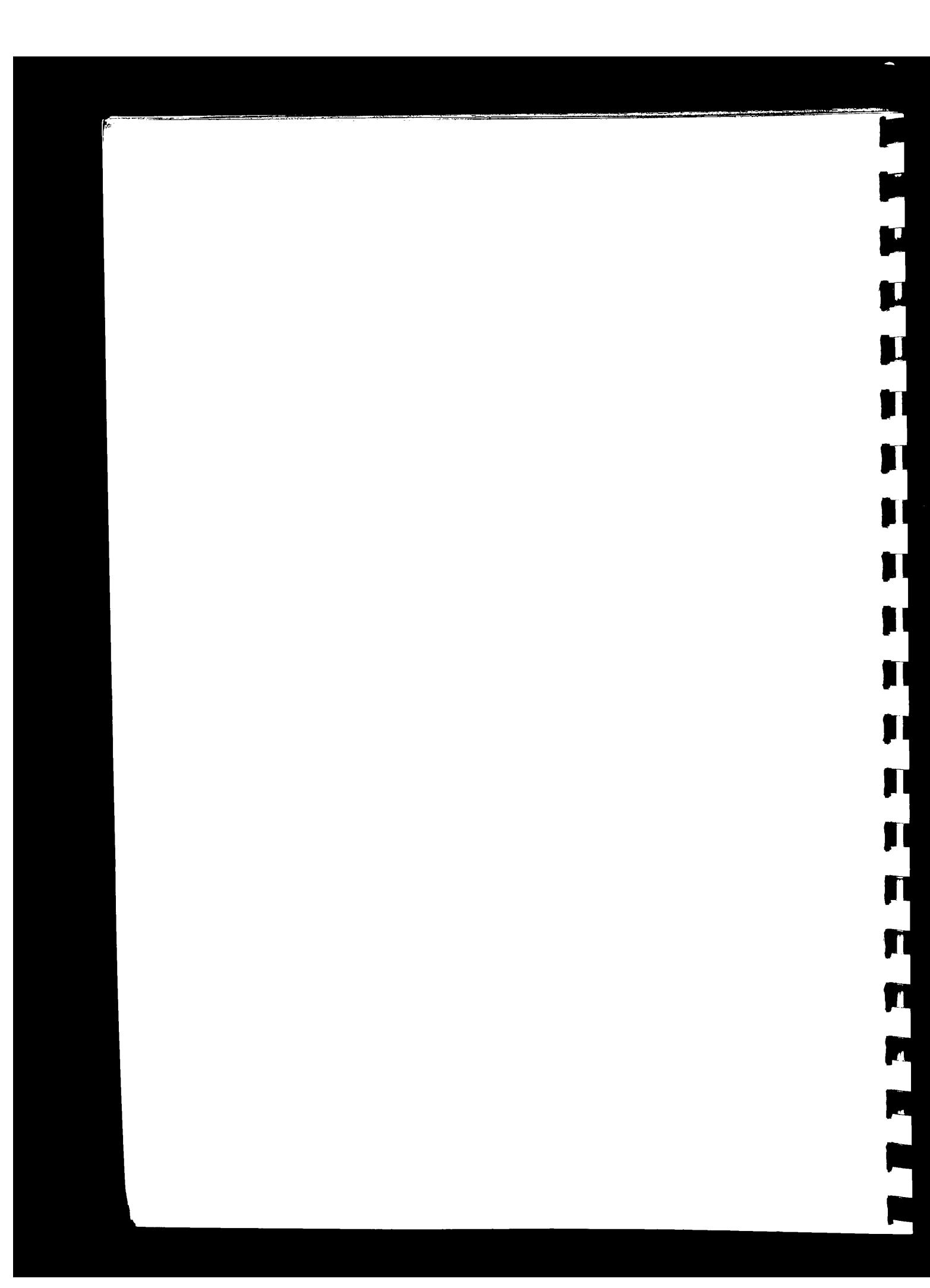


SECTION THREE

PART TWO

Complimenting

The aim of this Part is to give the domestic a means of cheering patients up in an unofficial and friendly way.



3.2.1 COMPLIMENTING SOMEONE ON THEIR POSSESSIONS

Context: Domestics working round patients' beds can strike an amiable and encouraging note by complimenting the patients on their photographs, flowers, cards and other possessions.

Language Function: Complimentary exclamations.

Concept/Vocabulary: Adjectives expressing admiration
Bedside objects.

Equipment: Personal photos of your own
Slide A18

Admire the jewellery, clothes, watches etc of the students with complimentary adjectives:

That's lovely!

That's nice!

That's beautiful!

Revise the members of your family, especially any babies, young children, or brides, and get the students to comment:

Lovely!

Beautiful!

That's nice! etc.

New revise the objects found on patients' lockers (2.5.2) and add any others you think suitable.

Show Slide A18 of Joyce admiring a patient's flowers.

Present and practise the following:

Tape Item 20:

That's a lovely photo.
That's a long letter.
That's a beautiful baby.
That's a nice present.
That's a lovely dressing gown.
That's a beautiful card.
Lovely flowers!
Nice apples!
Beautiful slippers!

Listen and repeat.

3.2.2 COMPLIMENTING SOMEONE ON THEIR APPEARANCE

Language Function: Cheering up a patient.

Vocabulary/Concept: Some new adjectives.

Present and practise the following:

You look nice this morning.
You look fine today.
You look better now.
You look happy today!

Present and practise the following dialogue:

Tape Item 21:

Joyce: Morning, Mr Evans. Did you sleep well?

Mr Evans: Yes, O K thanks.

Joyce: That's good. You look better today.

Mr Evans: Mm. I feel better.

Joyce: That's a lovely card.

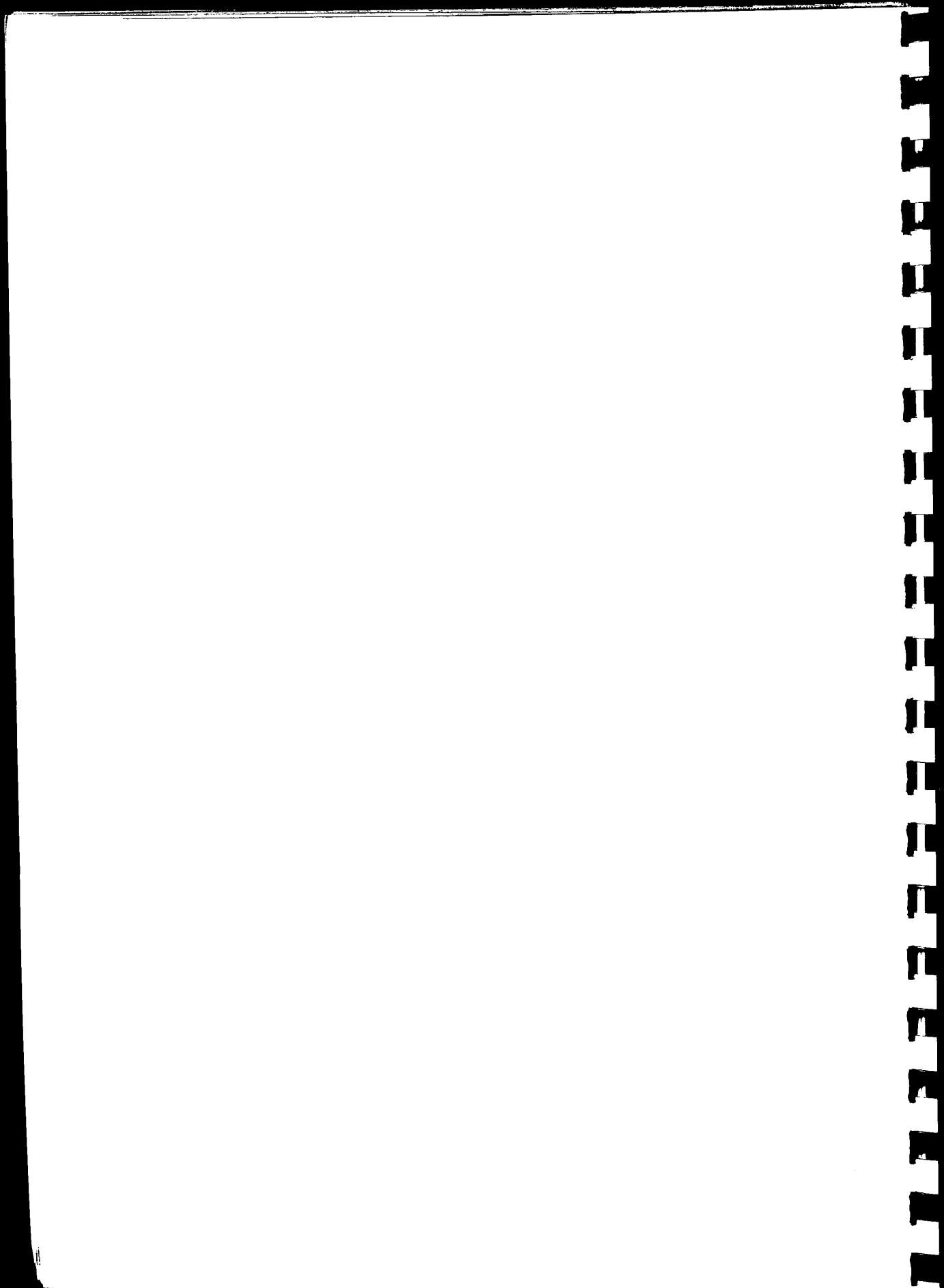
Mr Evans: Yes. My sister gave it to me.

Joyce: Oh yes? That's nice.

Listen.

Listen and repeat.

Listen and take Joyce's part.



SECTION THREE

PART THREE

Cleaning Floors

This item aims to make the students familiar with several aspects of the language involved in floor cleaning: the vocabulary of the equipment they use; instructions for the job, which may be unpredictable on new wards, or change when new materials etc are introduced; and an ability to cope with a common occurrence - running out of materials and asking for more.

3.3.1 FLOOR CLEANING EQUIPMENT

Context: The ward. Each hospital has its own equipment and methods for cleaning floors, one of the most basic and essential of the domestic's jobs. Find out exactly how the job is done in your hospital, the materials used etc and rewrite this item accordingly.

Vocabulary: Revision of cleaning materials

Any additional cleaning materials not already taught

Verbs to do with cleaning.

Present and practise the following vocabulary items. (Follow the procedure suggested in

1.3.1. Some are revisions from item 1.4.1)

Tape Item 22:

dustpan	mop)	
brush	kex mop)	whichever is used in your
bucket	squeegy mop)	hospital, or any other
broom	damp mop)	equipment used
floor cloth	hoover)	
	B V C)	whichever term is used
	vacuum cleaner)	
polish)	
acrylic)	or whatever cleaning
Emral)	agent is used
Tee-pol)	

Almost all these items will probably be known, but some practice may be needed for accurate pronunciation.

Now present by demonstration and practise the necessary verbs to describe the action of floor cleaning. Adjust this list where necessary to suit the practices in your hospital:

3.3.2 INSTRUCTIONS FOR CLEANING FLOORS

Context: Rewrite these instructions according to the hospital's own practice.

Language Function: The student understands and responds to instructions.

Equipment: Multiple sets of floor cleaning equipment.

B Slide showing someone washing the floor.

Using your B slide of someone washing the floor lead up to the students understanding and repeating the following series of instructions:

Tape Item 23: (to be prepared specially)

Example: Put hot water in the mop bucket.
Add the Emral.
Put the mop in the water.
Squeeze the mop.
Wash the floor.
Leave it to dry.

Play the tape several times, following the instructions yourself with the relevant equipment.

Practise the instructions chorally and individually. Now work in groups. Each group has a set of cleaning equipment and students instruct each other.

3.3.3 I'VE RUN OUT OF

Context: As cleaning materials etc run out, domestics ask for more from the supervisor.

Language Function: Explanation, backing up a request.

Structure: The present perfect tense is used, but don't stop to teach it at this point.

Equipment: Empty jar for each student.

Two or three packets of rice. Empty packets of cigarettes, sugar etc.

Give each student a jar with a little rice in it. Get a student to pour his rice into another student's jar. Present:

He's run out of rice.

Practise several times.

Present the following dialogue.

Tape Item 24:

Joyce: What next Mrs Cooper?

Mrs Cooper: Wash the bath now, Joyce.

Joyce: All right. (Sounds of sloshing)

Oh, Mrs Cooper!

Mrs Cooper: What's the matter?

Joyce: I've run out of scouring powder.

Can I have some more, please?

Mrs Cooper: Yes, of course.

Listen.

Listen and repeat Joyce.

Listen and take Joyce's part.

Using the jars of rice again, get the students to ask for more rice as they run out.

Excuse me, I've run out of rice.

Can I have some more please?

For further practice, take empty packets or bottles of sugar, coffee, cigarettes, milk, etc.

Give them out to the students and get them to practise:

I've run out of sugar.

I've run out of coffee. etc.

Horseshoe Game:

The class sits in a horseshoe with the teacher at one end of it. Give an empty packet (eg tea) to the student at the other end of the horseshoe. Ask the student next to you:

Has Mrs X got any tea?

The student answers

I don't know

and turns to the person beside her to ask the same question. The message is passed right round the horseshoe. The student at the end replies.

I've run out of it.

The message

She's run out of it

is then passed round the horseshoe and back to the teacher.

SECTION THREE

PART FOUR

Understanding People

There is little new language in this Part. The aim is to teach students a method of coping when they are not understood or do not understand.

no es el más útil y no obstante

no se ha establecido tal uso.

3.4.1 HOW TO BEHAVE IF YOU'RE NOT UNDERSTOOD

Context: Many foreigners assume that they have said something completely incorrect if they are not understood. However, the problem may be their pronunciation, or the listener's unfamiliarity with their speech. The essential point to get across is that they should repeat what they have to say slowly and clearly, and not change it or become silent.

Language Function: The student tries to help someone who cannot understand him.

Pronunciation: This item attempts to give the student the idea that his pronunciation is important for intelligibility. Take this opportunity to tackle some of the students' more serious pronunciation defects.

Equipment: Some small objects, a pencil, a key etc.

Collect small objects from the members of the class and get the students to ask for them back.

eg Can I have the key please.

Look puzzled and say:

Sorry, I didn't understand.

or Sorry, what did you say?

Get the students to repeat the question slowly and clearly.

Can - I - have - the - key - please?

Tape Item 25:

Joyce: (not clearly): Can I take your cup now please?

Mr Evans: Sorry, what did you say?

Joyce: (slowly and clearly): Can - I - take - your - cup - now - please?

Mr Evans: Oh yes. Here you are Joyce.

Listen.

Listen and repeat.

3.4.2 HOW TO BEHAVE IF YOU DON'T UNDERSTAND

Context: It is important for the students to be able to give an acceptable indication when they don't understand. Shrugging shoulders or giving a blanket "Yes" response is likely to cause irritation.

Language Function: Asking for clarification.

Speaking fast and gabbling your words so that the students do not understand, say something they are familiar with, such as:

My off day's on Wednesday this week.

or I bought a lovely dress last Saturday. etc.

Get the students to say:

I beg your pardon?

I'm sorry, what did you say?

Then repeat what you said slowly and clearly.

Practise with individuals, then in groups.

SECTION THREE

PART FIVE

Words of quantity

There is a considerable amount of complex structural material in this Part, but at least some of it is likely to be familiar, because helping to serve out food and hot drinks to patients is often part of a domestic's job. To avoid confusion, however, it would be advisable to teach these items separately, over a period of time.

335NT-MON

335NT

335NT

... 335NT belongs to those who
... intend to get it right the first time
... 335NT belongs to those who
... believe in "powerful, reliable
... and durable" products.

3.5.1 HOW MUCH? A LOT, A LITTLE ETC

Context: Serving food, hot drinks with sugar and milk etc to patients.

Structure: Words of quantity with uncountables.

Questions with How much?

Vocabulary: a lot, a little, not much.

Equipment: a jar for each student

some liquid (water) or powder such as sugar, sand etc.

Using jars and a liquid or powder, such as water, sugar, sand etc, demonstrate:

a lot

a little

not much.

Now present the question: How much sugar, water etc do you want?

With the answers: A lot, please.

A little, please.

Not much, please.

Pour into a jar the appropriate amount indicated by the answers.

Practise the question and the answers with the class. Give each student a jar with some liquid/powder in it, and get them to offer and accept from each other, first in front of the class, then in pairs or groups.

Chain game: Set the class in a semi-circle with yourself at one end. Hold a packet of sugar/rice etc yourself and give an empty jar to the student at the other end of the semi-circle. Using the name of the student with the empty jar, ask the student immediately next to you:

How much sugar/rice does Mrs X want?

The student asks the person next to her, and the message is relayed to the end of the line.

The one at the end answers:

a lot, please

or a little, please

or not much, please.

and the answer is relayed back to the teacher with the empty jar passed back along the line so that the appropriate amount can be given.

3.5.2 ASKING PATIENTS HOW MUCH THEY WANT

Context: Serving out food etc to patients.

Language Function: Questions about quantity.

Equipment: Slide A19

Show Slide A19 of Joyce offering tea to the patient. Present and practise the following dialogue.

Tape Item 26:

Joyce: Here's your tea, Mr Evans.
Mr Evans: Oh, thank you.
Joyce: How much milk do you want?
Mr Evans: Not much, please.
Joyce: And how much sugar?
Mr Evans: Oh, a lot, please. Three spoonfuls.
Joyce: Three spoonfuls? That is a lot. Here you are.
Mr Evans: Thank you Joyce.

Listen.

Listen and repeat.

Listen and take Joyce's part.

Using items of crockery, get the students to practise in groups.

3.5.3 HOW MANY? A LOT, A FEW ETC

Structure: Words of quantity with countables.

Vocabulary: all, a lot, a few, not many.

Equipment: Spoons and forks, or other small objects.

Using small separate objects, such as spoons and forks etc, present:

all

a lot

a few

not many.

Present the question: How many spoons etc do you want? With the answers:

All of them, please.

A lot, please.

A few, please.

Not many, please.

Practise first with the whole class, then divide into groups. Give each group a set of objects and get the individuals to ask for things from each other.

Game: Shopkeeping

Give one student a lot of countable objects, such as cutlery, crockery, small food items, and some uncountable objects, such as opened packets of sugar, rice etc. Get students to "shop" for items asking:

Can I have some spoons please?

or Can I have some sugar please?

The "shopkeeper" asks:

How many/much do you want?

And the "shoppers" get the amount they ask for.

NB: Some is introduced in this game though not taught explicitly.

3.5.4 A LOT MORE, A LITTLE LESS ETC

Language Function: Precision in requesting or offering.

Structure: Revision of more and less from section 1.1.3.

Equipment: Small objects as in 3.5.3.

Revise: One, two, three more
One, two, three less
and present: A lot more,
A little more,
A few more. etc.

Now present the question:

Do you want any more?

With the answers:

Yes, a lot more, please.
Yes, a little more, please.
No, a little less, please.

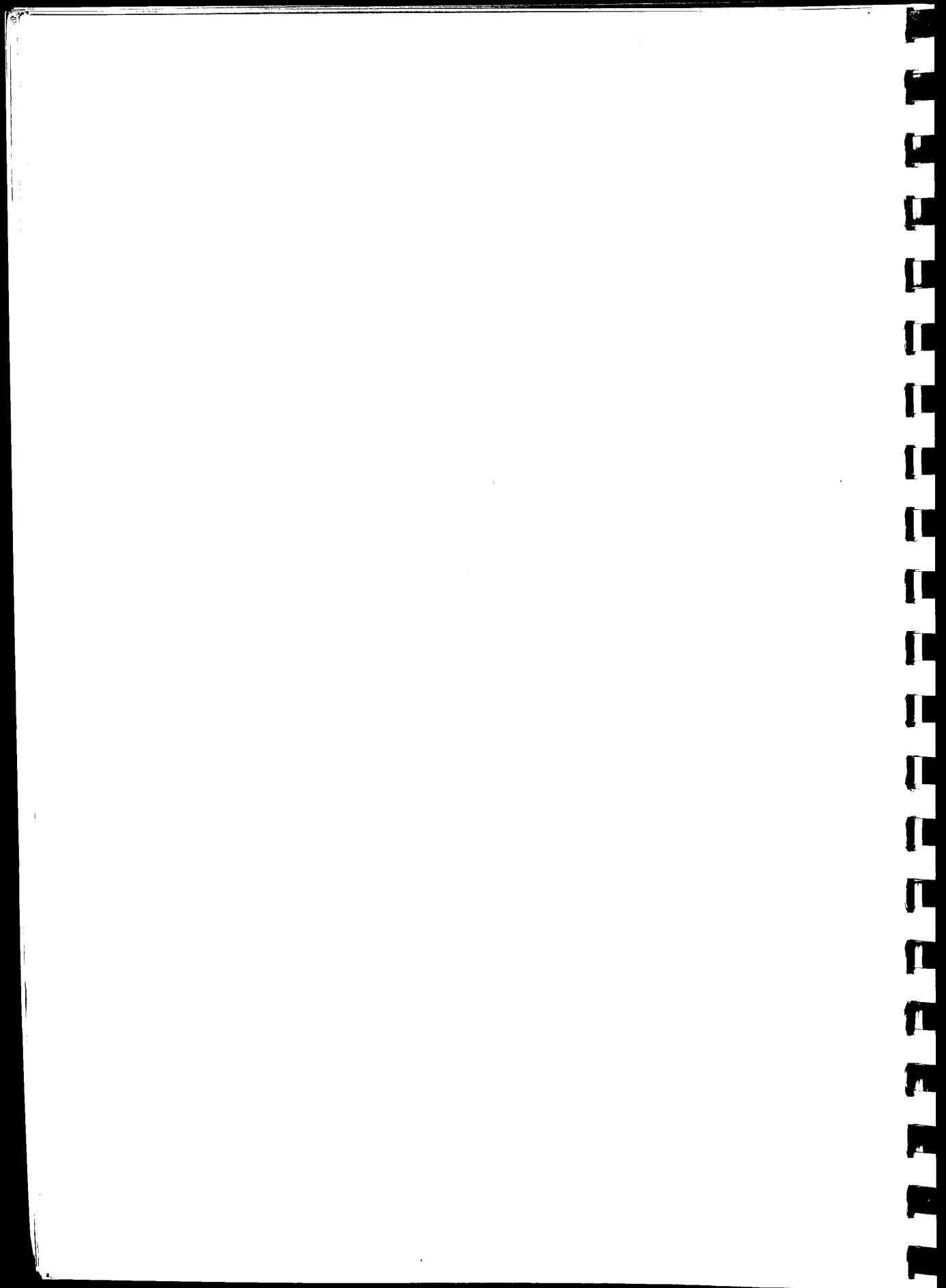
Practise individually and in groups.

SECTION THREE

PART SIX

Safety

Domestic Departments are often concerned about safety. Each department has its own particular fears, depending on the age and nature of the building and its fittings, and the type of patient. In hospitals for the mentally defective, for example, domestics need to take great care that no cleaning materials are left lying about which could be damaging to patients. In some hospitals, floor surfaces are slippery when wet, and special washing procedures have to be observed. Find out about the particular safety problems in your hospital in preparation for this item.



3.6.1 SAFE AND DANGEROUS

Language Function: Quick comprehension of safe and dangerous.

Equipment: Safety flashcard series.

Simulate dangerous situations in the class room to teach the words safe and dangerous

eg a flex spread over the floor
a broom sticking out at an angle where someone could trip over it
an electric fire
a tea tray near the edge of a table.

Show the flashcards in the Safety series and ask

Is it safe?
Is it dangerous?

The safety cards show:

electric fire, car, broom, cooker, iron, bucket, kettle, vacuum cleaner, trolley, 'poisons'.

Get students to give you an explanation of the danger, accepting anything in intelligible English.

3.6.2 WARNINGS

Context: Any situation where the student perceives danger to someone else.

Language Function: Giving warnings.

Equipment: Safety flashcards.

Using the safety flashcards and simulated dangers in the classroom, teach students useful phrases to shout out as warnings

Look out! The fire!
Mind out! The tray!
Watch out! The floor is wet!
Be careful! The hoover!

Students must be forced to shout the warnings to attract the attention of the person in danger.

Game:

Get individual students to walk into simulated dangers, or walk into them yourself. The rest of the class must shout out warnings. Do not respond to the warnings until they are given really loudly.

3.6.3 DANGERS IN THE HOSPITAL

Context: Teach in this item any special instructions the hospital may use to cover special hazards. Domestics may, for example, be required to wash one half of a floor first and let it dry before the other half is washed so that not all the floor is slippery at one time. Such instructions or the rationale behind them may be imperfectly understood.

Language Function: Warning about specific dangers.

Equipment: Slides from Series B of the specific dangers in your hospital.

Slide A20.

In this item, the previous work on safety is related to specific hazards in your hospital. It may be possible to go into a ward with the group to demonstrate the major hazards. To prepare this, or as a substitute for a group ward visit, use slides of your own from series B illustrating the major dangers in your hospital.

Ask: Is it safe?

Is it dangerous?

Get from the class or offer yourself a simple explanation of the hazard. As this is not for language learning but to improve awareness of safety, accept anything comprehensible.

Then practise warnings:

Look out! The kettle!

Watch out! The tray!

Be careful! The flex!

Present with slide A20 and practise the following dialogue.

Tape Item 27:

Joyce: Mind out, Mr Evans!

Mr Evans: What?

Joyce: Watch out, the floor is wet!
(sound of a crash)

Mr Evans: Oh dear, ooh, ooh, my back!

Joyce: Are you all right, Mr Evans?

Mr Evans: Ooh, my back.

Joyce: Oh dear. The wet floor is dangerous. You must walk on the dry part.

Mr Evans: All right, Joyce. I will next time.

Listen.

Listen and repeat.

Listen and take Joyce's part.

3.6.4 AWARENESS OF SAFETY IN A DAILY TASK

Context: Establish with supervision which daily tasks cause most concern for safety.

Language Function: Instructions including precautions.

Equipment: Slides from series B.

Prepare a sequence of instructions for a daily job containing precautions on safety. For example:

washing floors - a danger when wet
boiling kettles for tea in the kitchen
serving out hot food
pushing loaded trolleys.

Present the sequence of instructions, introducing it with the appropriate slide from series B. Get the students to act out the instructions as they listen, and then to repeat them.

Tape Item 28: (example)

Wash one side of the floor.
Leave it to dry.
Don't walk on it.
It's dangerous.
Don't wash the other side.
Wait.
After the first side is dry, wash the second side.

3.6.5 PRINTED SAFETY NOTICES

Context: A good many of the students may not be able to read at all, and even if they can, long and involved safety notices are likely to mean little to them. There are probably however a few simple notices in frequent use which are very important, eg No Entry outside an Intensive Care Unit or Danger Radiation.

Language Function: Understanding and responding to written instructions.

Equipment: Copies of slides from series B of hospital notices.

Decide which the most important safety notices in your hospital are. Copy them onto flashcards or use photographs and get the class to recognise and understand the most important words. Make sure they understand the danger implied.

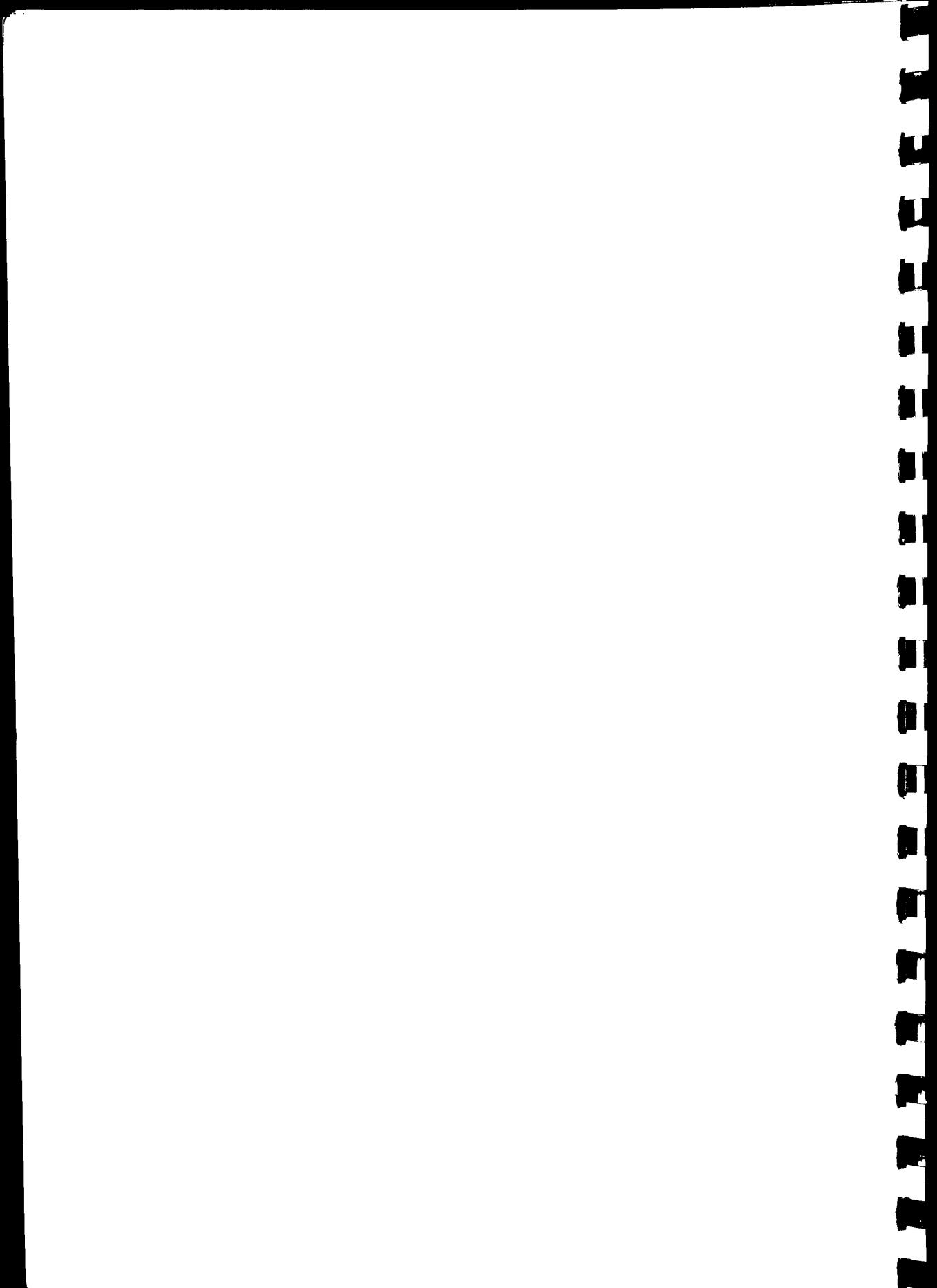
SECTION THREE

PART SEVEN

Asking permission

There is little new language in this item, but it offers an important opportunity to practise and revise.

It is important to get across to students that asking permission in the way suggested here is a form of politeness.



3.7.1 ASKING THE SUPERVISOR'S/SISTER'S PERMISSION

Context: The domestic's routine is likely to be fairly rigid, and any deviations from it will need permission.

Language Function: The domestic asks permission of a supervisor/nurse.

Structure: Present simple questions with Can.

Equipment: Slides, clockfaces, etc.

Present a number of situations in which a domestic might need to ask permission of a supervisor or nurse, using slides, or mime.

Examples: going off duty early

giving tea to a patient on a diet
cleaning an office at a particular time
leaving the ward for a personal reason etc.

Present and practise the following way of asking permission

Can I go off early this afternoon, please?
Can I clean your office now, sister?
Can I leave the floor till tomorrow?
Can I go down for coffee now please?
Can I go to see the Staff Health nurse please?
Can I wake Mr Evans for his tea?
Can I give some water to Mrs Jones? etc.

3.7.2 ASKING THE PATIENTS' PERMISSION

Context: Where domestics have a responsibility round the patients' beds, eg cleaning lockers, throwing out dead flowers, etc, it may be important for them to be able to ask permission to move or touch personal belongings in a pleasant way which will be appreciated by patients.

Language Function: The domestic asks permission from the patients. This may not involve real requests for permission, but is more an act of politeness.

Structure: As in 3.7.1.

Equipment: Small bedside objects.

Using mime or slides present a number of situations in which a domestic might want to ask permission of a patient.

Use the following sentence pattern:

Examples: Can I move your book please?

Can I throw away these flowers, please?

Can I move your bag, please?

Can I take this cup now, please?

Can I put your dressing gown here, please?

Can I move your bed, please?

Can I empty your waste bag, please?

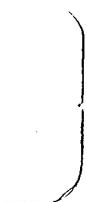
Can I take your tray, please? etc.

Game:

Set a student up as if in bed surrounded by books, glasses, vases etc. The other students take turns to ask permission.

English for Domestic staff

SECTION FOUR



pattern:
ur book please?
way these flowers, please?
ur bag, please?

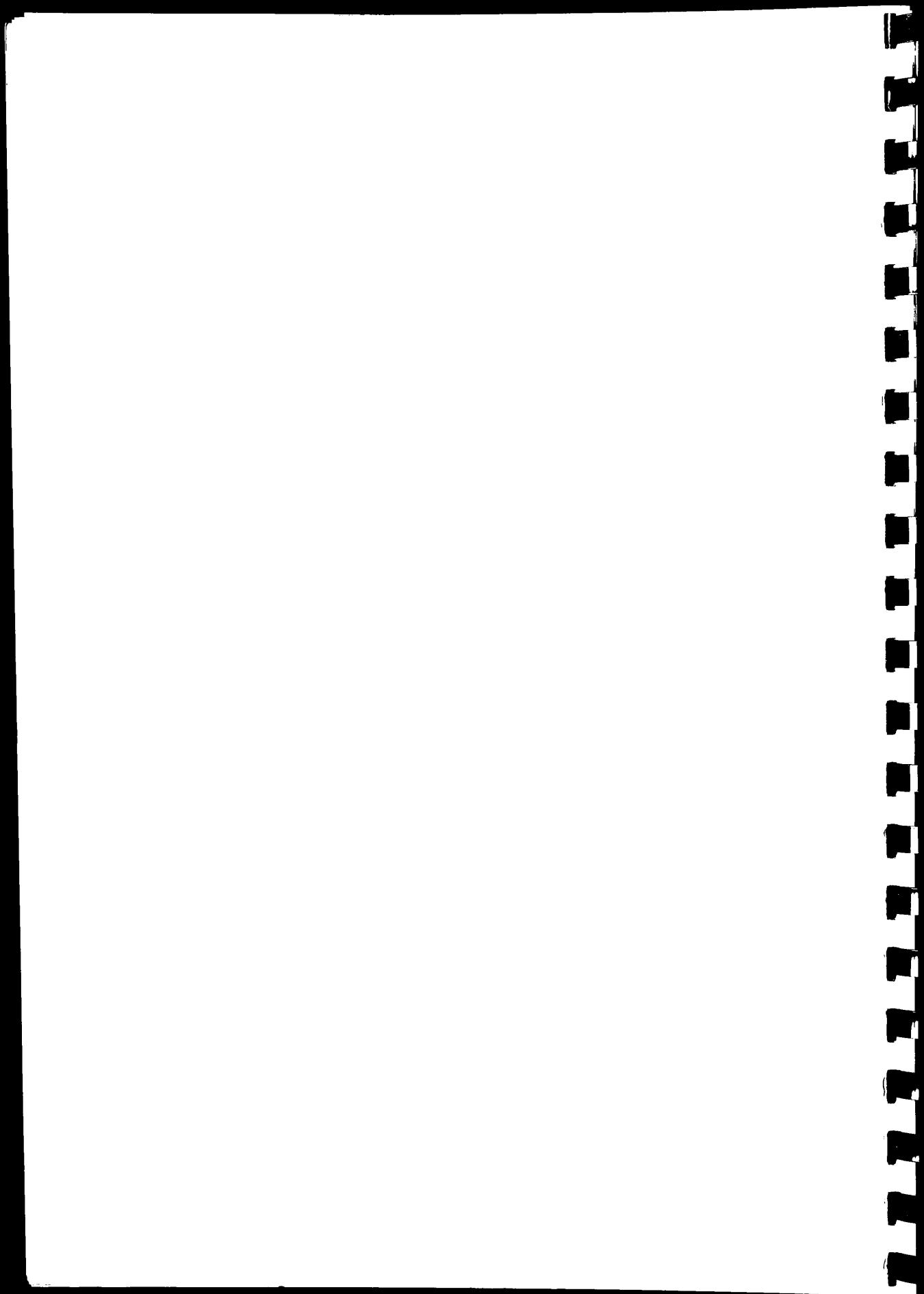
English for Domestic staff

SECTION FOUR

An English language training course

for

overseas domestic staff



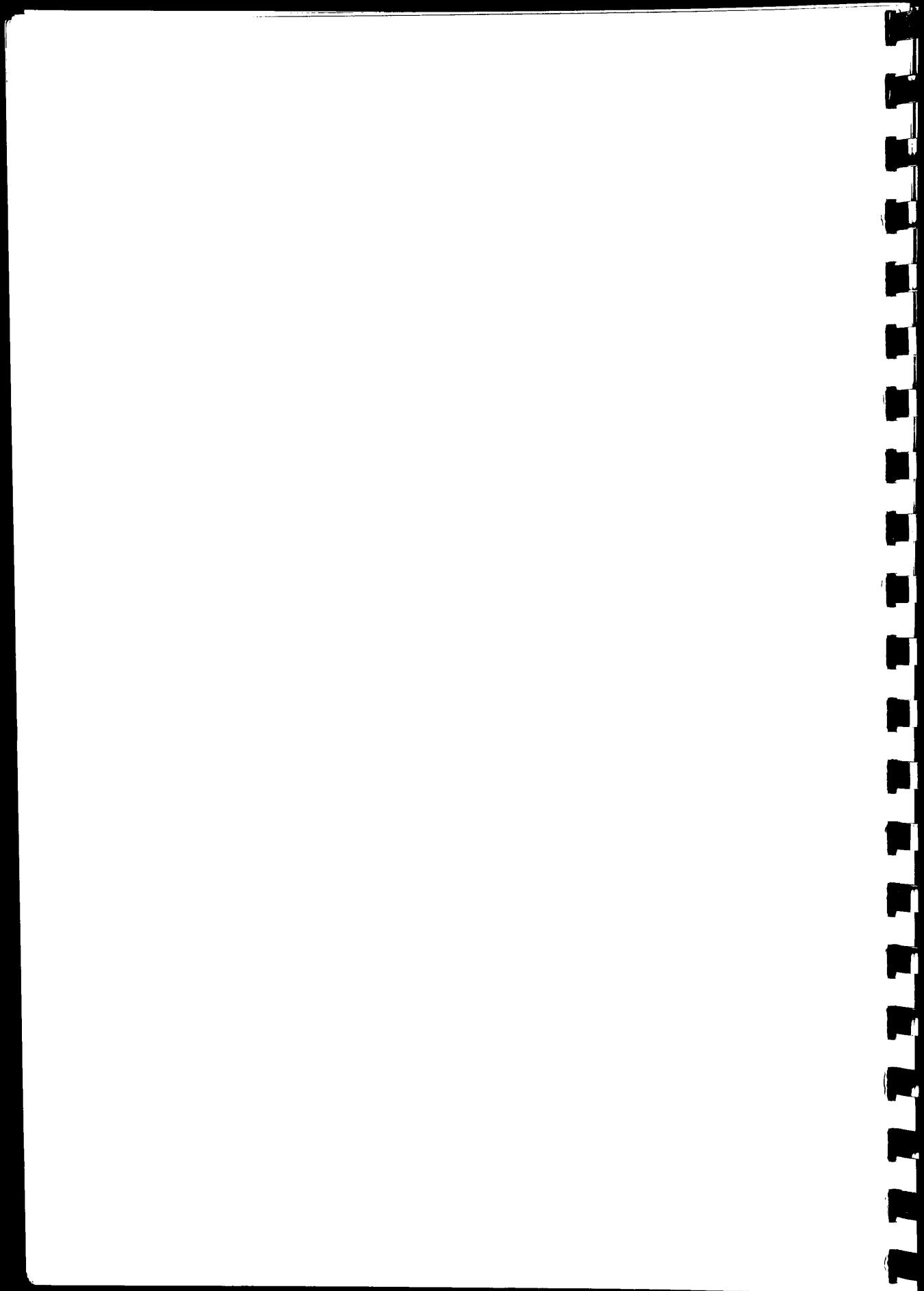
SECTION FOUR

PART ONE

Health Problems

Health and illness are important subjects for conversation in a hospital. The domestic needs to be able to chat in a general way to the patients about their health, and to respond sympathetically and with understanding.

In addition, your students may have health problems of their own, and at some time or another may be faced with the necessity of communicating in English with a doctor.



CONTENTS

	page
<u>Part One: Health Problems</u>	3
4.1.1 Ailments and minor health problems	4
4.1.2 Showing uncertainty	5
4.1.3 Describing what's wrong to the doctor	6
4.1.4 Sympathising with patients	8
<u>Part Two: More words of quantity: "enough" and "too much"</u>	9
4.2.1 Enough	10
4.2.2 Satisfying the patients' wants	10
4.2.3 It's too much	11
<u>Part Three: Messages</u>	13
4.3.1 Fetching and delivering	14
4.3.2 From and for	15
4.3.3 Reported speech	17
4.3.4 Delivering the message	18
4.3.5 Delivering messages for the patients	19
4.3.6 Delivering a message: a practical assignment	20
<u>Part Four: Making beds</u>	22
4.4.1 Bed linen	23
4.4.2 Some useful verbs	23
4.4.3 Can and can't	24
4.4.4 Listening practice	26

	page
<u>Part Five: Offering help and asking for help</u>	27
4.5.1 Asking for help	28
4.5.2 Offering help	29
 <u>Part Six: Comparison of adjectives</u>	 31
4.6.1 Better and worse	32
 <u>Part Seven: The sequence of jobs</u>	 33
4.7.1 The daily work schedule	34
4.7.2 Before and after	35
4.7.3 Before in instructions	35
4.7.4 Understanding the sequencing of a job	36

4.1.1 AILMENTS AND MINOR HEALTH PROBLEMS

Language Function: Talking about your own ailments in general and responding to other people's grumbles about theirs.

Structure: You'd better....

Vocabulary: Revision of parts of the body

Vocabulary for common ailments.

Revise parts of the body learned in 2.3 and teach any that were not taught then.

Now present and practise the following dialogue:

Tape Item 29:

Joyce: Ooh!

Mrs Cooper: What's the matter, Joyce?

Joyce: I don't feel very well.

Mrs Cooper: What's wrong with you?

Joyce: I've got a headache.

Mrs Cooper: Oh dear. You'd better go and take an aspirin.

Listen.

Listen and repeat.

Listen and take Joyce's part.

Using mime, photographs etc, present the following:

What's the matter?

I've got a cold.

I've got flu (use as a general term).

I've got a temperature.

I've got a headache/backache/toothache/earache/stomach ache.

I've got a bad leg/finger.
I feel sick.
I feel faint.

Get students to act the different ailments and practise the above expressions.

Now present responses to the grumbles as follows:

Oh dear!
You'd better take an aspirin.
You'd better go to staff health.
You'd better sit down.

Practise in pairs and in groups, students taking it in turns to complain and to advise.

4.1.2 SHOWING UNCERTAINTY

Language Function: Making tentative statements.

Structure: Think and hope as main verbs with following subordinate clauses.

Equipment: Small objects wrapped in cloth or paper.
Cards with £1 written on them, and blank cards.

Show the class a small object wrapped in a cloth, and introduce I think as follows:

Look. What's this? I don't know. I'm not sure.

I think it's a pen (then feel it again)

No, I don't think it's a pen. I think it's a pencil.

Repeat this sequence with several objects, then give to the class different objects wrapped up in cloth or paper, and get them to guess the contents:

I think it's an apple/orange etc.

Now introduce hope. Show the class blank cards with £1 written on them. Put the cards in a box and shake it. Now pick out a card, and before you look at it, say:

I hope it's £1.

Get the students to pick cards out of the box and say
I hope it's £1.

Now present and practise the following dialogue.

Tape Item 30:

Joyce: Oh Mrs Cooper. I feel terrible.
Mrs Cooper: What's the matter, Joyce?
Joyce: I think I've got flu.
Mrs Cooper: Really?
Joyce: Yes. I think I've got a temperature.
Mrs Cooper: Oh dear, Joyce. I hope it isn't flu.
Joyce: Ooh....
Mrs Cooper: Well you'd better go home, dear.

Listen.

Listen and repeat Joyce.

Listen and take Joyce's part.

4.1.3 DESCRIBING WHAT'S WRONG TO THE DOCTOR

Context: The student as a patient in a consultation with a doctor.

Language Function: Understanding and answering accurately questions from a doctor about your own illness.

Structure: Questions with where, what, when and how long.

How long is new.

Several unfamiliar tenses are used in this kind of consultation. Don't go into details, but go for as much comprehension as possible on the other clues in the sentence.

Vocabulary: pills, medicine, injection, pain, hurt.

Equipment: pills, liquid medicine bottle, injection.

Present and practise the following dialogue.

Tape Item 31: (available)

Joyce: Morning, doctor.
Doctor: Come in. What can I do for you?
Joyce: I think I've got flu.
Doctor: Oh? Why?
Joyce: Well, I've got a headache, and a backache, and I've got a temperature, and I feel sick.
Doctor: Oh dear. How long have you had it?
Joyce: Two or three days.
Doctor: Have you taken any medicine?
Joyce: No.
Doctor: You'd better go to bed. Stay in bed for a few days. I'll give you a certificate.
Joyce: Thank you, doctor.

Listen.

Listen and repeat Joyce.

Simulate consultations, with yourself taking the role of the doctor, presenting such questions as:

Where does it hurt?
When did the pain start?
What medicine have you taken?
How long have you felt sick?
Are you sleeping properly?
Have you had any injections? etc.

Make sure that the questions are properly understood and practise them with different students. Vary the questions, and try to insist on accurate answers. Go for maximum comprehension and accuracy. There is no point in getting the students to repeat or learn the questions.

4.1.4 SYMPATHISING WITH PATIENTS

Context: The domestic often works near and around people who feel ill and depressed. It is important for them to be able to listen with understanding and make sympathetic noises.

Language Function: Expressing sympathy.

Using slide A21, present and practise the following dialogue:

Tape Item 32:

Joyce: How's your back today, Mr Evans?
Mr Evans: Oh terrible Joyce. I feel really bad today.
Joyce: Oh dear. Well, I hope you feel better soon.
Mr Evans: Oh, I don't know.
Joyce: Well; it's tea'time soon.
Mr Evans: Mm.
Joyce: You have a nice little sleep before tea.
Mr Evans: Yes.
Joyce: I'll come and see you later.
Mr Evans: OK Joyce.

Listen.

Listen and repeat Joyce.

Listen and take Joyce's part.

Now get the class in groups to practise taking the parts of the patient and domestic.

Die *Lehrbucher* sind nicht nur sehr leicht
zu verstehen, sondern auch sehr
praktisch, da sie die *Lehrbucher* sehr
gern für die Praxis benutzen.

卷之三十一

Consequently, the first step in the analysis of a complex system is to identify the components and their interactions.

1. *Leucosia* *gigantea* (Müller) *Leucosia* *gigantea* (Müller)

132 - 1991 - 1000000

... and the
... and the
... and the

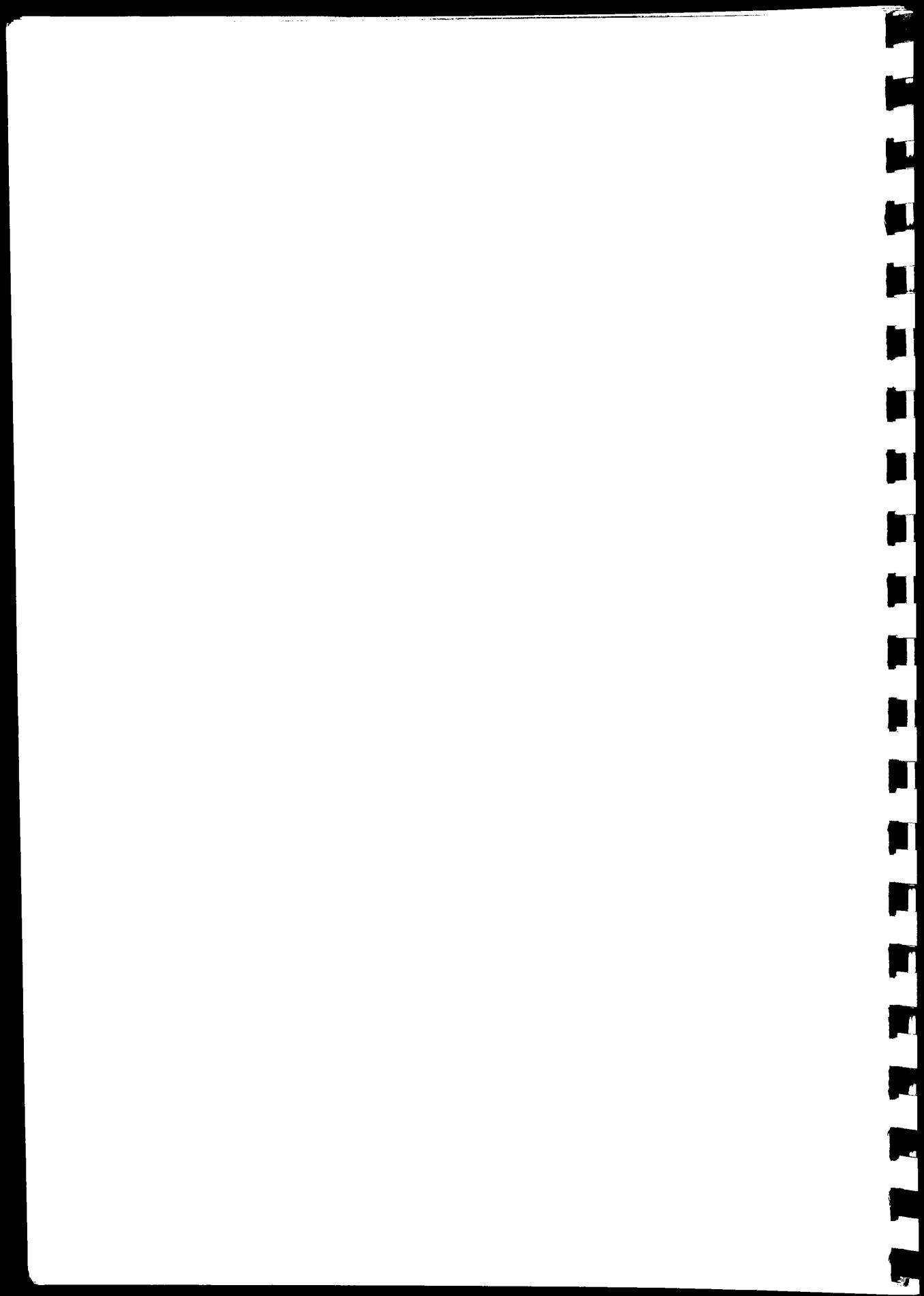
3.3.3.3. Spatial scaling of square mapple ant tag web

SECTION FOUR

PART TWO

More words of quantity: "enough" and "too much"

A domestic constantly needs to understand instructions on quantity, and to ask for guidance, particularly where she is involved in serving out food. A clear grasp of the meaning and use of these phrases is therefore essential in her work, as well as being very useful in a general sense.



4.2.1 ENOUGH

Structure: Adverb of degree - enough.

Concept: enough
cost (verb)

Equipment: A few coins, or cards with amounts of money written on them.

Present enough using your coins or money cards as follows:

Example I want to buy a coat.

It costs £10.

Look, I've got £7.

It isn't enough.

I want to buy a jumper.

It costs £6.90.

I've got enough.

Repeat the presentation, using different amounts of money and talking about different purchases.

Now give each member of the class a money card or a coin. Lay out on the table several small items, and get the students to ask about the items as follows:

Student: How much does the pen cost?

Teacher: 10p. Have you got enough?

Student: (checking their amount of money) Yes/No.

4.2.2 SATISFYING THE PATIENTS WANTS

Context: Serving out food etc to the patients.

Language Function: Enquiring about quantities.

Structure: Practice with enough.

Equipment: Rice, barley, or some other substance that pours easily, and a cup or jar for each student.

Demonstrate with one student. Ask them:

How much rice do you want?

They answer:

A lot, or A little.

Pour the rice gradually into the student's cup or jar and keep asking

Is it enough?

until they say

Yes.

Now practise in groups. The students take turns to pour out the rice and ask each other:

Is it enough?

4.2.3 IT'S TOO MUCH

Context: As in 4.2.2 grain

Concept: Too much

Equipment: Jars and grain.

Slide A22.

Present too much in an answer. Mark a jar in the middle with a wax crayon line and fill it above the line with grain. Get a student to offer you the full jar and refuse it, saying: It's too much.

The student must pour out some of the lentils and keep offering them to you until the amount is at the line.

Practise with many different jars marked in different places. If the grain comes below the mark you say:

It's too little
and pour some more in. If the grain comes above the mark you say
It's too much
and pour some out.

Practise in pairs and groups.

Relate these concepts to serving patients' food by showing slide A22.

Present and practise the following dialogue.

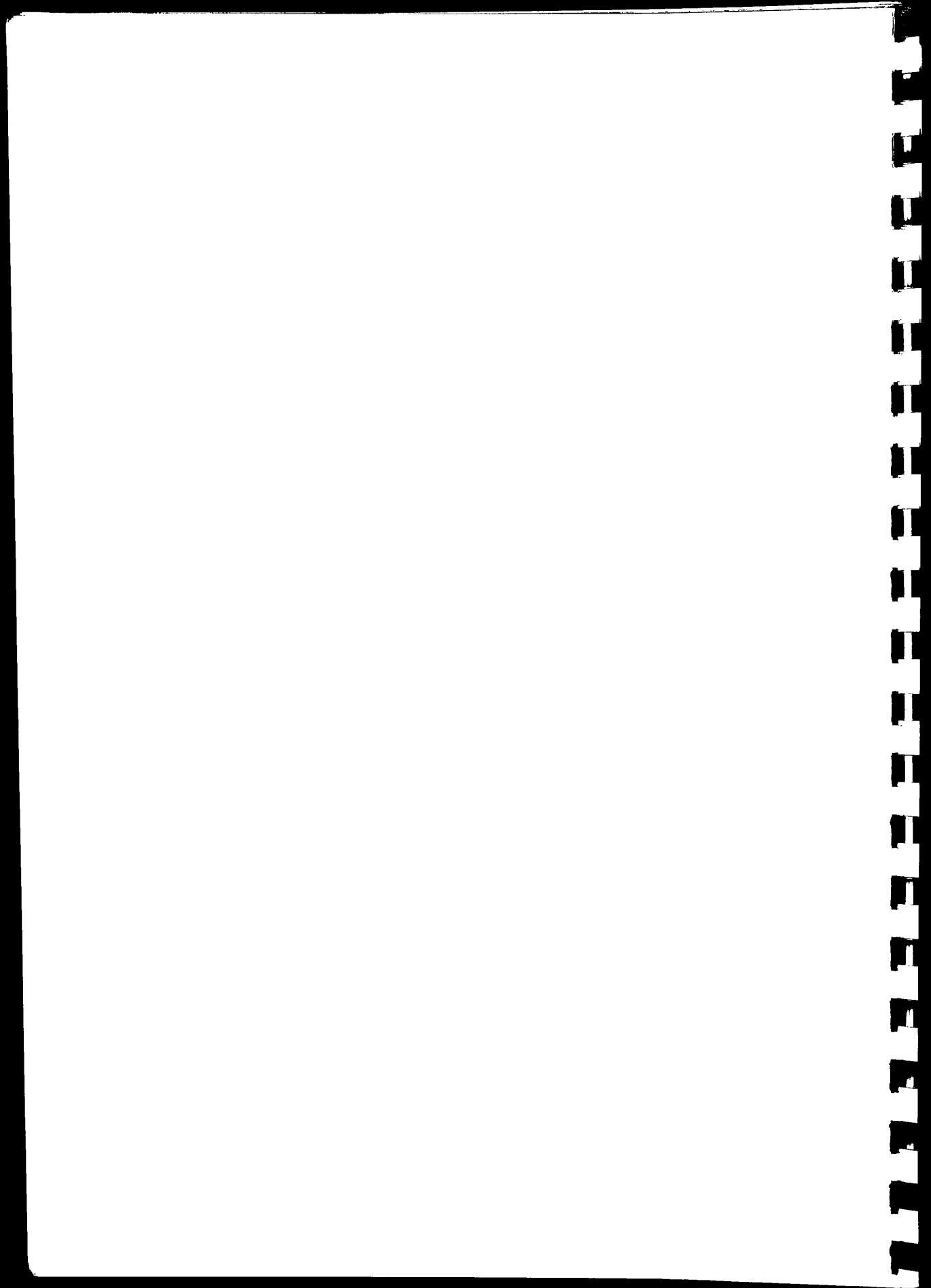
Tape Item 33:

Mr Evans: Is that my dinner, Joyce?
Joyce: Yes. Is it all right?
Mr Evans: It's too much! I can't eat three potatoes!
Joyce: Oh all right. I'll give you two.
(sounds of spoon on plate)
Joyce: Is that all right now?
Mr Evans: That's fine, thank you Joyce.

Listen.

Listen and repeat.

Listen and take Joyce's part.



SECTION FOUR

PART THREE

Messages

This Part contains some important structural and vocabulary items and demands a new and complex skill from the students: transposing a message received into the correct form in which it should be delivered.

The importance of message taking in the ward and round the hospital is so great that the material in this Part should be worked over very thoroughly. If the students can learn to take messages accurately in real situations their confidence and motivation will be greatly increased.

ЯКОВ МИХАЕЛ

ENGLISH TRADE

2009-2010

1. **Mediul bnp întrucât într-o anumită perioadă** poate fi folosit ca
2. **opozant** și trebuie să nu se îluzioneze că acest lucru va fi posibil
3. **într-o perioadă** să îl înțeleagă și să îl respecte.

... bawas onto brow soft as powder eggplant in season
... so fresh raw and blanched taste like a kitten
... a delicious vegetable eaten at small local restaurants
... a vegetable variety of *How nostrarum* (How nostrarum)

4.3.1 FETCHING AND DELIVERING

Context: The domestic is frequently required to fetch or deliver items in and outside the ward. Accuracy is essential.

Language Function: Accurate comprehension of instructions to fetch or deliver. A verbal response given to show that the direction is understood.

Structure: The domestic needs to isolate out the essential details from an instruction that may be given in a very complex way.

Vocabulary/Concept: Verbs of fetching and delivering.

Equipment: Small items in common use on the ward.

Present these verbs:

fetch, bring, take

in a sequence of instructions as follows:

Please fetch five cups from the table.

Bring two to me.

Take three to Mrs Alves.

Practise until the verbs are clearly grasped.

Now present collect and deliver in instructions as follows:

Please collect the cups from Mrs Alves and Mr Eugenio.

Deliver one to Mrs Khadijah and one to Mrs Mendes.

As you practise these verbs, incorporate them increasingly into longer and more complex sentences:

Examples:

Can you possibly fetch that box for me?

Could you please deliver these papers to Mrs X and Mrs Y.

Would you please bring me another cup?

I wonder if you'd take this plate over to Mrs Gada.

Make sure the students pick out the verb and the object from the sentence and that they repeat it:

Teacher: Can you possibly bring me another cup?
Student: Bring a cup.

With less confident classes, start with the simpler instructions and build up slowly into more complex ones, in which the same verbs occur. If the students panic at the longer sentences, get them to say

I beg your pardon?

And then repeat the instruction.

eg Teacher: Would you fetch that book for me please?
Student: I'm sorry I didn't understand.
Teacher: Would - you - fetch - that - book - for - me - please?
Student: Fetch that book. All right.

Game: Take and Fetch

The class is divided into groups and each group has a messenger. Individuals in each group give the messenger small objects and say:

eg Can you take this to Group A please?

The messenger repeats the essentials of the message.

eg Take this to Group A
and delivers the object.

When the teacher calls a halt, the groups claim their possessions again, saying to the messenger:

eg Can you fetch my pen from Group B please? etc.

4.3.2 FROM AND FOR

Context: Delivering items, messages etc.

Vocabulary/Concept: The distinction between from and for.

Equipment: Small items.

Teach from first, making sure it is very clearly established before for is presented. To present from, give small items to each member of the class, then act as a messenger yourself, passing items from one student to another saying:

This is from Mrs X. etc.

Get the students to take turns as messengers.

Present for as follows:

Show an object to the class and say:

This is for Mrs X.

Then give it to Mrs X, saying:

This is for you.

When these forms have been thoroughly established they can be practised together.

Game:

The class sits in a horseshoe with the teacher at one end. The teacher hands an object to the student next to him, and says

This is for Mrs X, (mentioning the name of the student at the other end of the horseshoe).

The student who has been given the object asks

Who from?

And the teacher answers

From (using his own name).

The object is passed right round the horseshoe with the following dialogue:

This is for Mrs X.

Who from?

From John (the teacher's name).

Present the following dialogue, for listening only.

Tape Item 34:

Girl's voice: Hey, Joyce!
Joyce: Oh, hello.
Girl: I've got something for you.
Joyce: For me?
Girl: Yes, for you.
Joyce: Who from?
Girl: From Mr Evans.
Joyce: From Mr Evans? For me? Ooh!
Girl: Go on, open it.
(sound of paper crackling)
Joyce: Oh how lovely! It's a box of chocolates!

For listening only.

4.3.3 REPORTED SPEECH

Context: Many transactions on the ward may be of a purely verbal kind, delivering spoken messages rather than objects.

Language Function: Reporting.

Structure: Reported speech.

Revision of pronouns.

The change of pronouns to the third person in reported speech causes particular difficulty for Asian learners. In Punjabi, Hindi and Urdu, for example, no change of pronoun takes place when reporting what someone has said.

Equipment: Simple objects.

Revise the pronouns in section 1.7, especially the object pronouns. Make sure in particular that students understand that "him" and "her" can be substituted for names. Reinforce this simply thus:

Mrs X, can you please give Mrs Y this cup?

Can you please give her this cup?

I want to give Mr A this pen.

I want to give him this pen.

Now present short sequences as follows:

Teacher: Where do you live, Mrs X?

Mrs X: In Hounslow.

Teacher: (Reporting to the class) She says she lives in Hounslow.

Teacher: Do you like sugar in your tea?

Student: Yes.

Teacher: She says she likes sugar in her tea.

Whispering game

The teacher whispers a sentence to one student who reports it to the whole class. Repeat in groups.

4.3.4 DELIVERING THE MESSAGE

Context: Domestics are often asked to deliver verbal messages. These messages may be urgent, as when a patient asks the domestic to call for a nurse, or they may be fairly complex as when someone on the ward going off shift leaves a verbal message for the next person coming on.

Language Function: Receiving and delivering a verbal message.

Structure: Reported speech.

Teach the term "message" and the formula:

I've got a message for Mrs X.

Then, lead up to simple messages being passed in the classroom. Insist that the important parts of the message are repeated to the giver of the message, as in item 4.3.1. Present and practise exchanges of the following type:

Teacher: Mrs Abel, I've got a message for Mrs Mendes.

Mrs Abel: Yes.

Teacher: Can you tell her to come and see me, please.

Mrs Abel: Mrs Mendes to come and see you.

Teacher: That's right.

Mrs Abel: (crossing room to Mrs Mendes)

I've got a message from John (teacher's name).

Mrs Mendes: Yes.

Mrs Abel: He says can you come and see him, please.

When the message has been delivered, make sure it is carried out (eg in this case, Mrs Mendes crosses the room to see the teacher).

Examples of other messages to be practised in the classroom using the above pattern:

Can you ask Mr Jimenez to open the windows, please.

Can you tell Mr Hussein to go to the domestic manager's office, please.

Can you ask Mrs Ribiero to bring me a cup of tea.

Can you tell Mr Antonio that his wife is on the telephone.

etc etc.

4.3.5 DELIVERING MESSAGES FOR THE PATIENTS

Context: Relating the language learned in 4.3.4 to everyday situations on the ward when patients give messages to the domestics for nursing staff.

Equipment: Slides A23 and A24.

Using slide A23 show a message being received from a patient, then using slide A24 show the domestic delivering the message to the sister. Present and practise the following dialogue:

Tape Item 35:

Mr Evans: I say, Joyce!

Joyce: Yes, Mr Evans?

Mr Evans: I've got a terrible pain. Can you ask nurse to get me something.

Joyce: Ask nurse for something for your pain? All right
(sound of steps)

Joyce: Excuse me, nurse.

Nurse: Yes, Joyce.

Joyce: I've got a message from Mr Evans. He says he's got a pain.
He wants to take something for it.

Nurse: All right, Joyce. Thank you. I'll see him.

Listen.

Listen and repeat Joyce.

Listen and take Joyce's part.

Now using the slides as a prompt, initiate a general discussion on the message patients try to deliver through domestics. Some likely ones are:

Can you tell the nurse I can't eat this.

Can you tell the nurse I want a bed pan. etc etc.

Using suggestions from the class, practise delivering the messages properly.

eg Excuse me, nurse, Mr Jones says he wants a bed pan.

Excuse me, nurse, Mr Evans says he feels sick. etc.

4.3.6 DELIVERING A MESSAGE: A PRACTICAL ASSIGNMENT

Context: The domestic and a supervisor.

Language Function: The student takes a "real" message to the supervisor from the teacher.

Equipment: Duplicated letter to supervisor involved.

Forewarn supervisory staff by letter if necessary that students will be bringing them a message within the next week. They should be asked to treat it naturally without giving away the fact they have been prepared for it. See below a facsimile of the kind of letter suggested.

Give each member of the class a different message to be taken to a supervisor. Establish in each case which supervisor has most to do with each domestic, before you decided who to send your messages to.

Examples of messages:

- 1 Can you ask Mrs X (name of the supervisor) to send me some spoons and forks.
- 2 Can you ask Mrs X " " " " to send me some dish cloths.
- 3 Can you ask Mrs X " " " " when she wants to see me on Monday.
- 4 Can you ask Mrs X " " " " to fill in this little form.
- 5 Can you ask Mrs X " " " " when her off-day is.
etc.

Practice the messages very thoroughly, before expecting the students to deliver them.

Letter:

Dear

In the English Language Classes we have been teaching the domestics to take messages.

As a little practice exercise, I am giving the domestics a message for you, asking her to ask you for a small object, which she must bring along to the language class on Monday.

I do hope this won't inconvenience you in any way, and I would be very grateful for your co-operation.

Yours sincerely,

(Teacher's name)

SECTION FOUR

PART FOUR

Making Beds

This Part may be appropriate only in psychiatric or care hospitals. In general hospitals, nurses are responsible for bed making. Bed linen, however, may be taught to most domestics, as sorting bed linen, fetching clean linen, and disposing of dirty linen may be part of the domestic's job. Item 4.4.3 should also be taught in every case.

1. **What is the "real" reason for the increase in**

• 110 •

the following 100 patients were included in the study.

ЛУЧШИЕ МОДЕЛИ

ALLES BÄR

Wikipedia is a free, open-source, and user-edited encyclopedia.

1. **What is the main message of your post?**
2. **What did you want to say or express?**
3. **What type of audience do you want to be addressed to?**
4. **What do you want to be communicated?**
5. **Who are the people you want to reach?**

19. 1996.05.26. 10:00-11:00. 1996.05.26. 10:00-11:00. 1996.05.26. 10:00-11:00.

1. *Leucosia* (Leucosia) *leucosia* (L.) (Fig. 1)

20. *Leucania* *luteola* (Hufnagel) *luteola* (Hufnagel)

1. 1990 年 1 月 1 日起，对个人买卖股票所得收入，暂免征收个人所得税。

1. *Leucosia* (Leucosia) *leucosia* (L.) (Fig. 1)

10. *Leucosia* (Leucosia) *leucosia* (Linnaeus) (Fig. 10)

1. *Leucosia* *leucosia* (L.) *leucosia* (L.) *leucosia* (L.) *leucosia* (L.)

4.4.1 BED LINEN

Context: The linen used on the ward.

Vocabulary: Items of bed linen.

Equipment: Several examples of each type of bed linen borrowed from a ward.

Present and practise the following items:

Tape Item 36: linen, pillow, pillowcase, sheet, towel, blanket, draw sheet, counterpane and any extra items used in your hospital.

Present another with the items of linen.

eg another sheet
another pillowcase etc.

and revise more

eg two more sheets
three more towels etc.

Racing game

Divide the class into two teams. Put all the linen items on a central table. Call out the names of items with another or more. Members from each team race to give you the items called for.

eg Another towel!
Two more pillowcases!
Another blanket! etc.

4.4.2 SOME USEFUL VERBS

Context: Dealing with bed linen.

Vocabulary: Some useful verbs, simple and two-part.

Equipment: Bed linen.

Revise fetch.

Present and practise the following new verbs:

pull up, take off, put on, fold, change (as in change the sheets).

Using a table as a base, make up a bed with the linen, describing your actions with the above verbs.

eg Put the sheets on.

Now put the blankets on.

Fold the sheets back.

Change the sheets.

Take the blankets off. etc.

Lead up to the students understanding the following instructions:

Tape Item 37:

Can you change the sheets, now please.

First, take the dirty linen off the bed.

Now fetch the clean linen.

Put clean sheets on the bed.

And now put a clean pillowcase on the pillow. Right.

Pull the blankets up and fold them back.

That's it.

Now put the counterpane on the bed.

Listen and repeat.

4.4.3 CAN AND CAN'T

Context: Where students are unable to do their work properly, it is very important for them to be able to give a reason. This can save time for supervision and release tension on the student's side.

Language Function: Giving an explanation for work not completed.

Structure: Modal verb can and negative form can't.

Pronunciation: European students in particular may have difficulty in hearing and reproducing the t in can't, and can and can't may be confused.

Equipment: Sets of cards for practice, furniture, food, crockery etc.

Present can't in a variety of situations. (Make sure that can't is well established before introducing can.)

I can't touch the light.

I can't move the table.

I can't give you any money. (show empty purse)

When can't is well established, teach can. Using vocabulary cards, turn some face down on the table and leave the others face up.

Ask: Can you see the table?

The students answer: Yes, I can

or No, I can't.

Practise with individuals and then in groups.

Now relate can and can't to the ward. Show B slides illustrating a ward in your hospital.

Discuss with the students what the domestic can and can't do.

eg She can't lift the cupboard. It's too heavy.

She can open the window.

She can't move the fridge. etc.

With a multi-lingual group, it might be of interest here to discuss the languages the class can speak. Ask "Can you speak Spanish/Hindi/Arabic" etc or "How many languages can you speak?"

4.4.4 LISTENING PRACTICE

This dialogue is for listening only.

Tape Item 38:

Noise of general work, banging etc.

Woman's voice from a distance: Oh Joyce! Can you change the sheets on bed 20, please?

Joyce: Yes, Mrs Cooper

(Talking to herself) Change the sheets - right. Where are the clean sheets? Oh yes, in the linen cupboard. Now. I take the dirty sheets off the bed (sounds of pulling etc) and put the clean sheets on. Oh dear. This one's torn. What shall I do? (Loudly) Oh Mrs Cooper!

Mrs Cooper: What's the matter?

Joyce: I can't use this sheet. It's torn.

Mrs Cooper: Fetch another one then!

Listen.

SECTION FOUR

PART FIVE

Offering help and asking for help

This Part contains little new structural material except questions with How. The main aim of these items is to increase confidence in initiating language in situations where the domestic has difficulty, or is uncertain.

1970-1971 322

1970-71

1970-71

1970-71

1970-71

1970-71

1970-71

4.5.1 ASKING FOR HELP

Context: It is important for students to gain enough confidence to ask for the help they need, rather than wait until something goes badly wrong.

Language Function: Initiating. Asking for help and specifying the difficulty.
Explaining what's wrong.

Structure: A set formula for asking for help.

Questions with How.

Vocabulary: Various containers.

Equipment: A set of containers that open in different ways eg a screw top jar, a cardboard box, a tin needing a tin opener, a bottle needing a corkscrew, and a bottle needing a bottle opener.

Present and practise the following formula:

Excuse me. Can you help me please?

in situations where non-verbal help is needed

eg lifting a table
 picking papers off the floor
 re-arranging chairs
 sorting coloured cards etc.

When students have thoroughly mastered the formula, get them to ask for help, with an explanation following:

eg Excuse me, can you help me please?
 I can't move this cupboard.
 I can't find my pen.

Then, present the vocabulary for the different containers and get them to say:

I can't open this tin.
I can't open this bottle. etc.

Next, present questions with How as follows. (How long and how much are already known)
Showing the containers, ask:

How do I open this tin?

Accept any intelligible answer or action, but stress the point that each container is opened by a different method.

Practise the questions with how very thoroughly in the class and in groups, giving each group a set of containers to ask about and to open. Broaden the use of how by asking questions on each of the sets of instructions learned so far:

eg How do you clean the floors?
 How do you wash up?
 How do you make the beds? etc.

Give out to the students kitchen gadgets

eg a tin opener
 a potato peeler
 a tea strainer
 a cheese grater
 an egg whisk
 a coffee grinder etc.

The students ask each other about their gadgets as follows:

Excuse me. Can you help me please?

How do I use this?

Get the other student to demonstrate.

4.5.2 OFFERING HELP

Context: With patients, nursing staff etc on the ward.

Language Function: Offering help – showing politeness.

Structure: Revision of pronouns I and you.

Equipment: Slide A25.

Present the reverse situation to 4.5.1, and show how to offer help. Get a student to struggle with some difficult task, eg picking up a lot of pieces of equipment all at once, and then offer help as follows:

Can I help you?

Take this opportunity of practising the pronouns I and you very thoroughly so that the formulae in this and the previous item become more deeply understood.

Get the class to practise offering help in a variety of different situations:

eg helping a lame person
 carrying something heavy
 opening a door when someone is carrying something bulky
 putting something on a high shelf etc.

Use slide A25 to relate this to the patients.

1. What is the meaning of the received sentence?

2. What is the meaning of the sentence?

3. What is the meaning of the sentence?
4. What is the meaning of the sentence?
5. What is the meaning of the sentence?

6. What is the meaning of the sentence?
7. What is the meaning of the sentence?

8. What is the meaning of the sentence?

9. What is the meaning of the sentence?
10. What is the meaning of the sentence?

11. What is the meaning of the sentence?

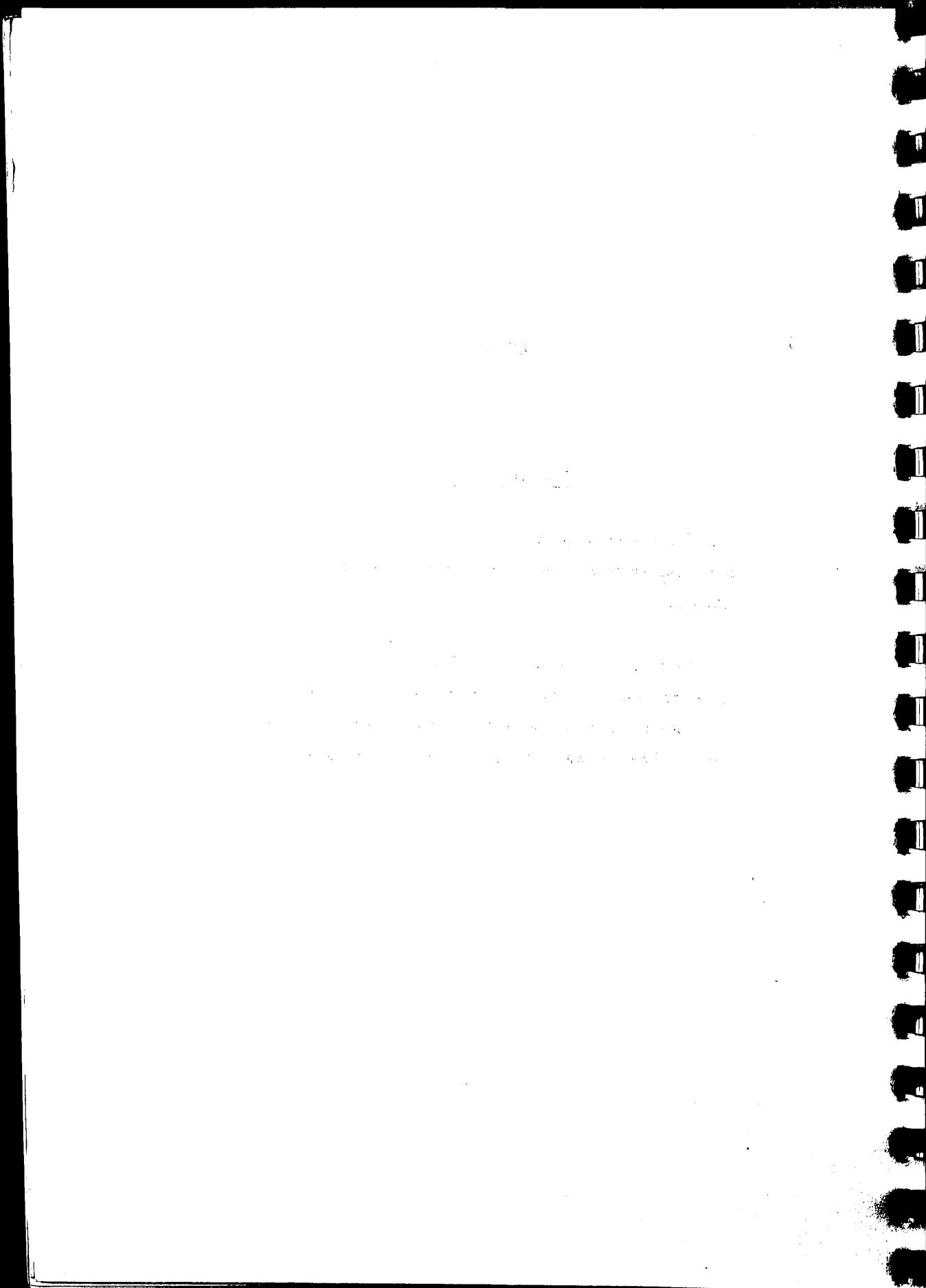
SECTION FOUR

PART SIX

Comparison of adjectives

This very short section contains only one item introducing better and worse which we have found to be of importance in the domestic's situation.

We have not given suggestions here for teaching other comparative forms, as we have not found any particular need for them. If you feel that the course is incomplete without introducing comparative forms, however, this would be the best place to insert your own material.



4.6.1 BETTER AND WORSE

Context: Talking about patient's health.

Structure: Comparative forms better and worse.

Equipment: Flashcards of faces.

Using the appropriate flashcards, work through the following description:

Mr Evans felt alright at breakfast.

At lunchtime he felt worse.

At tea-time he felt much worse.

But at dinner time he felt better.

And at bed time he felt much better.

Present and practise the following dialogue:

Tape Item 37:

Joyce: How are you today, Mr Evans?

Mr Evans: Much worse, Joyce.

Joyce: O dear. You were better yesterday.

Mr Evans: Yes, but I'm worse today.

Joyce: Oh well, I hope you'll feel better soon.

Listen.

Listen and repeat Joyce's part.

Listen and take Joyce's part.

Fig. 1 LETTER AND WORD

Consonant following upon a vowel in a word

SECTION FOUR

PART SEVEN

The sequence of jobs

The sequencing of work can often cause problems when language is a difficulty. In this Part, before and after are taught as sentence connectors to explain the sequence of work. If students find this difficult, go for accurate comprehension rather than active use of before and after.

卷之三

MATERIALS AND METHODS

1. *Leucosia* *leucosia* (L.) *leucosia* (L.) *leucosia* (L.) *leucosia* (L.)

1970-1971: *Journal of the American Statistical Association*, 66, 100-105.

¹⁰ See, for example, the discussion of the "right to be forgotten" in the European Union's General Data Protection Regulation (GDPR), Article 17(1).

1.1.2. *Constituted*

4.7.1. THE DAILY WORK SCHEDULE

Context: Each hospital has its own routine and order of jobs to be done. Find out what the normal routine is in your hospital.

Concept/Vocabulary: Descriptions of different tasks.

Equipment: Slides from series A or B of the different jobs done during the day.

Chart of clock faces to be prepared specially showing the times when jobs are done.

Introduce a description of the daily routine in your hospital with slides.

eg First Joyce cleans the toilets.

Then she cleans the baths.

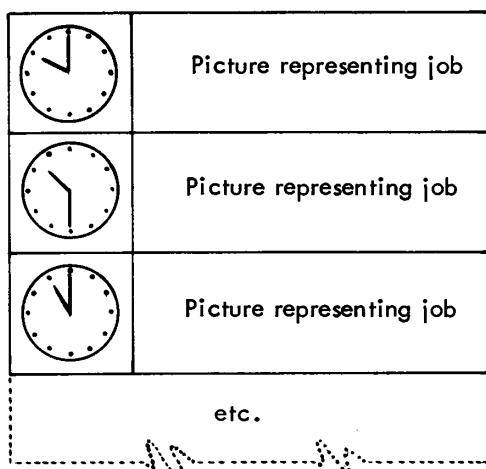
she collects the water jugs..

she washes up the breakfast dishes.

she hoovers the ward.

she goes off for coffee.

Establish the approximate time when different jobs are done and make a chart of clock faces showing the times. Use slides from series A and B to present each job or make flash cards to represent the different jobs to be pinned up alongside the clocks.



Practise as follows:

What happens at 10 o'clock?

She washes up the breakfast dishes.

etc

4.7.2 BEFORE AND AFTER

Context: The sequencing of different jobs.

Structure: Before and after used as sentence connectors.

Revise item 2.1.6.

Now, refer to the clock chart and present the following sentences:

eg Joyce cleans the baths after she cleans the toilets.

She washes up the breakfast dishes before she hoovers the ward.

etc.

Ask questions like the following

eg When does Mary collect the water jugs?

And get the students to answer using before and after

eg Before she washes up the breakfast dishes.

etc.

4.7.3 BEFORE IN INSTRUCTIONS

Language Function: Understanding a corrected instruction.

Structure: Before used with instructions.

Give a student a simple instruction

eg: Can you take this cup over to Mrs X, please?

As she starts to carry it out, stop her as follows:

Oh, just a minute! Can you take this plate to Mrs Y before you take the cup to Mrs X please?

Practise with similar sequences.

Examples:

Please can you wipe the table before you wipe the chair.

Please show this picture to Mrs X before you give it to Mrs Y.

Please ask Mrs Alves to come and see me before you go.

Please open the window before you sit down. etc.

4.7.4 UNDERSTANDING THE SEQUENCING OF A JOB

Language Function: Comprehension of the sequencing of jobs.

Present and practise the following dialogue:

Tape Item 38:

Mrs Cooper: Joyce!

Joyce: Yes, Mrs Cooper?

Mrs Cooper: Please can you wash the cups and saucers before you wash the cutlery?

Joyce: I wash the cups and saucers before I wash the cutlery?

Mrs Cooper: That's right.

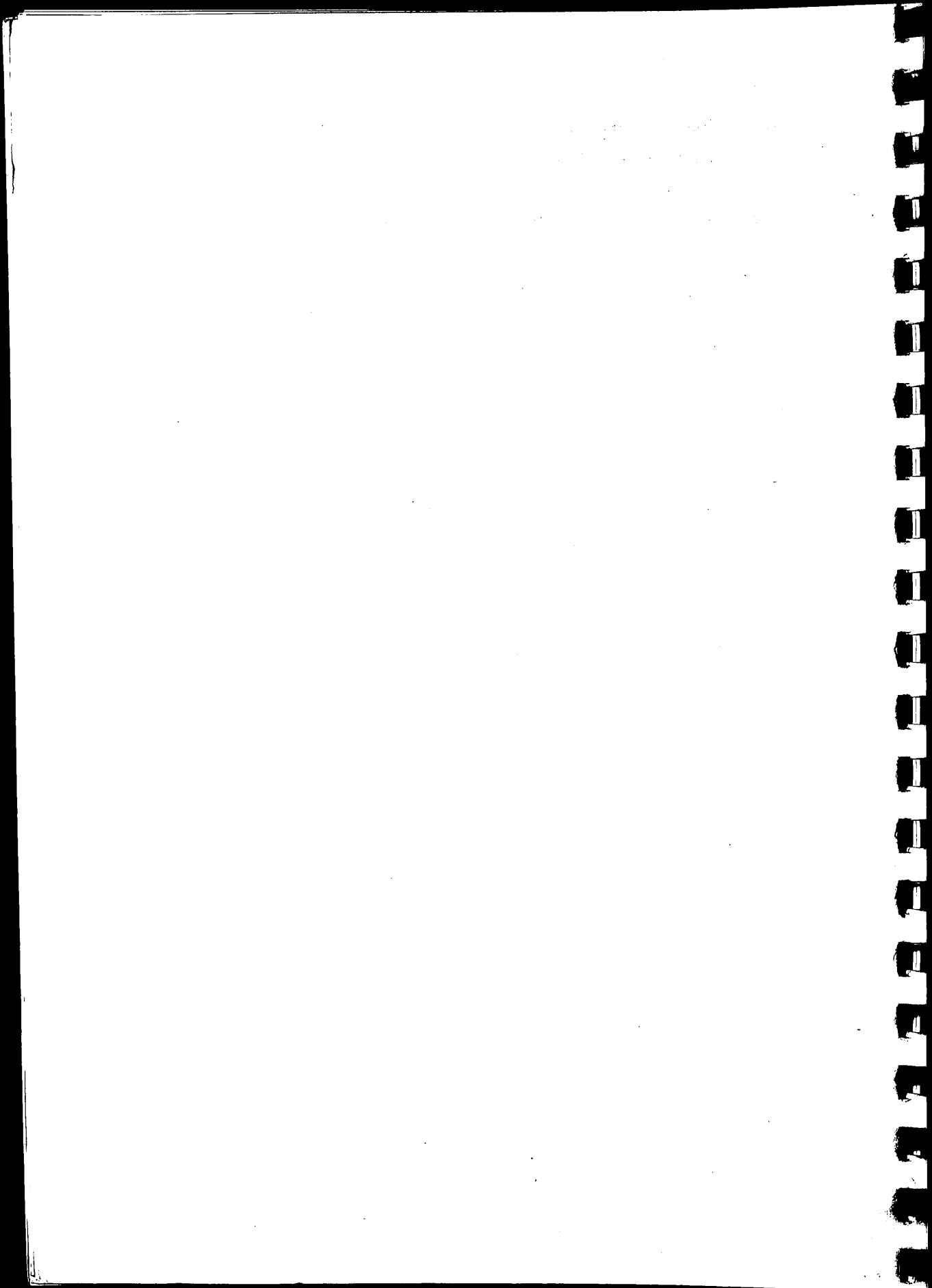
Joyce: So I wash the cups and saucers first?

Mrs Cooper: That's right, dear.

Listen.

Listen and repeat.

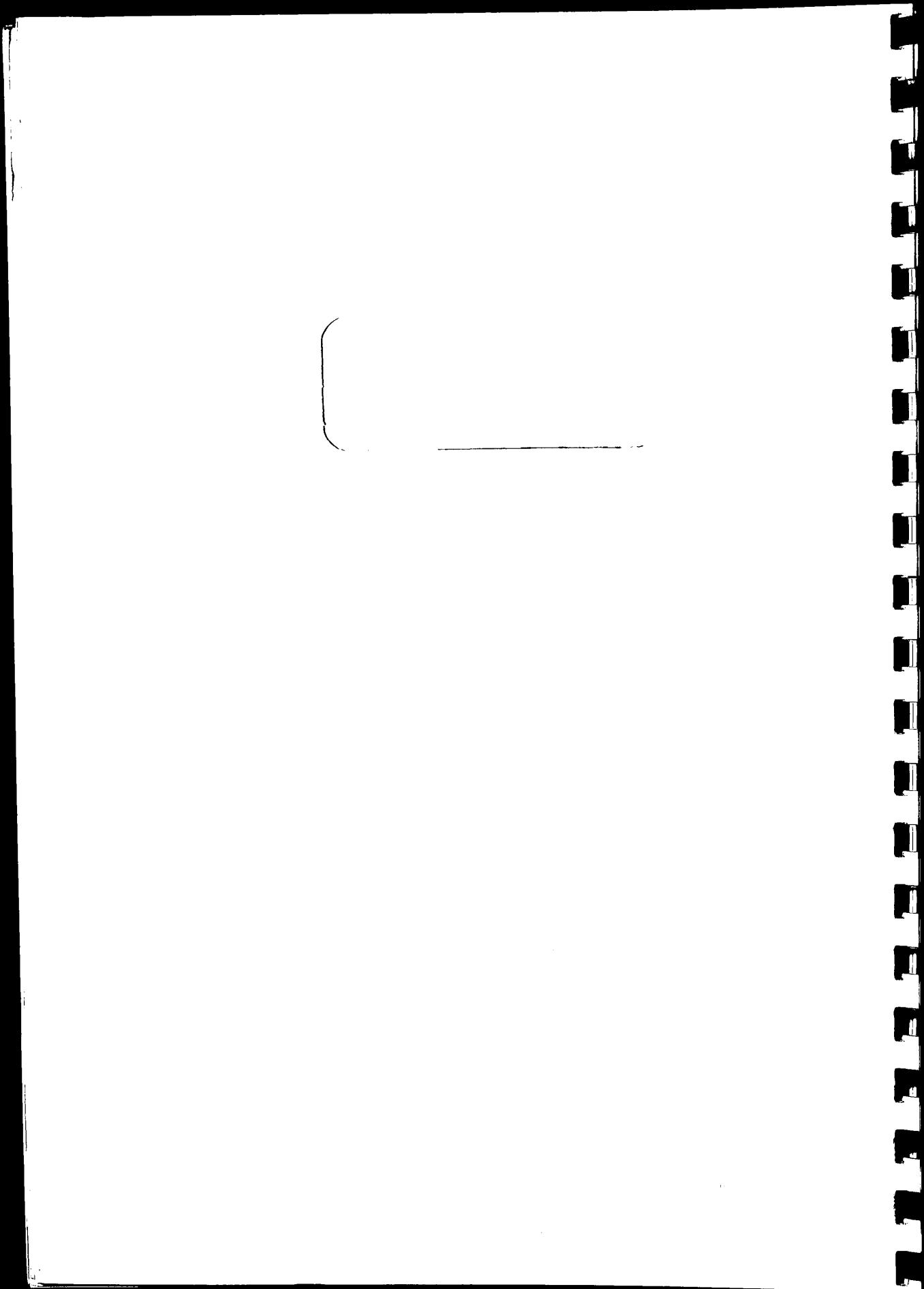
Listen and take Joyce's part.



English for Domestic staff

SECTION FIVE





English for Domestic staff

SECTION FIVE

An English language training course

for

overseas domestic staff

negative for gamma

SECTION 515

negative for gamma

515

negative for gamma

CONTENTS

	page
<u>Part One: The Year</u>	3
5.1.1. Months and Seasons	4
5.1.2. Dates and Years	4
5.1.3. Birthdays	5
5.1.4. Festivals	6
5.1.5. Saying the right thing on special occasions	7
<u>Part Two: Giving Reasons</u>	9
5.2.1. Why and because	10
5.2.2. Good reasons and bad reasons	11
5.2.3. Asking for new equipment	12
5.2.4. Apologising, and giving reasons	14
<u>Part Three: Making special requests in the office</u>	16
5.3.1. Can I talk to you about my holiday?	17
5.3.2. Giving reasons for a special request	18
5.3.3. Complaints	18
<u>Part Four: The present perfect tense</u>	20
5.4.1. Saying what has happened	21
5.4.2. Accidents	22
5.4.3. Completing tasks	22
5.4.4. Present perfect with "yet"	24
<u>Part Five: Using the telephone</u>	26
5.5.1. Asking for someone on the telephone	27
5.5.2. Phoning in to report sick	27
5.5.3. Fetching someone to the telephone	28

	page
<u>Part Six: Some special aspects of behaviour in the hospital</u>	30
5.6.1. Talking in your own language	31
5.6.2. Noise in the hospital	32
<u>Part Seven: Dealing with officials</u>	33
5.7.1. Giving information about yourself to an official	34
5.7.2. Form filling	35
5.7.3. Meeting the union representative	37

SECTION FIVE

PART ONE

The Year

The way in which the British year is punctuated by certain festivals and seasons may be unfamiliar to your students. Europeans will be accustomed to the same kind of seasons and the Christian festivals such as Christmas and Easter. People from the Middle East or the Indian sub-continent will not only find the names of months and seasons more difficult, they will also be used to celebrating quite different festivals in very different ways.

5.1.1. MONTHS AND SEASONS

Context: Most students will have at least passive knowledge of the names of months especially if they have been in Britain for some time.

Structure: Questions with which

Vocabulary: months

seasons

ordinal numbers

Equipment: A calendar with large pictures relating to each month.

Using the calendar, teach the months of the year. European students will recognize them easily from the similarities in their own languages. Insist on accurate pronunciation of the English names for months.

Now present the seasons, illustrating with the pictures on your calendar:

spring

summer

autumn

winter

5.1.2. DATES AND YEARS

Structure: Use of ordinal numbers with dates.

Vocabulary: Years: eg 1971, 1975, etc.

Equipment: Calendar

Using the calendar, present ordinal numbers in dates:

eg January the first

February the twenty second etc.

Get the students to read the dates as you point to them.

Nor present the correct way of saying years. Write years on the blackboard or on a large piece of card and get the students to read them off:
eg 1965, 1932, 1915, 1902 etc.

Guessing Games:

The students work in groups, and guess the year in which the others arrived in England:

eg Student X: Did you come to England in 1968?
Student Y: No.
Student X: In 1969?
Student Y: No.
Student X: In 1971?
Student Y: Yes.

Finally get the students to read off complete dates etc as you write them on the blackboard or show flashcards:

eg 19th September 1971
3 March 1975 etc

5.1.3. BIRTHDAYS

Context: Birthdays may not have the same significance for your students as they have for the British. Indian students may not remember their date of birth off hand, while other nationalities may be more used to celebrating their Saint's Day than their birthday. Those who have children at school, however, may have encountered children's birthday parties. The aim of this item is to familiarize the students with English birthday customs.

Equipment: Photographs or pictures of a birthday celebration in your family.

Present birthday as follows:

My birthday is October 21st.

When is your birthday?

Now initiate a general discussion on birthdays. Start by describing some English customs, using photographs of your own or other pictures to illustrate.

eg giving presents

a cake with candles

the importance of the 21st birthday

Ask the students to talk about their customs, if in fact they celebrate birthdays.

Tape item 41: (for listening only)

This tape item is a recorded interview with a child of six, who answers questions about her birthday presents, the number of candles on her birthday cake etc. The language used should be well within the range of the students but they may need to listen to the item several times.

5.1.4. FESTIVALS

Context: Students from different religious and cultural backgrounds may celebrate festivals that are unfamiliar to the British. Muslims, for example, will celebrate Eid and end of Ramadan. Hindus and Sikhs will celebrate Diwali, among other festivals. Europeans may lay more stress on Easter than the British do. All your students will probably be aware of Christmas, but they may think that the word Christmas means Festival and may not realize that it refers to a particular festival.

Vocabulary: Names of festivals.

Initiate a discussion on festivals, using Tape item 42 as a starting point.

Tape item 42: (for listening only)

This item consists of two short interviews. In the first a woman answers questions about what she and her family did on Christmas Day, describes visiting her parents and parents-in-law, and tells what presents she received. In the second, a man describes his Christmas dinner, turkey, plum pudding etc. This might be a suitable moment to revise some of the food items learnt in Part Two. These taped interviews contain more difficult language than Tape item 41, and may need to be played through several times.

Use the tape item as a basis for talking about Christmas in general, and describe what you do in your family, showing photographs if you have any.

Ask the students the following questions:

What is your big festival?

What do you do?

What do you eat?

If supervisors are present, attach them to groups and get them to talk to the students about their festivals. Encourage the supervisors to describe their own Christmas festivities.

5.1.5. SAYING THE RIGHT THING ON SPECIAL OCCASIONS

Context: Special occasions, such as birthdays, festivals, engagements etc, demand certain set formulae.

Language Function: Responding with the normal formulae for a special occasion.

Present the normal formulae for a special occasion :

eg It's my birthday today.

Oh! Happy birthday!

I am getting married.

Oh! Congratulations.

I am having a baby.

Congratulations.

My father's passed away.

Oh, I am very sorry.

Tape item 43:

What's the matter Margery?

Oh Joyce, my father passed away last week.

Oh Margery, I'm very sorry.

(noise of crowd)

Hey listen, everyone! I'm getting married!

Ooh! Congratulations! Here, where's the champagne.

(corks popping; etc)

Listen girls, I'm going to have a baby.

(buzz of voices)

Oh lovely. Congratulations, dear.

(noise of crowd)

Hello everyone ! It's my birthday !

Happy birthday Joyce ! Lovely !

(singing together)

Happy birthday to you, Happy birthday to you!

Happy birthday dear Joyce, Happy birthday to you!

Listen

Listen and join in with the responses.

Follow-up activity: Teach Happy Christmas, Happy New Year and Happy Easter, if these occasions coincide with the duration of the course.

SECTION FIVE

PART TWO

Giving Reasons

This Part aims to help the student to give simple reasons and explanations . Item 5.2.4. is aimed specifically at the need to give reasons as a form of self-justification when under pressure .

5.2.1. WHY AND BECAUSE

Language function: Asking for and giving reasons

Structure: Questions with why
Statements with because

Vocabulary: like (verb)
borrow

Equipment: Pens and paper

Slips of paper with amounts of money written on them.

Articles of clothing, or pictures of articles of clothing.

Show the class pictures of clothing, or actual articles of clothing.

Ask the class:

Which dress/suit/shirt/sweater etc do you like best?

When you get an answer, ask :

Why?

and suggest possible reasons:

eg Because it's red?

Because it's warm, fashionable, pretty.

When the students have understood why and because, get them to give their own reasons.

Now teach borrow, using small items:

Can I borrow your pen please?

Can I borrow your watch please?

To practise, give out pieces of paper to the students and ask them to write their names .

Get them to ask you:

Can I borrow your pen please?

Have ready a stock of pens to give out to them.

Game:

The students work in pairs. In each pair, one plays "banker". Give the "banker" slips of paper with amounts of money written on them. The other student asks:

Can I borrow 10p, £1, £5? etc.

The banker asks:

Why?

If the other student gives a good reason, the banker lends him the money.

Practise first with one student in front of the class.

5.2.2. GOOD REASONS AND BAD REASONS

Language Function: Reasonable and unreasonable requests.

Structure: Why and because

Vocabulary: have got to

Present have got to using times:

eg My bus goes in 5 minutes.

I've got to go now.

Present and practise the following Tape items:

Tape item 44

Can I have next Monday off please?

Why?

Because I've got to go to the dentist.

I see.

Can I have next Tuesday off please?

Why?

Because I've got to take my son to hospital.

I see.

Can I have next Wednesday off please?

Why?

Because I've got to see my daughter's teacher.

Hmm.

Can I have next Thursday off please?

Why?

Because my son's getting married.

Oh.

Can I have next Friday off please?

Why?

Because I want to go to the cinema.

No, you can't have Friday off!

Listen.

Follow this item with a discussion on what are reasonable requests for days off, and what the hospital policy on this is.

5.2.3. ASKING FOR NEW EQUIPMENT

Context: There are three major types of problems with cleaning equipment:
mechanical breakdowns with, for example, fridges, vacuum cleaners etc;
equipment breaking or being worn out eg brushes, clothes etc; supplies of cleaning agent running out eg detergent.

Language Function: Backing up a request with a reason.

Vocabulary: broken, torn, worn out etc.

Equipment: A set of broken equipment, torn gloves, a broken vacuum cleaner, an old brush, a worn out cloth etc.

A set of good equipment.

Present items of useless equipment:

eg rubber gloves - torn

cloths - worn out
broom - too old, worn out
polisher/vacuum cleaner - broken etc.

and revise I've run out of with an empty bottle of cleaning agent.

Present and practise the following Tape item:

Tape item 45:

Can I have another mop please?

Why?

This one's broken.

Can I have some more scouring powder please?

Why?

I've run out of it.

Can I have another cloth please?

Why?

This one's worn out.

Can I have some more rubber gloves please?

Why?

These are torn.

Can you check the vacuum cleaner please?

Why?

It doesn't work.

Listen

Now you ask for the day off, and answer the question "why".

Game:

One student acts as "banker" holding the set of good equipment. The other students are given broken equipment. They ask the banker:

Can I have another cloth please etc?

The banker asks :

Why?

The requester must give a reason:

eg This one's torn, worn out etc

Those who give the reasons correctly get their poor equipment replaced.

5.2.4. APOLOGISING, AND GIVING REASONS

Context: When equipment breaks down, or something goes wrong, explanations are asked for. The domestic may have to respond under stress.

Language Function: Apologising and giving reasons.

Structure: Couldn't

Vocabulary: broken, worn out, etc.

Equipment: Slide A26

Using Slide A26 lead up to the class being able to understand and practise the following dialogue :

Tape item 46:

Mrs Cooper: Look at this floor, Joyce. It's filthy!

Joyce: I'm sorry, Mrs Cooper. I couldn't do it this morning.

Mrs Cooper: Why not?

Joyce: Because the vacuum cleaner was broken.

Mrs Cooper: Why didn't you tell me before?

Joyce: I'm sorry, Mrs Cooper. I couldn't find you.

Listen

Listen and repeat Joyce.

Listen and take Joyce's part.

Now using Slide A26, make unfavourable comments and get individuals to justify themselves as follows:

Teacher: Look at this bath/this floor/these dishes etc.
Student: I'm sorry, I couldn't wash them/clean it etc this morning.
Teacher: Why not?
Student: I've run out of scouring powder/the brush is broken etc.
Teacher: Why didn't you tell me before?
Student: I couldn't find you/I didn't have time etc.

Finally practise in groups.

1. <i>W</i> is a <i>W</i> with <i>W</i> in the <i>W</i> position.	1. <i>W</i> is a <i>W</i> with <i>W</i> in the <i>W</i> position.
2. <i>W</i> is a <i>W</i> with <i>W</i> in the <i>W</i> position.	2. <i>W</i> is a <i>W</i> with <i>W</i> in the <i>W</i> position.
3. <i>W</i> is a <i>W</i> with <i>W</i> in the <i>W</i> position.	3. <i>W</i> is a <i>W</i> with <i>W</i> in the <i>W</i> position.
4. <i>W</i> is a <i>W</i> with <i>W</i> in the <i>W</i> position.	4. <i>W</i> is a <i>W</i> with <i>W</i> in the <i>W</i> position.
5. <i>W</i> is a <i>W</i> with <i>W</i> in the <i>W</i> position.	5. <i>W</i> is a <i>W</i> with <i>W</i> in the <i>W</i> position.

Applications of the method of lines

SECTION FIVE

PART THREE

Making special requests in the office

Foreign domestics are often nervous of dealing with those in authority.

They may be wary of entering the office to put their requests to supervision.

This part attempts to increase their ability and confidence in initiating contact with the Domestic Office on matters that deeply concern them.

5.3.1. CAN I TALK TO YOU ABOUT MY HOLIDAY?

Context: Requests for changes of holiday times, days-off etc are usually made to the domestic office. This involves the domestic in initiating tactfully what may be a difficult interaction, and in answering questions. This can be a stressful situation for those lacking confidence in their ability in English.

Language Function: Initiating a request and answering the ensuing questions.

Structure: Questions with can
Conjunction but

Equipment: Slide A27

Illustrating with Slide A27, present and practise the following dialogue:

Tape item 47:

Joyce: Oh, Mrs Cooper, can I talk to you for a minute?
 Mrs Cooper: Yes Joyce? Sit down.
 Joyce: It's about my holiday.
 Mrs Cooper: Yes, when is it?
 Joyce: It's in August, but I want to change it to July.
 Mrs Cooper: You can't do that, Joyce. Everyone wants to go in July.
 Joyce: Oh dear.
 Mrs Cooper: You can change it to September, but not to July.
 Joyce: Oh well, September, then.
 Mrs Cooper: All right, dear.

Listen

Listen and repeat Joyce.

Listen and take Joyce's part.

Now practise the following questions:

Can I talk to you? It's about my day off.
 Can I talk to you? It's about my pay.
 Can I talk to you? It's about my overtime.
 Can I talk to you? It's about my bank holiday.

5.3.2. GIVING REASONS FOR A SPECIAL REQUEST

Language Function: Backing up a request with a reason.

Vocabulary: Every

Present and practise the following dialogue:

Tape item 48:

Joyce: Excuse me, Mrs Cooper.

Mrs Cooper: Yes?

Joyce: It's about my day off.

Mrs Cooper: What about it?

Joyce: Can I change it from Tuesday to Wednesday please?

Mrs Cooper: Every week? or just this week?

Joyce: Every week.

Mrs Cooper: Why?

Joyce: Because I've got to take my daughter to the clinic every Wednesday.

Mrs Cooper: Oh dear, what's the matter with her?

Joyce: She's got a bad knee.

Mrs Cooper: Well, all right Joyce, I'll change it.

Listen

Listen and repeat Joyce.

Listen and take Joyce's part.

Get the class to practise in groups, each student taking turns first to make the requests and then to ask for reasons. While the groups are practising, interview individual students yourself about their pay, days off, holidays etc.

5.3.3. COMPLAINTS

Context: The students may sometimes have the need to express discontent, either at work, or outside the hospital. This item aims to give them a means of doing this that will be acceptable.

Language Function: Making a complaint.

Vocabulary: Fair/not fair

Equipment: Pieces of paper with different amounts of money written on defective items; eg a bad orange, a dirty notepad, a packet containing broken biscuits, a split bag of flour etc.

Demonstrate fair/not fair with a pair of students by giving them pieces of paper with different amounts of money written on them:

eg Mr X gets 50p an hour.

Mr Y does the same work for 60p an hour.

Is it fair?

When fair has been understood, present and practise not fair.

Get the students to "buy" from you defective items using their pieces of paper with amounts of money written on them.

Present: Excuse me, I want to complain.

This paper is dirty/This orange is bad/These biscuits are broken etc.

Get them to complain to you, as the "shopkeeper", about the items they have bought.

When the class has fully grasped:

Excuse me, I want to complain.

Get them to practise in groups.

SECTION FIVE

PART FOUR

The present perfect tense

The present perfect tense has occurred before on the course but has not as yet been taught as a structure. The two major uses presented here are (a) saying what has happened (b) questions with yet.

This material is fairly demanding and will need to be spread over quite a number of sessions. Each item will need to be practised three or four times.

5.4.1. SAYING WHAT HAS HAPPENED

Structure: Various uses of this tense have occurred already but this is the first time that the present perfect forms have been fully presented.

Pronunciation: Make sure the weak auxiliary form 've' is properly heard and reproduced. Indian and Pakistan students will have particular difficulty with this.

Equipment: Flashcards of facial expressions.

Use the card of the most unhappy face and present the following question and answers:

What's happened?

I've lost my coat.

I've lost my bag.

I've lost my ring.

I've lost my wallet.

Pass the card round the class and while each student holds it ask:

What's happened?

Get the students to tell you what they have lost:

I've lost my book etc.

Now using the card of the happiest face, present the following:

What's happened?

I've found my coat.

I've found my purse etc.

Practise while handing the card round as before.

Now ask students who are not holding the card what has happened and get them to answer:

Mrs X has found her ring.

Mr Y has found his money etc.

5.4.2. ACCIDENTS

Structure: Practise with the present perfect tense
Model verb need

Vocabulary: Verbs for different injuries: burn, strain etc.

Equipment: Some simple medicaments; sticky plaster, ointment or cream, a bottle of aspirins, a bandage.
B slides of hazards

Present the following injuries, using mime or B slides of hazards:

I've just hurt my foot.
I've burned my hand.
I've strained my back.
I've bruised my arm.
I've cut my finger.

Present the appropriate medications with need:

I need some ointment.
I need some sticky plaster.
I need a bandage etc.

Get the students to mime injuries and practise as follows:

What's the matter?
I've burned my hand.
You need some ointment etc.

Practise in groups.

5.4.3. COMPLETING TASKS

Structure: Present perfect questions.
Positive and negative short answers.

Vocabulary: either/or

Equipment: Cloths

Pencils and paper

Give a student a cloth and ask her to wipe the furniture in the classroom. Keep your eyes shut. After a few minutes, open your eyes and ask questions.

Elicit the replies: Yes I have. No, I haven't.

Examples: Have you wiped the table?

Yes, I have.

Have you wiped the window?

No, I haven't.

to the class: Has she wiped her chair?

Yes, she has etc.

Repeat this procedure with other verbs eg:

Have you put the book in the drawer/on the shelf?

Have you moved the table/trolley?

Practise the question form chorally until the students are using it confidently, then split the class into their groups. Get one student in each group to shut his eyes and another to wipe the furniture. The first student must then guess what the other has done. The rest of the group gives the replies.

Game: Give each student a piece of paper and a pencil and ask them to write either their name or their clocknumber. Then guess what they have written:

eg Have you written your name?

Yes, I have/No, I haven't.

Have you written your clock number?

Play first together, then in groups, the students taking turns to ask the questions.

5.4.4. PRESENT PERFECT WITH "YET"

Structure: Use of yet in question and negative statements with the Present Perfect.

Equipment: Slide A28

Ask the students questions with yet.

Examples: Have you been paid yet this week?
Have you had your lunch yet?
Have you had your holiday yet?

Elicit the answers:

Yes, I have.
or No, I haven't.

Present and practise the following:

Use Slide A28 of a nurse talking to Joyce.

Tape item 49:

Nurse: Where's the milk?
Joyce: It's not here. The milkman hasn't come yet.
Nurse: The milkman hasn't come? But it's 8 o'clock!
Joyce: Well, he hasn't come yet.

Nurse: Where's the patients' breakfast?
Joyce: It's not here. The trolley hasn't come yet.
Nurse: The trolley hasn't come? But it's half past eight!
Joyce: Well, it hasn't come yet.

Nurse: Where's sister?
Joyce: She's not here. She hasn't come yet.
Nurse: Sister hasn't come? But it's nine o'clock!
Joyce: Well, she hasn't come yet.

Nurse: Where are the letters?
Joyce: They're not here. The postman hasn't come yet.
Nurse: The postman hasn't come? But it's half past nine!
Joyce: Well, he hasn't come yet.

Listen

Listen and repeat Joyce .

SECTION FIVE

PART FIVE

Using the telephone

The telephone is a major hurdle for beginners in another language. Three main points are covered in this part:

- making a call and asking for someone
- giving a simple message
- answering the phone and fetching someone

A major factor in telephone usage is confidence. The practical exercise suggested in 5.5.2. is very important in this respect.

5.5.1. ASKING FOR SOMEONE ON THE TELEPHONE

Context: Using the telephone in English is likely to be an alarming experience for your students. The aim of this item is to teach the students to ask clearly for the person they want to speak to, and to know when to give their own name.

Language function: Asking for someone on the telephone .
Saying clearly who you are .

Structure: Present continuous question with who .

Pronunciation: Practise in understanding and speaking clearly through the distortion of the telephone .

Present and practise the following dialogue :

Tape item 50:

(Sound of ringing)

A: Hello? This is 940 1323
B: Can I speak to Mrs Cooper please?
A: Mrs Cooper? Yes. Who's speaking?
B: Mrs Rodriguez
A: Who?
B: Mrs Rod - ri - guez
A: O.K. Hold the line, please

Listen

Listen and repeat Mrs Rodriguez .

Listen and take Mrs Rodriguez's part, using your own name .

5.5.2. PHONING IN TO REPORT SICK

Context: Most hospitals require domestics to phone in if they are sick and cannot come to work. Failure to do so causes resentment, as relief workers cannot be organized. This item gives a simple formula for reporting sick.

Language Function: Giving a simple message over the telephone.

Equipment: An extension of the hospital telephone.

Present and practise the following dialogue:

Tape item 51:

(Sound of ringing)

Operator: Hello St. John's hospital.

Joyce: Can I speak to the Domestic's Office, please?

Operator: Yes, just a minute.

Mrs Cooper: Hello, Domestic's Office.

Joyce: Can I speak to Mrs Cooper, please?

Mrs Cooper: Mrs Cooper speaking.

Joyce: Oh, hello, Mrs Cooper, I can't come to work today. I've got flu.

Mrs Cooper: I see Joyce. All right. I hope you get better soon.

Joyce: Thank you, Mrs Cooper. Goodbye.

Mrs Cooper: Goodbye Joyce.

Listen

Listen and repeat Joyce.

Listen and repeat Joyce's part, using your own name.

If the domestic's department are willing and able to co-operate, station a supervisor by the telephone and get the students to phone the office from another extension to report sick.

5.5.3. FETCHING SOMEONE TO THE TELEPHONE

Context: Hospitals differ greatly with respect to the telephone: domestics may or may not be allowed to answer it. Find out what the practice is in your hospital before teaching this item, and only use the item if appropriate.

Present and practise the following dialogue:

Tape item 49:

(Sound of ringing)

Joyce: Hello, this is extension 231.
Voice: Can I speak to Sister Bright, please?
Joyce: Sister Bright, Yes. Who's speaking?
Voice: This is Mr Johnson.
Joyce: Mr Johnson. All right. Just a minute, please.

Listen

Listen and repeat Joyce .

Listen and take Joyce's part.

SECTION FIVE

PART SIX

Some special aspects of behaviour in the hospital

English people, used to a monolingual society, tend to dislike foreigners speaking their own language in front of them. When language classes start, British employees and supervisors often unrealistically expect the trainees to stop using their own language when speaking among themselves. The teacher needs to educate them on this point.

At the same time, foreigners are often unaware of the fact that English people may be offended by hearing them speak together in their own language. Item 1 of this part gives the students a simple formula to cope with this problem.

Item 2 of this part deals with another aspect of talking in the hospital: the importance of keeping the level of noise low in the wards and the hospital generally.

5.6.1. TALKING IN YOUR OWN LANGUAGE

Context: The students need to be aware of the fact that talking together in their own language can cause offence to British people.

Language Function: Explanation of what is being said in another language.

This dialogue has been recorded in Gujarati. If none of your students are from India they will be surprised by suddenly hearing a completely different language. Point out to them that their own language sounds as incomprehensible to English people!

Tape item 53:

(Sounds of girls chatting in Gujarati)

Joyce (foreground): What are they talking about?

First voice: Excuse us speaking our language.

Joyce: Oh, that's all right.

First voice (in Gujarati): Come over at the weekend and meet my sister.

She's just come over from India.

Second voice (in Gujarati): Yes thanks, I will.

First voice: It's about the weekend. My sister has come from India.

Joyce: Oh yes? Very nice too.

Listen

Listen and repeat the Indian girl, when she speaks in English.

Now initiate a discussion with students on speaking their own language. Explain that English people may feel offended if they hear someone speaking another language in front of them because they may think they are being talked about.

Get each group to talk for a few minutes in their own language, and then use the formula given in the dialogue:

Excuse us speaking our language.

with a short explanation:

It's about.....

5.6.2. NOISE IN THE HOSPITAL

Context: In some hospitals noise can be a serious problem, because of the nature of the building, the type of patient etc. In other hospitals it is less serious. Use your judgement as to the degree of importance you give this item.

Structure: Use of adverbs: quietly, loudly.

Vocabulary: noise

silence

Present the adverbs quietly and loudly.

eg Please say your name loudly, Mrs X.

Please tell me your name quietly Mrs Y.

Teach the class to recognize the written signs:

SILENCE PLEASE

QUIET PLEASE

Present the following tape item (for listening comprehension only)

Tape item 54:

(Noise of someone singing)

Mrs Cooper: Quiet, please, Joyce don't make so much noise!

Joyce: Sorry!

(Noise of someone talking loudly in another language)

Mrs Cooper: Hey, please don't talk so loudly!

Voice: Sorry!

Joyce (shouting): Mrs Grey! Telephone!

Voice: Oh Joyce! Please don't shout so loudly!

Joyce: Sorry!

SECTION FIVE

PART SEVEN

Dealing with officials

Many of the questions dealt with in this Part have been met earlier in the course, but the aim here is to give the students the necessary language to deal with further questions, which should increase their confidence in dealing with officials, whether in or out of the hospital.

5.7.1. GIVING INFORMATION ABOUT YOURSELF TO AN OFFICIAL

Context: The domestic faced with bureaucratic questions.

Language function: Answering official questions.

Vocabulary: Official terms: nationality, occupation etc.

Present the following questions and answers:

What's your nationality?

British/ Spanish/ Yugoslavian/ Indian etc.

What's your occupation?

Domestic etc.

Who is your employer?

St. John's Hospital etc.

What sort of passport have you got?

British/ Spanish/ Italian etc.

Have you got a work permit?

Yes/ No

What is your date of birth?

21st October 1943 etc.

When did you come to this country?

6th November 1971 etc.

Add any questions that are particularly relevant to your students.

Tape item 55:

Official: Good morning. What's your name, please?

Manuel Pereira: Pereira Manuel Pereira.

Official: How do you spell Pereira?

Manuel: P-E-R-E-I-R-A

Official: Thank you. Your address?

Manuel: 65, Birch Road, Acton.

Official: What's your date of birth?

Manuel: 16th February 1940.

Official: Yes. And what's your nationality?

Manuel: Portuguese .
Official: I see. Have you got a work permit?
Manuel: Yes.
Official: And who's your employer?
Manuel: St. John's Hospital.
Official: Right. And your occupation?
Manuel: Domestic.
Official: Thank you. When did you come to this country?
Manuel: 16th May 1970.
Official: Yes. And have you got any dependants?
Manuel: Yes. My wife and two children.
Official: O.K. Thank you very much.

Listen

Listen, and answer the questions giving your own details.

5.7.2. FORM FILLING

Context: Completing official forms is a familiar necessity to those who have emigrated into or come to work in Britain. No doubt in the past your students have got round the difficulty of filling in forms by getting someone else to help them. For those who can cope with the literacy demands, this item will be very rewarding. For illiterate students, aim to get them at least to be able to write their own names.

Language function: Filling in a form in writing.

Equipment: A blackboard .
A duplicated form for each student.
Pencils or pens.

Make a form similar to the facsimile overleaf, and duplicate it so that each student has a copy. Explain each item on the form, and write an example of a completed form on the blackboard for the students to copy.

SURNAME..... MR/MRS/MISS.....

OTHER NAMES..... AGE.....

ADDRESS.....

.....

.....

.....

NATIONALITY.....

OCCUPATION.....

5.7.3. MEETING THE UNION REPRESENTATIVE

Context: The extent of the union activity differs greatly from hospital to hospital.

Use your judgement and your knowledge of the hospital you are working in as to whether or not you use this item. If you have been in touch with the shop steward in the hospital, this might be a good opportunity to arouse their interest in the class, if they have not been involved before.

Vocabulary: shop steward, union, member, subscription, meeting.

If the union is active in your hospital, the vocabulary may be familiar to your students. Some of the terms, however, are likely to need explanation.

Lead up to the class being able to understand the following tape item:

Tape item 56:

Shop steward: Hello I'm the shop steward here.
Domestic: Oh yes?
Shop steward: Are you a member?
Domestic: No, but my friend is.
Shop steward: I see. Do you want to join?
Domestic: Yes please. What do I do?
Shop steward: You fill in this card.
Domestic: Yes, O.K.
Shop steward: And it's 14p a week.
Domestic: Is that all?
Shop steward: Well no. We want you to come to our meetings.
Domestic: I see.
Shop steward: Hope you'll come to our next meeting. It's on Tuesday.
Domestic: O.K. Thanks.

Listen

Listen and repeat the domestic's part.

most part of Iceland most areas

are in question are very large

and the quite extensive areas

are in question have

gypsum veins

most of your knowledge

and knowledge been of what are

most used minerals and

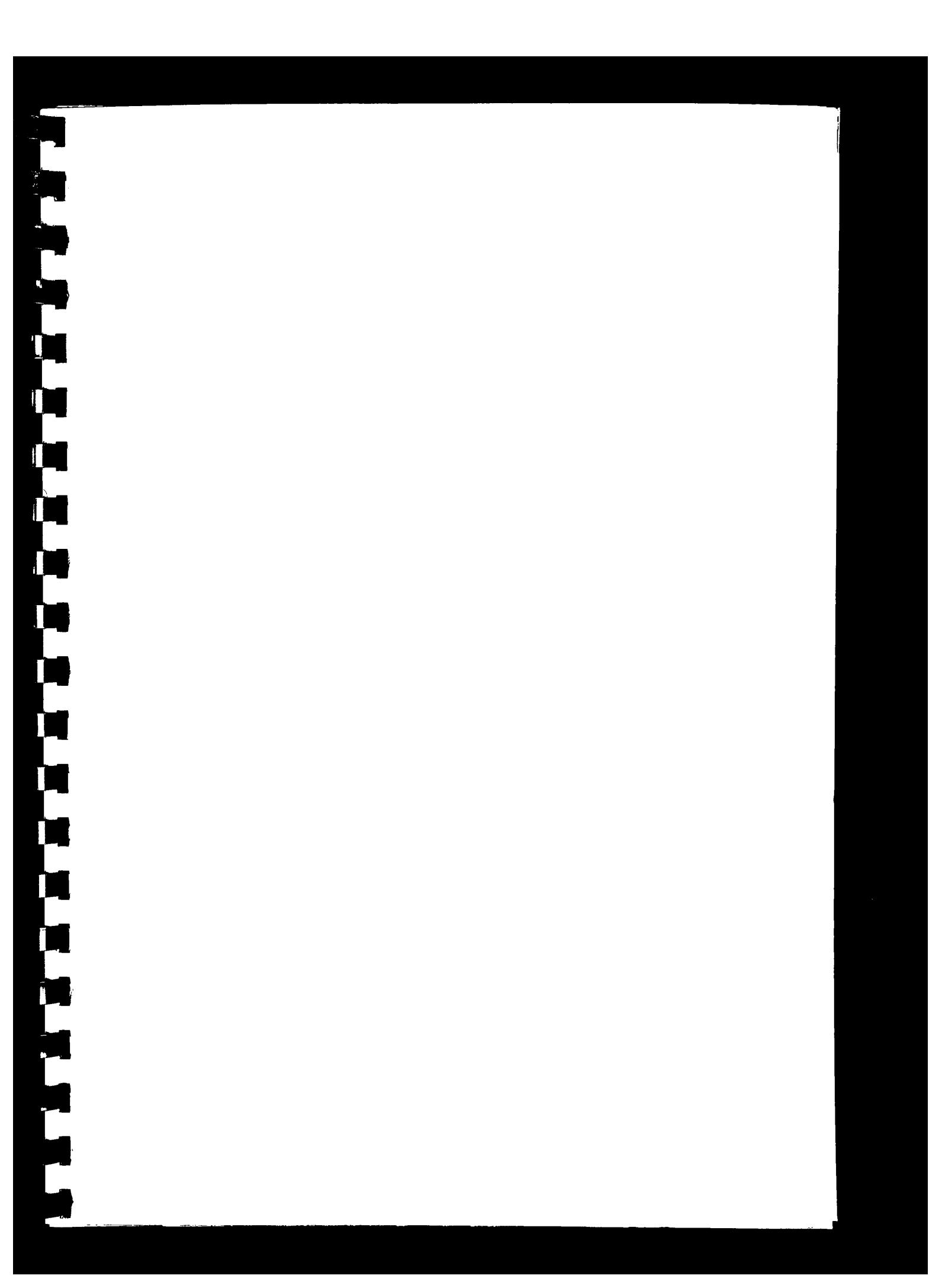
and know

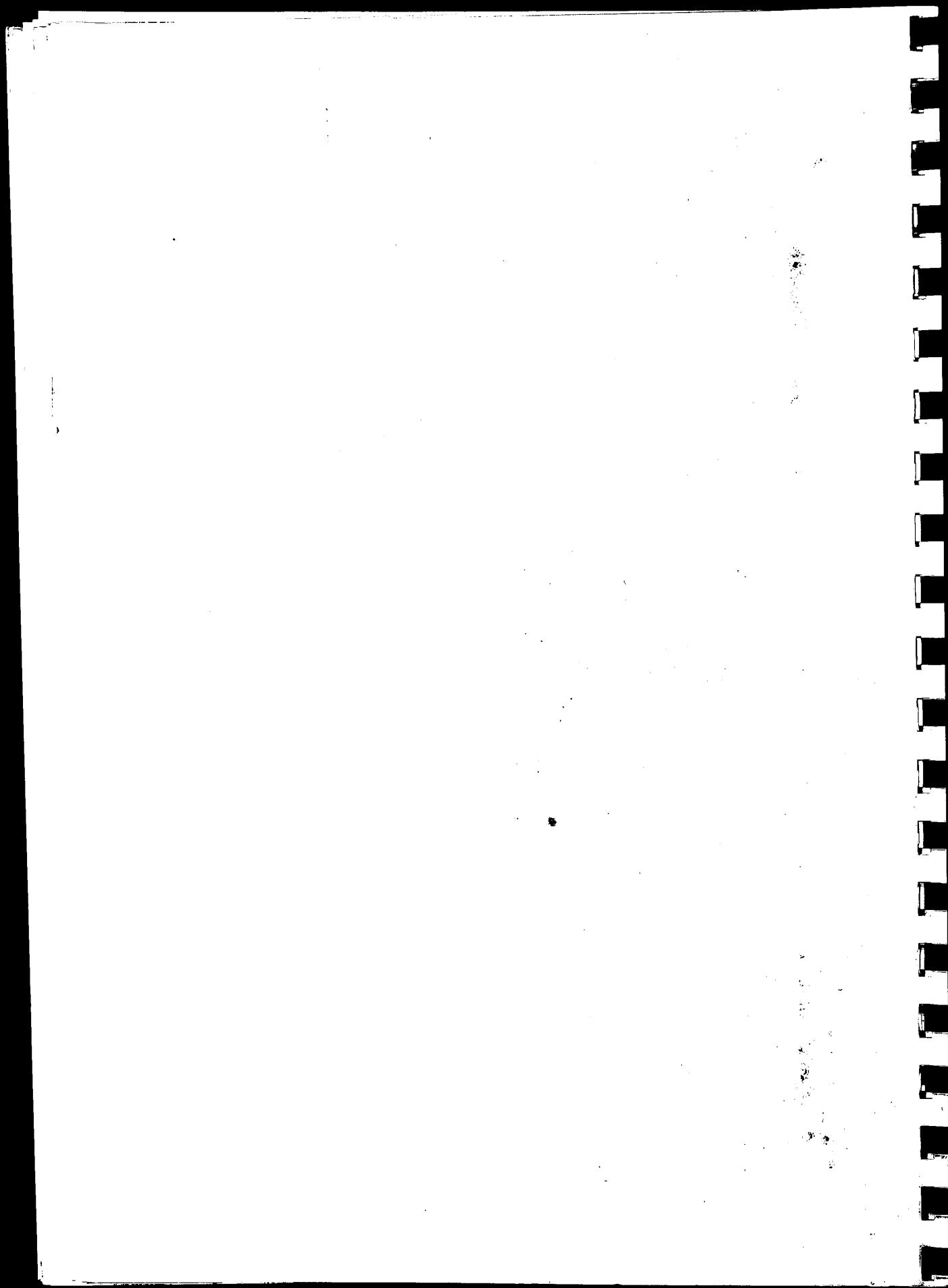
kind of areas

are these

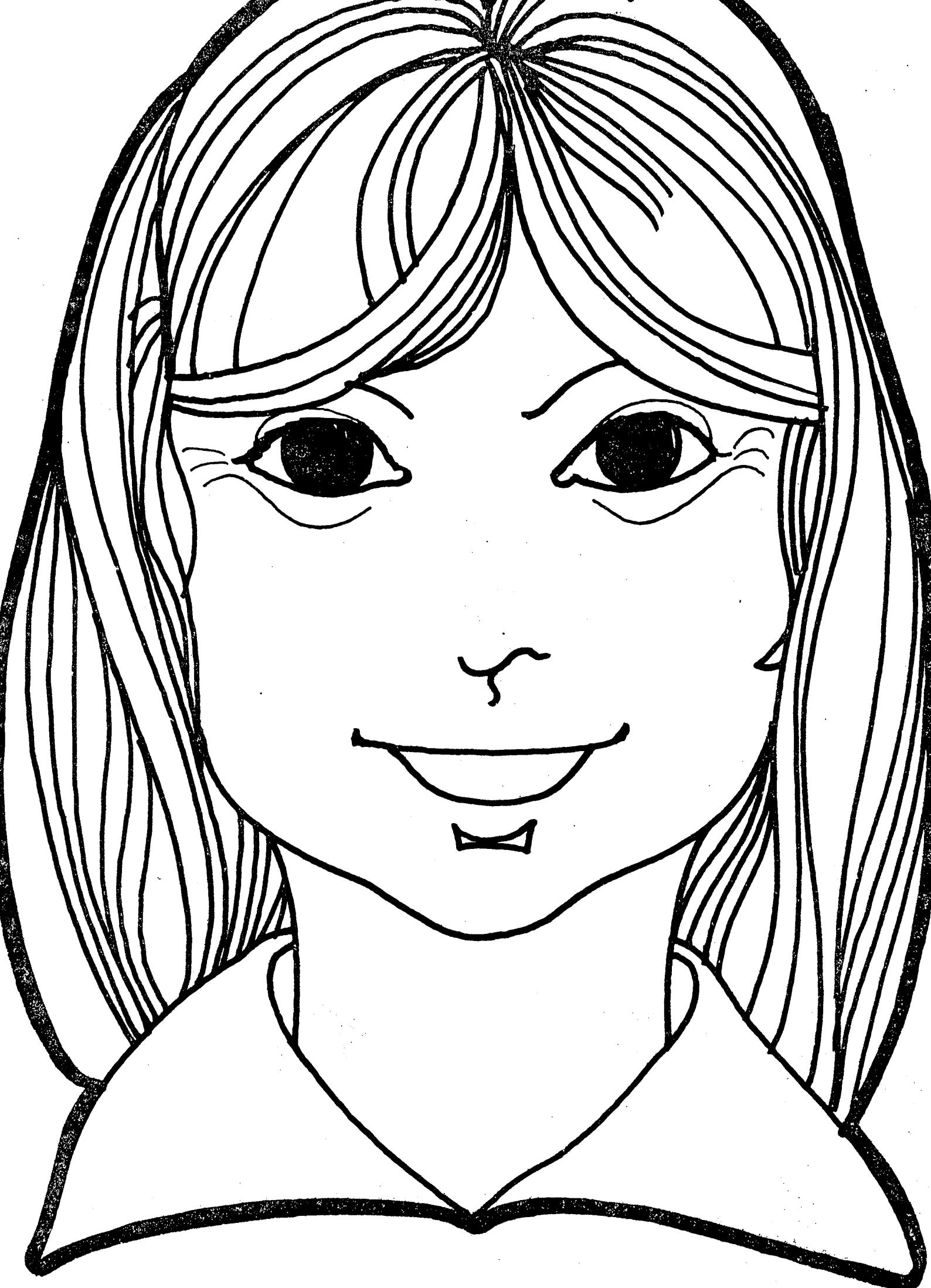
gypsum and of course

gypsum and gypsum









ENGLISH LANGUAGE COURSE
for
OVERSEAS HOSPITAL DOMESTIC STAFF

EXPRESSIONS

Flash Cards (5)

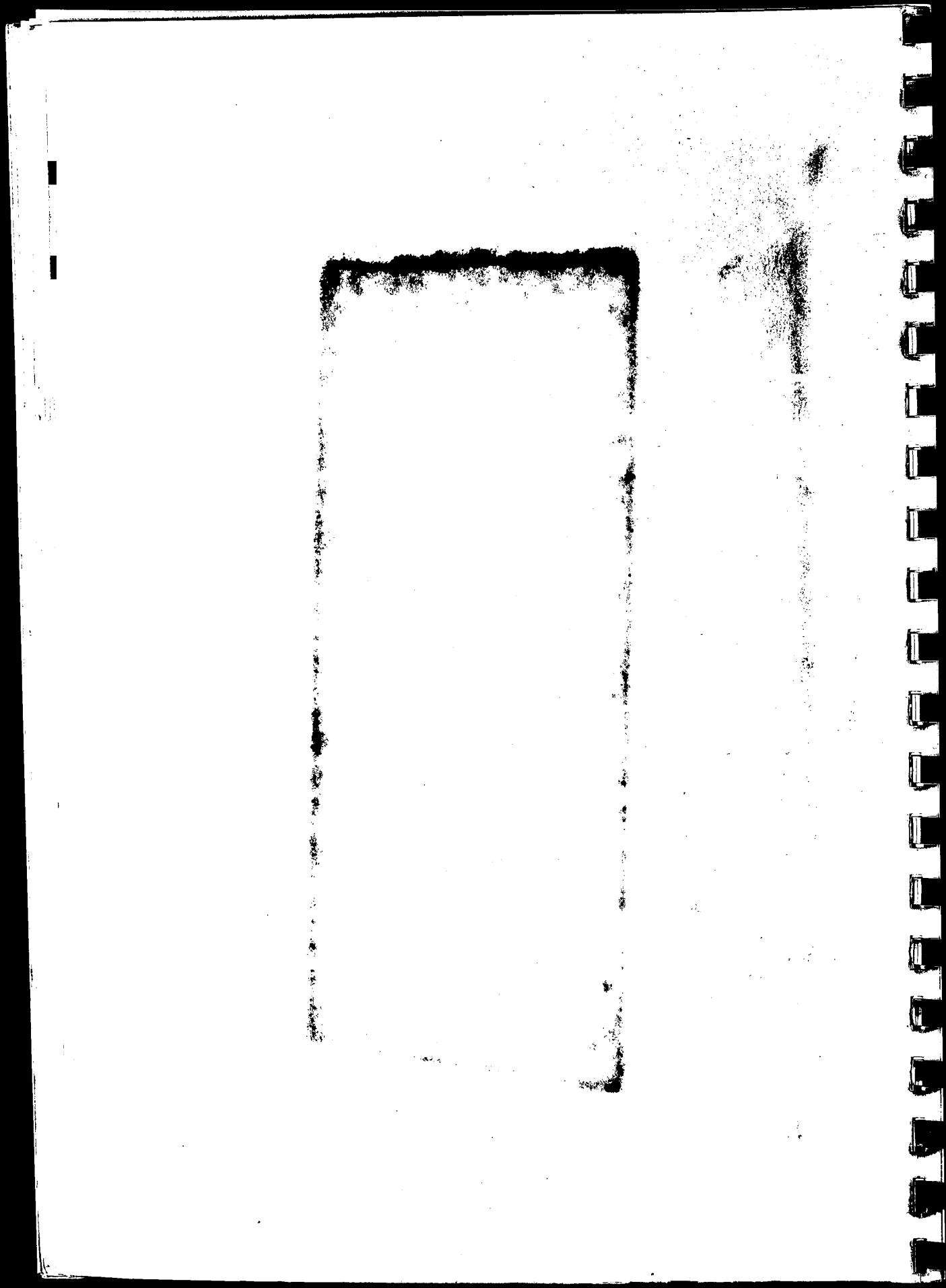
I FEEL TERRIBLE
NOT VERY WELL
NOT TOO BAD
ALL RIGHT
FINE THANKS











ENGLISH LANGUAGE COURSE
for
OVERSEAS HOSPITAL DOMESTIC STAFF

EVERYDAY ACTIVITIES

Flash Cards (10)

CLEANING
PICNIC
SHOPPING
PAINTING
WRITING
COOKING
SEWING
IRONING
GARDENING
WASHING CLOTHES

King's Fund Centre

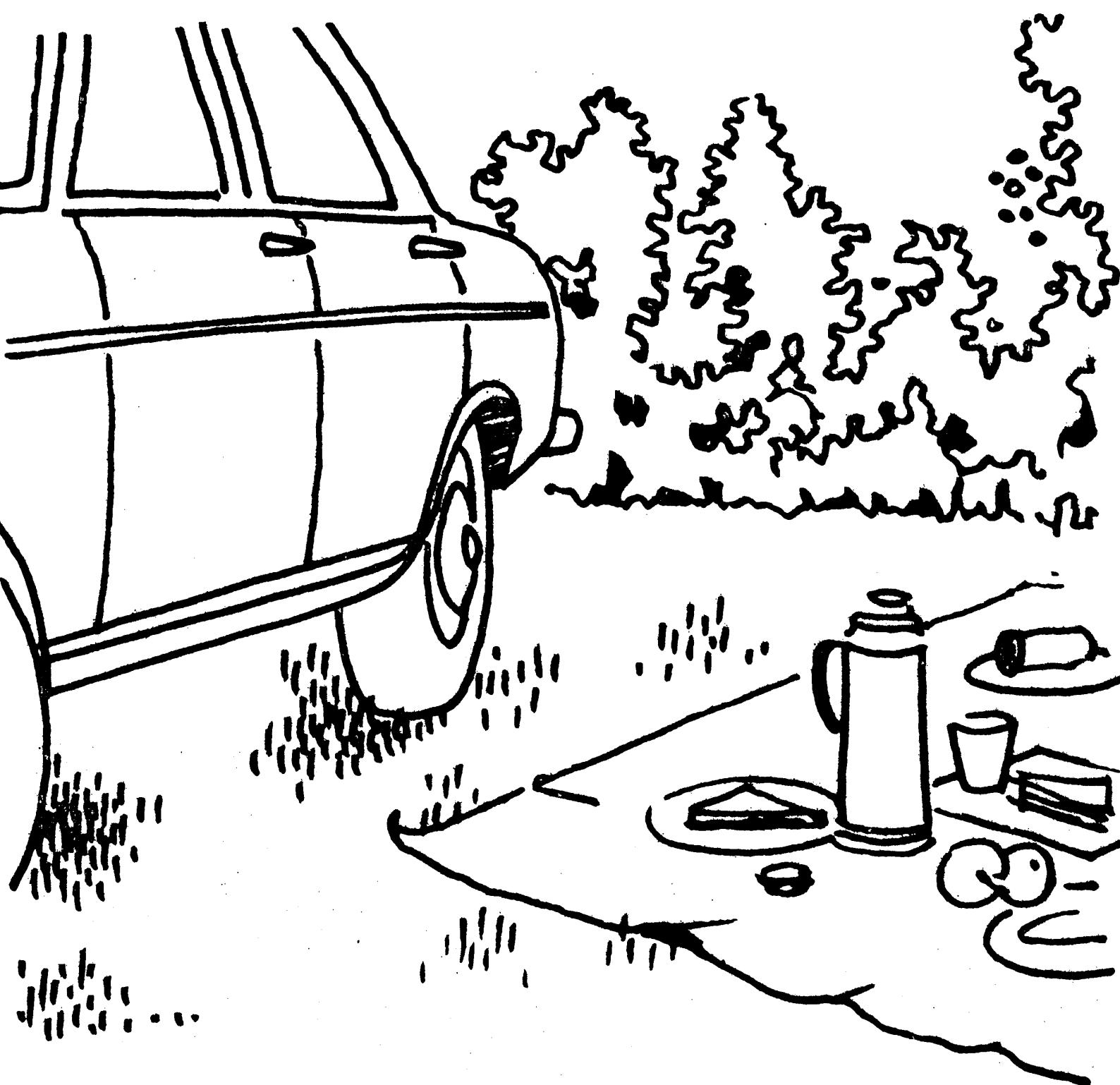
ENGLISH LANGUAGE COURSE
for
OVERSEAS HOSPITAL DOMESTIC STAFF

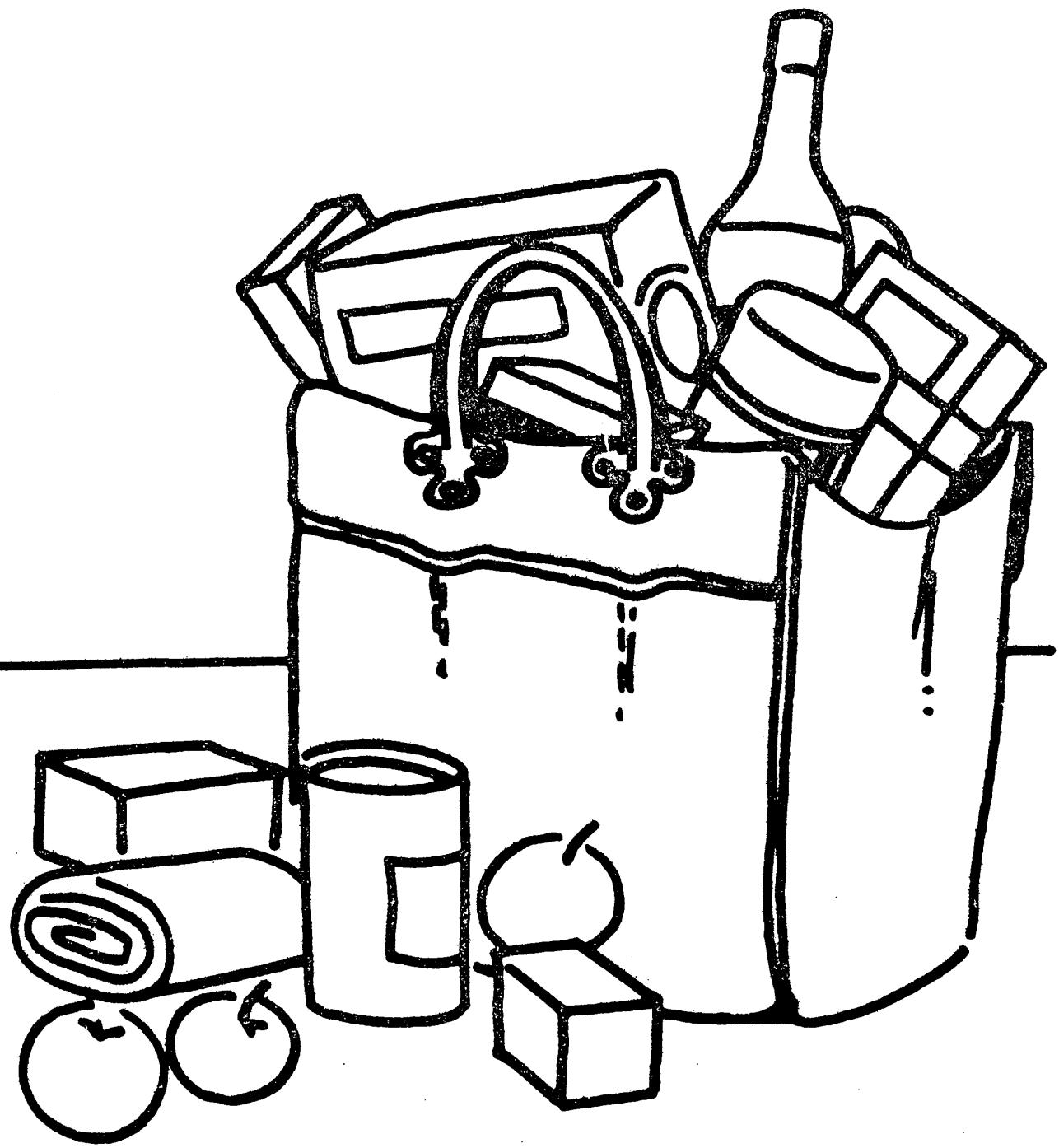
EVERYDAY ACTIVITIES

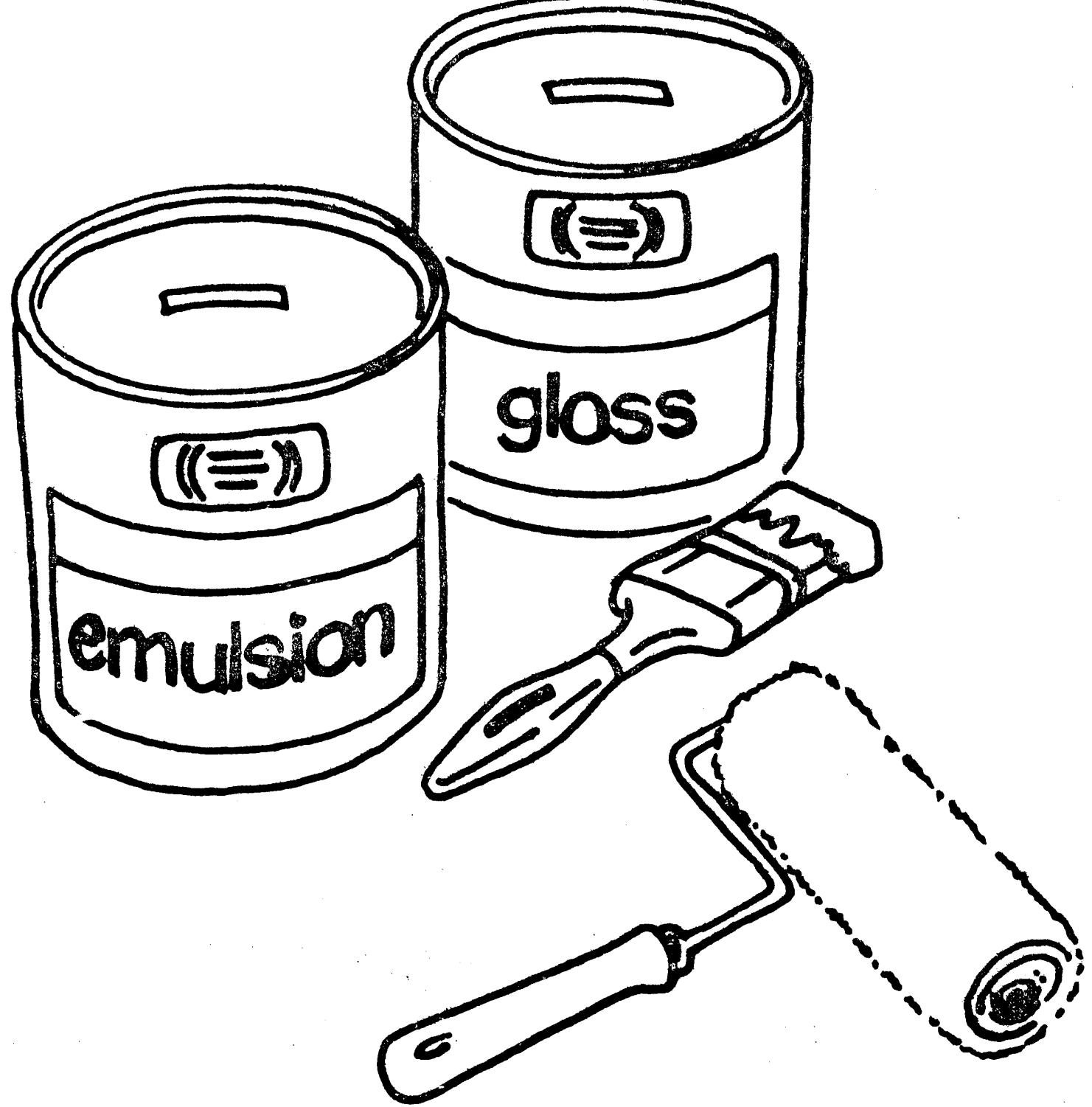
Flash Cards (10)

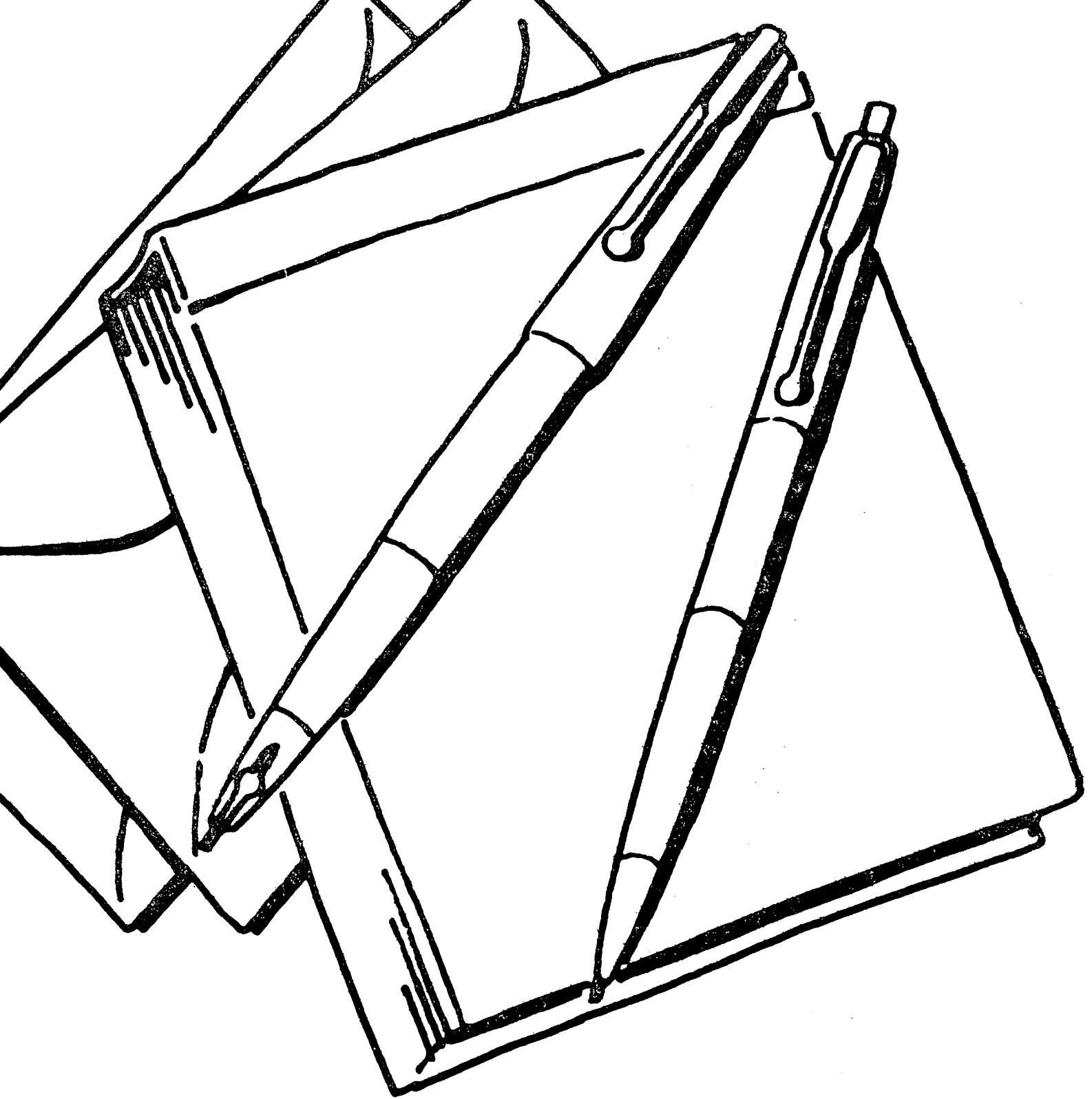
CLEANING
PICNIC
SHOPPING
PAINTING
WRITING
COOKING
SEWING
IRONING
GARDENING
WASHING CLOTHES

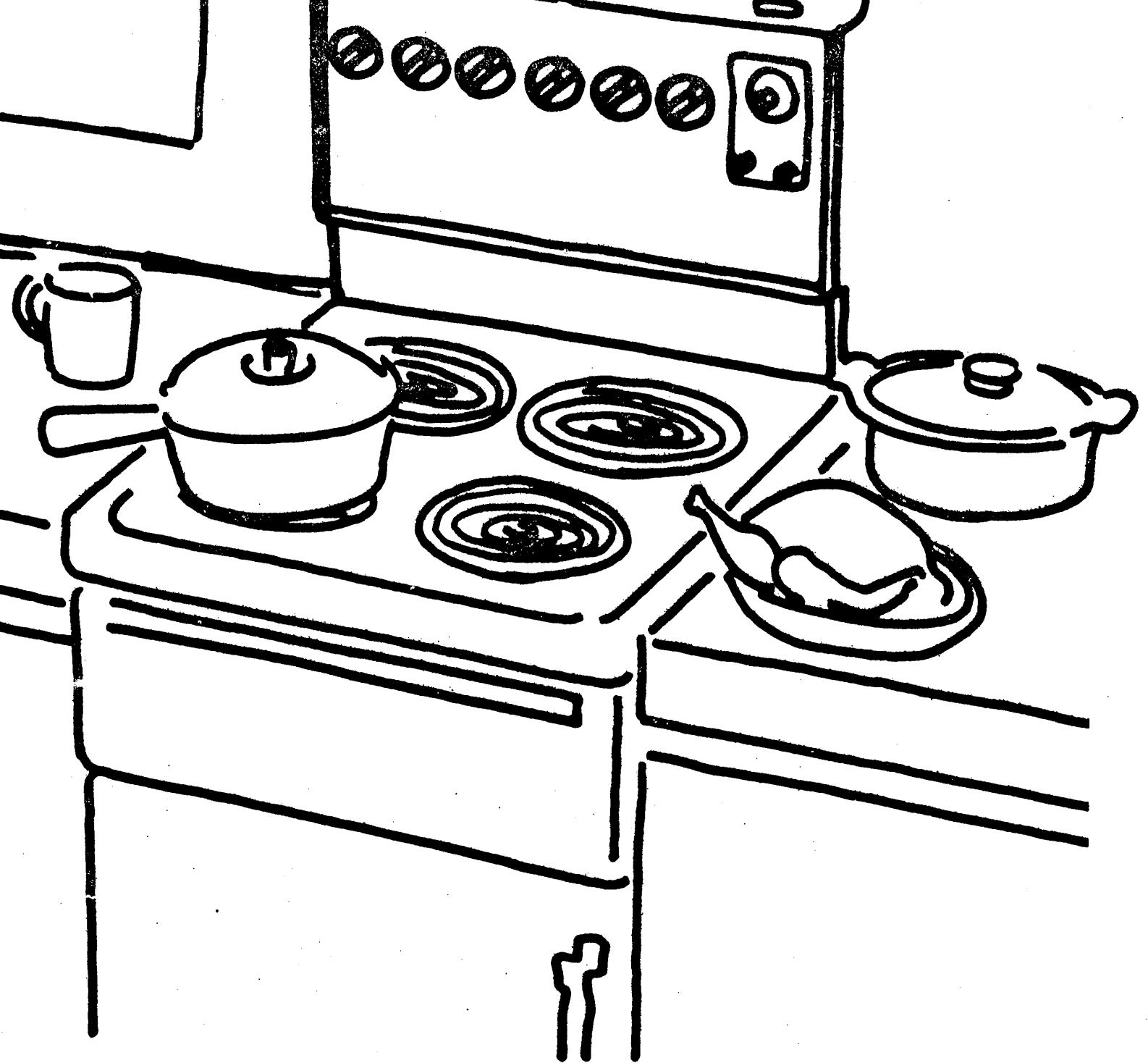


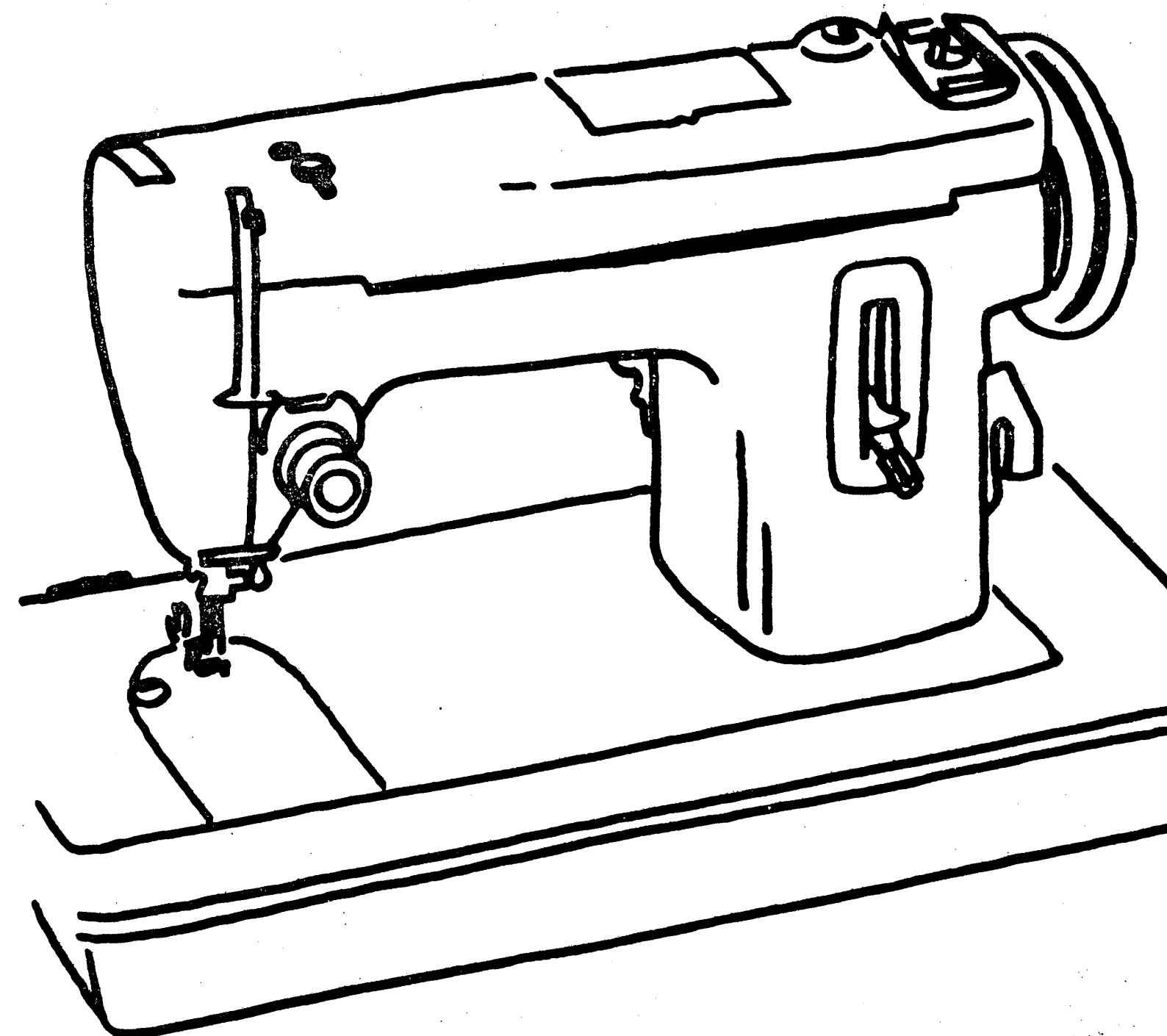


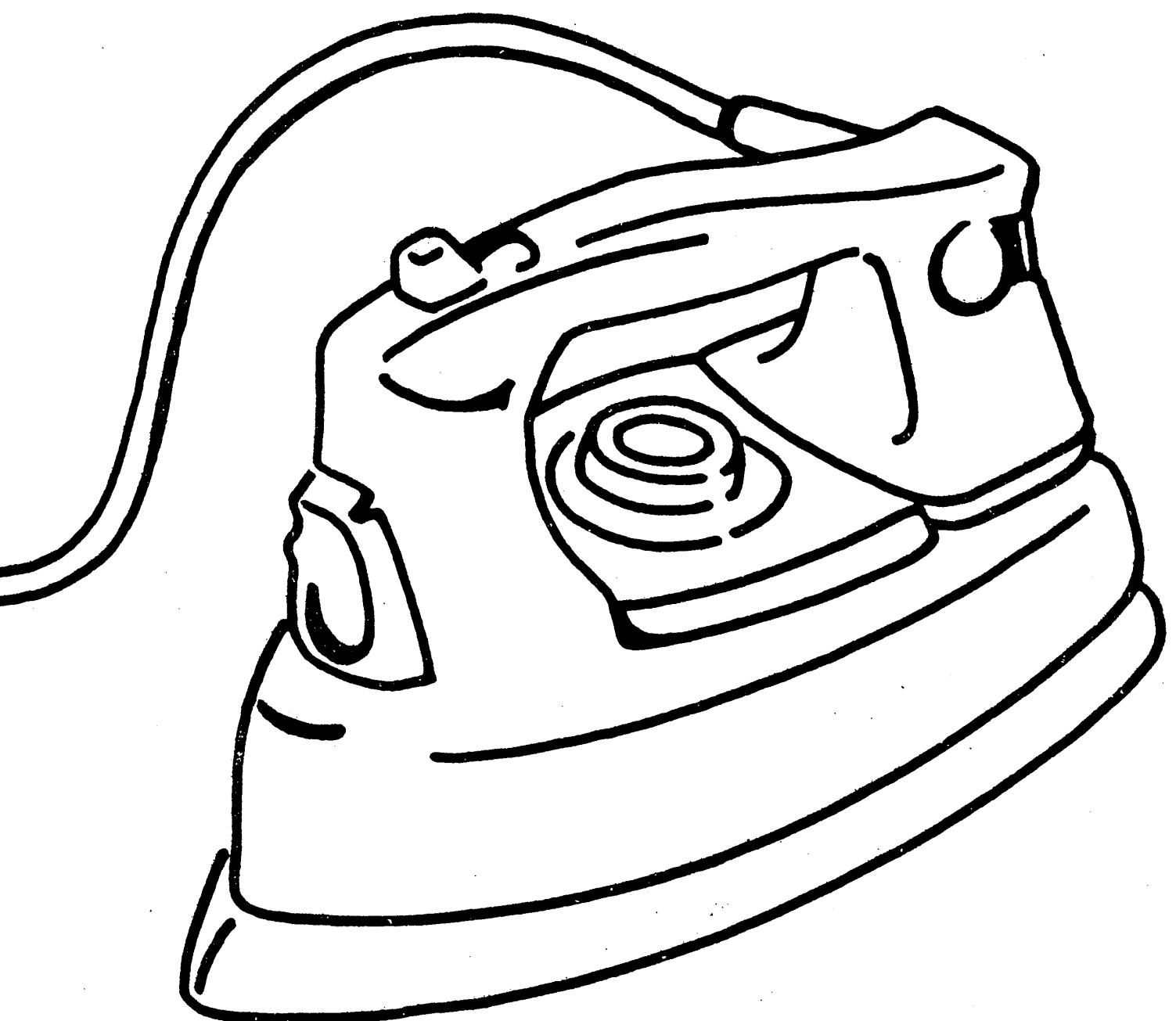


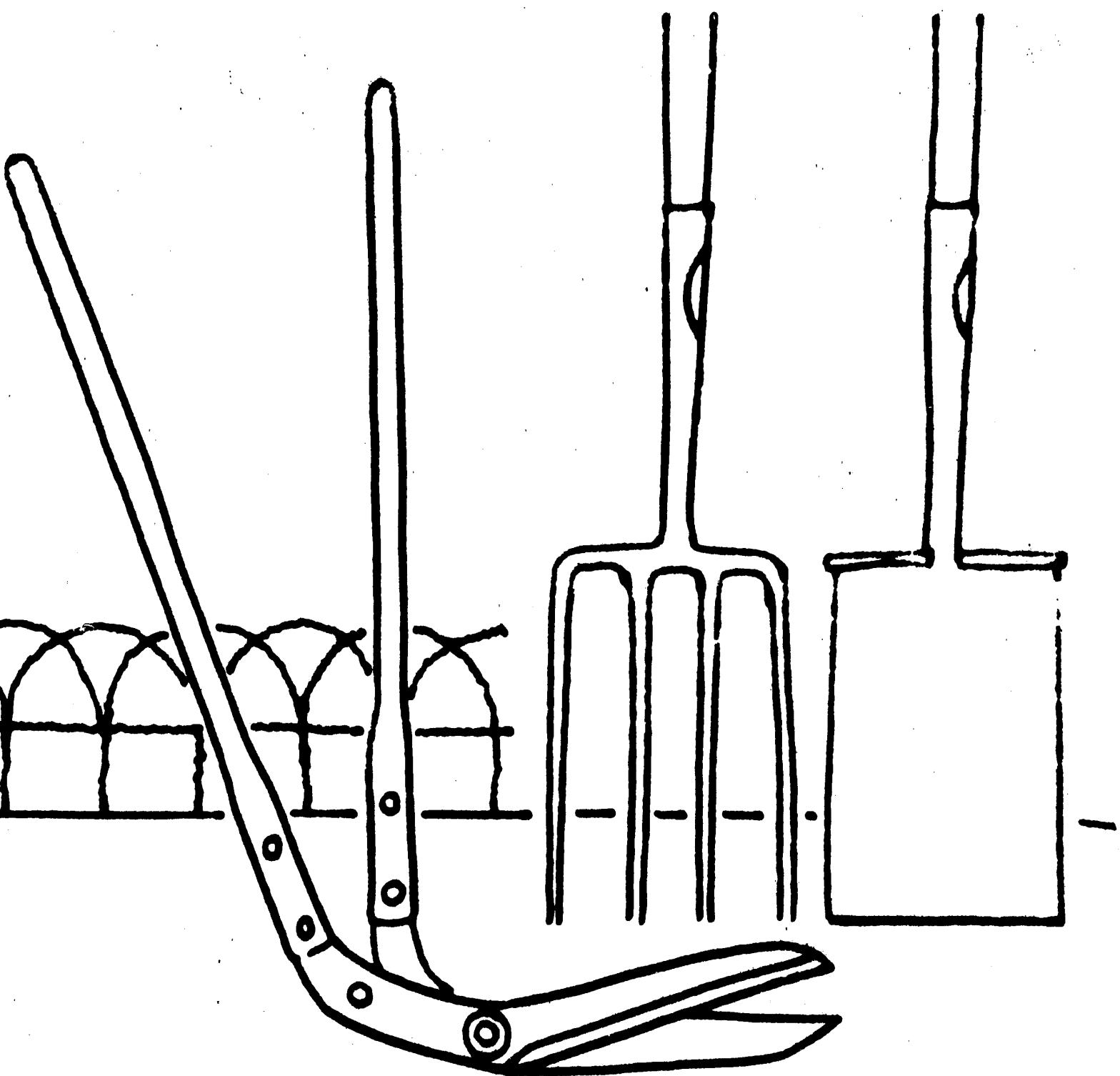


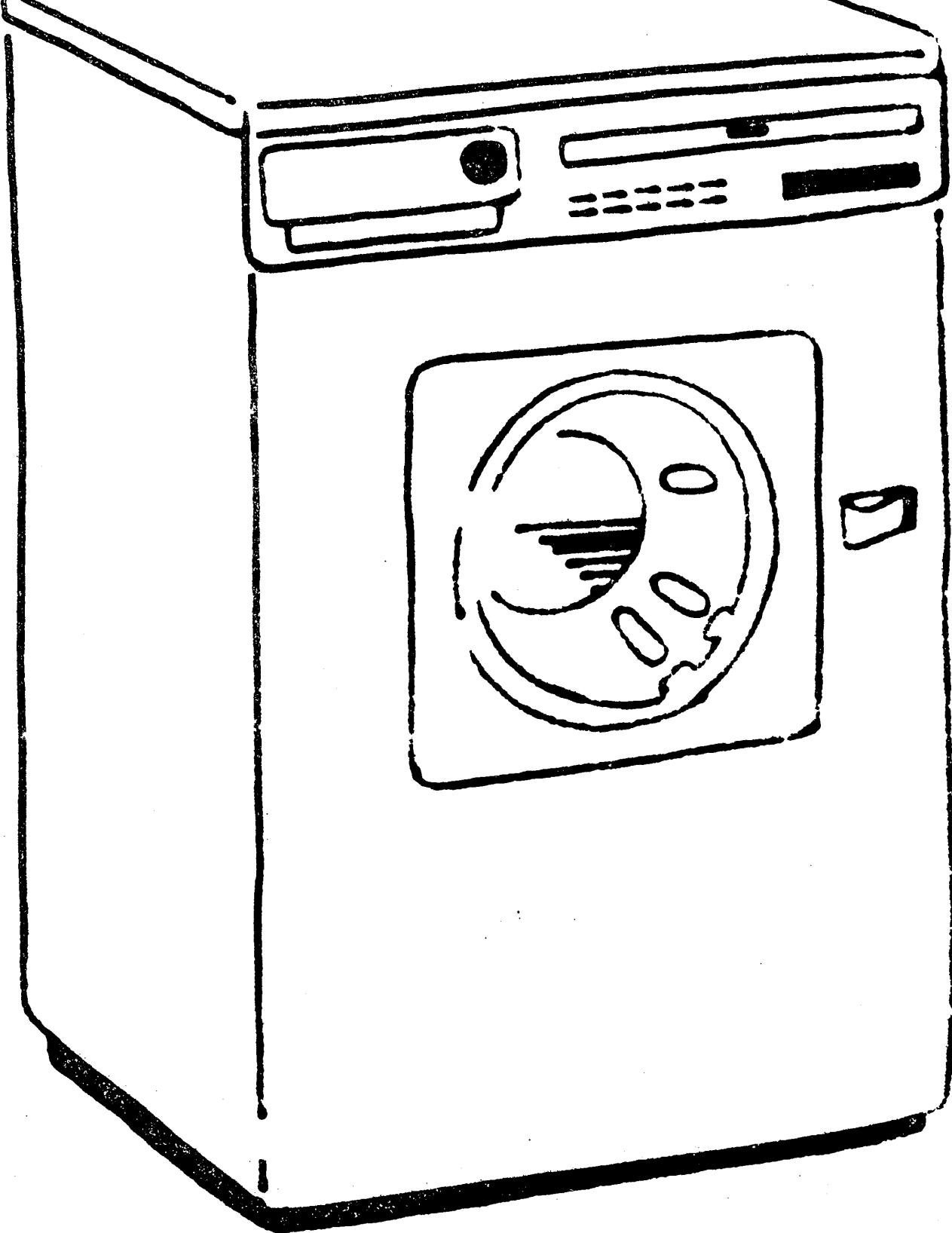














ENGLISH LANGUAGE COURSE

for

OVERSEAS HOSPITAL DOMESTIC STAFF

SAFETY

Flash Cards (10)

TROLLEY
BROOM
MOTOR CAR
KETTLE
ELECTRIC IRON
ELECTRIC FIRE
SPILT LIQUID
CLEANING MATERIALS
ELECTRIC FLEX
COOKER

King's Fund Centre

ENGLISH LANGUAGE COURSE
for
OVERSEAS HOSPITAL DOMESTIC STAFF

SAFETY

Flash Cards (10)

TROLLEY

BROOM

MOTOR CAR

KETTLE

ELECTRIC IRON

ELECTRIC FIRE

SPILT LIQUID

CLEANING MATERIALS

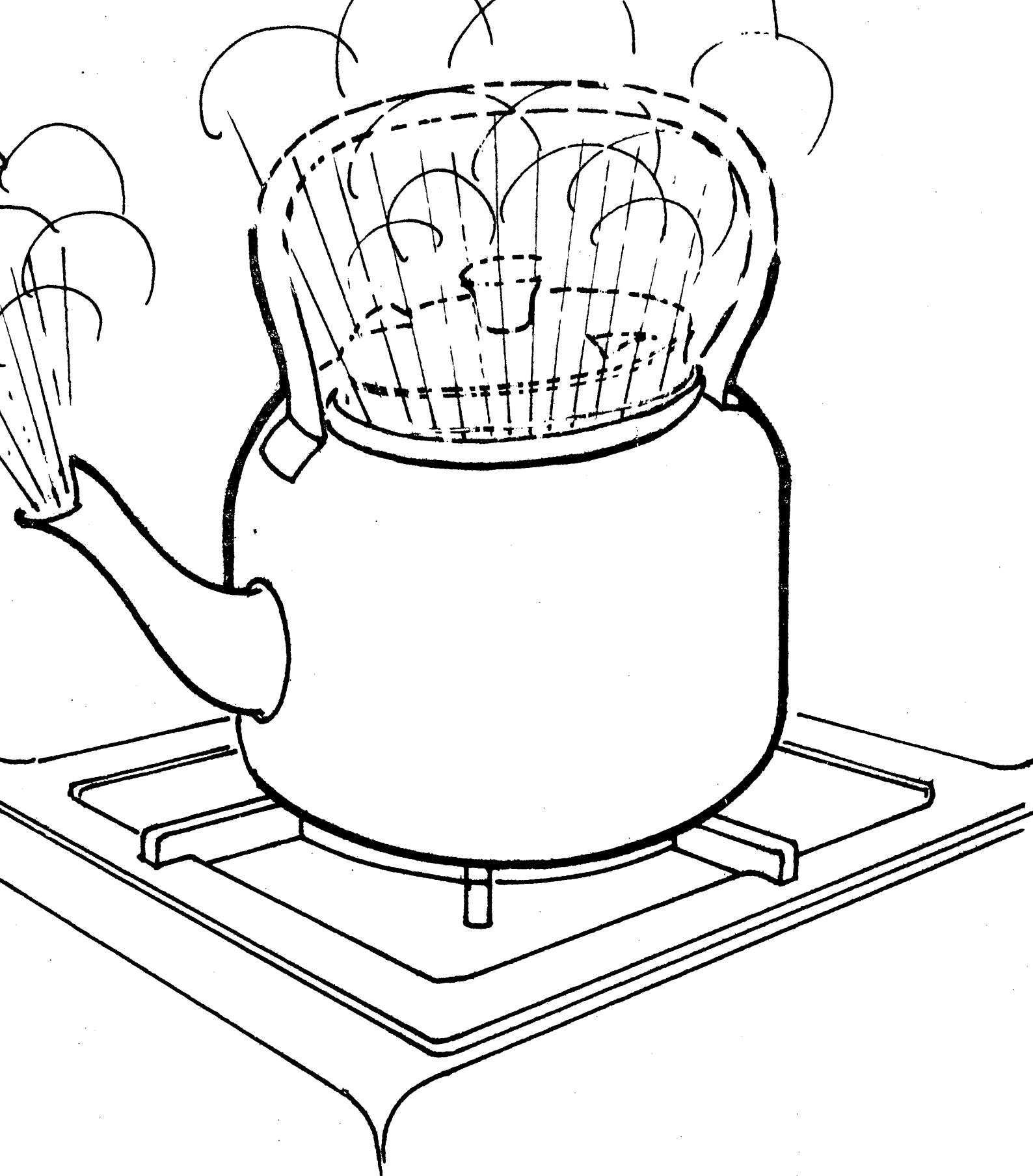
ELECTRIC FLEX

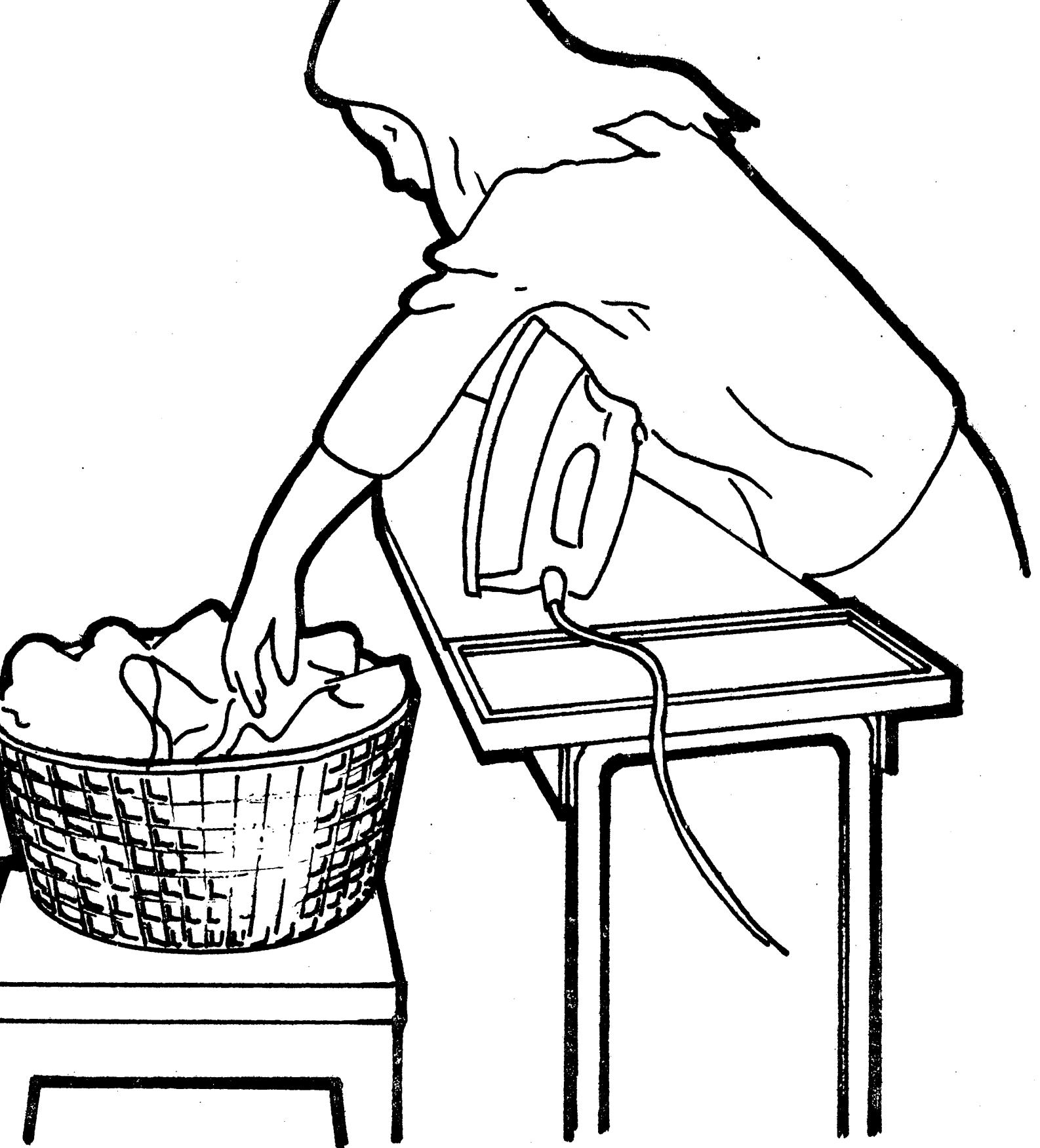
COOKER

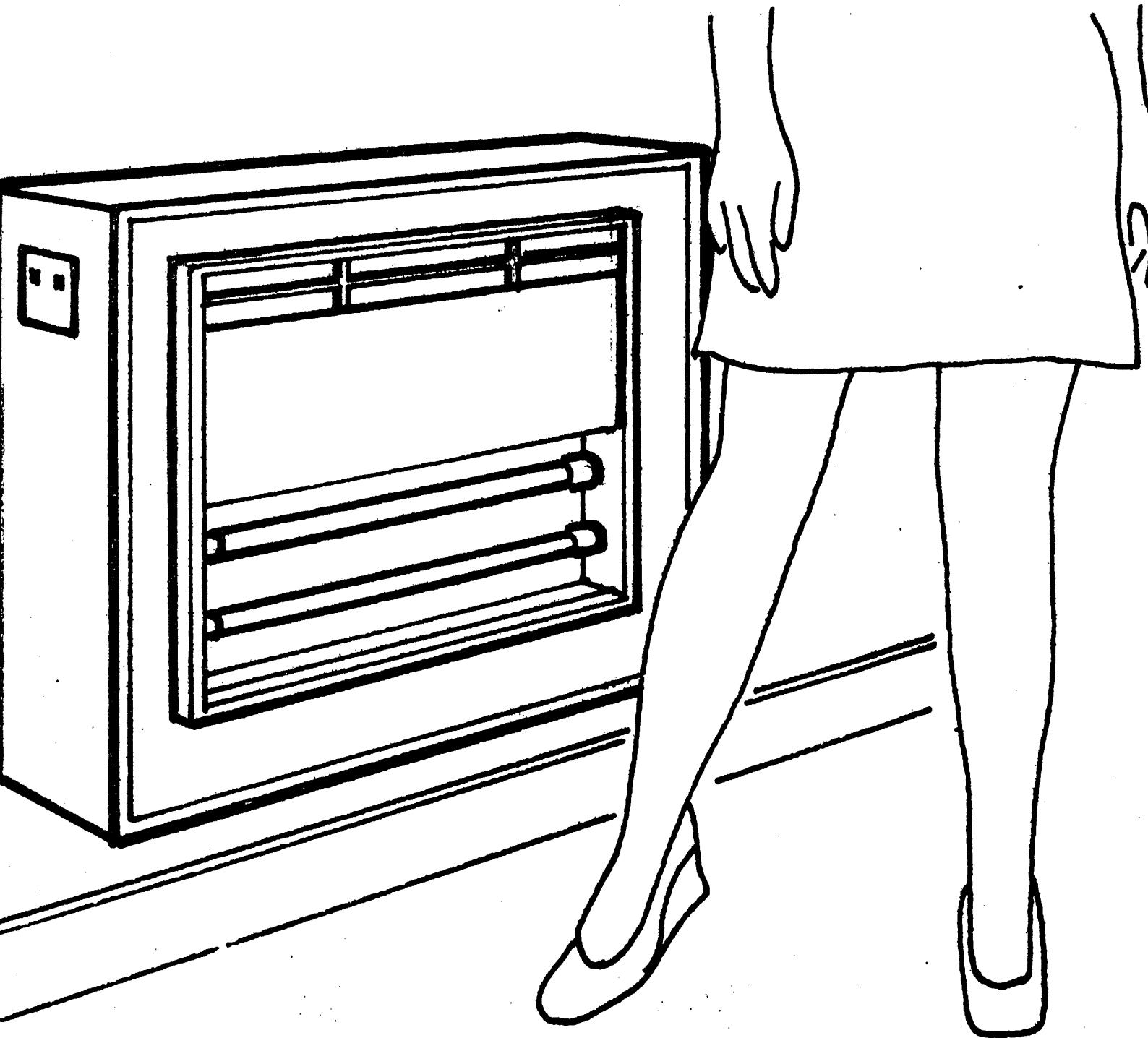


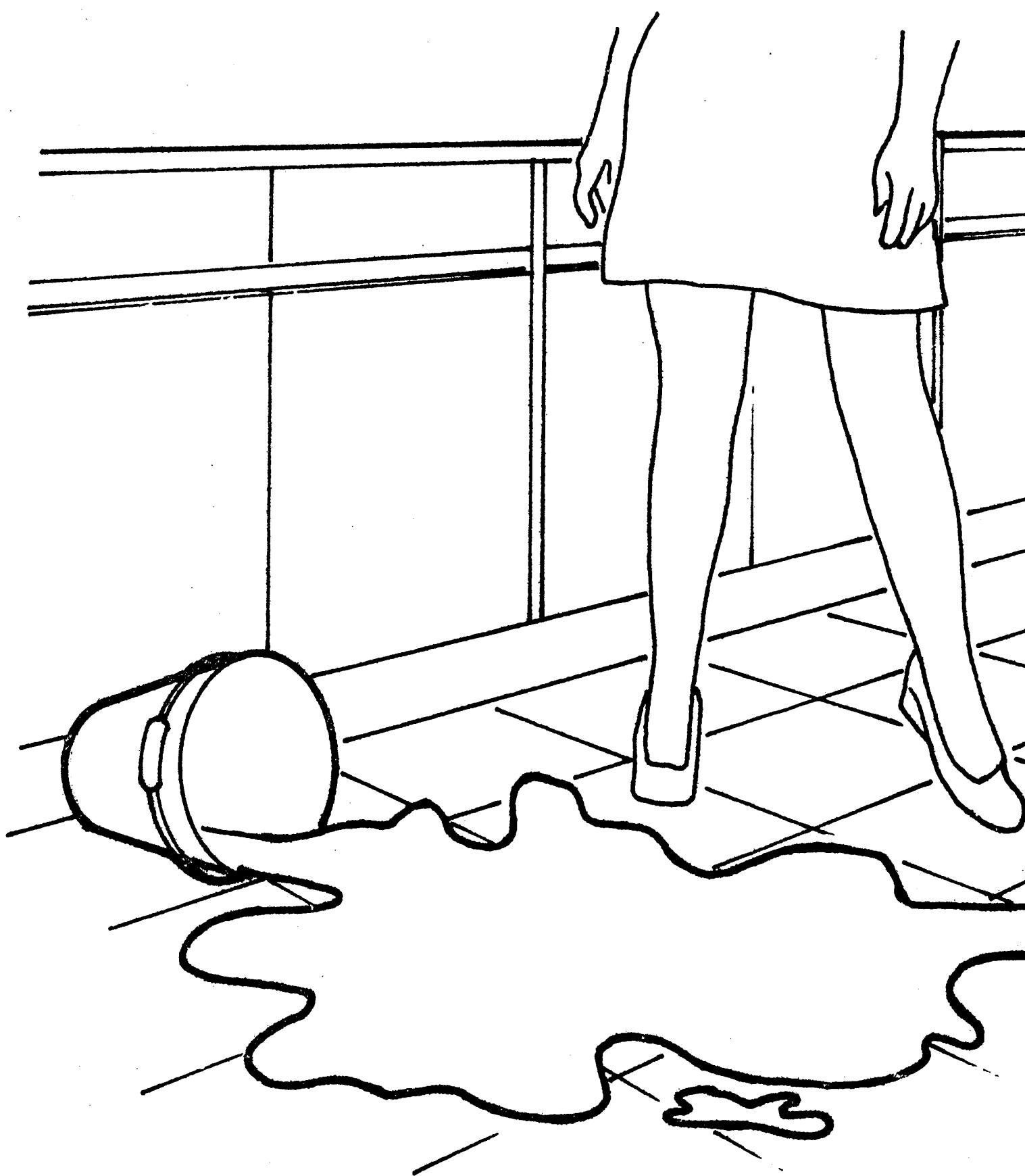


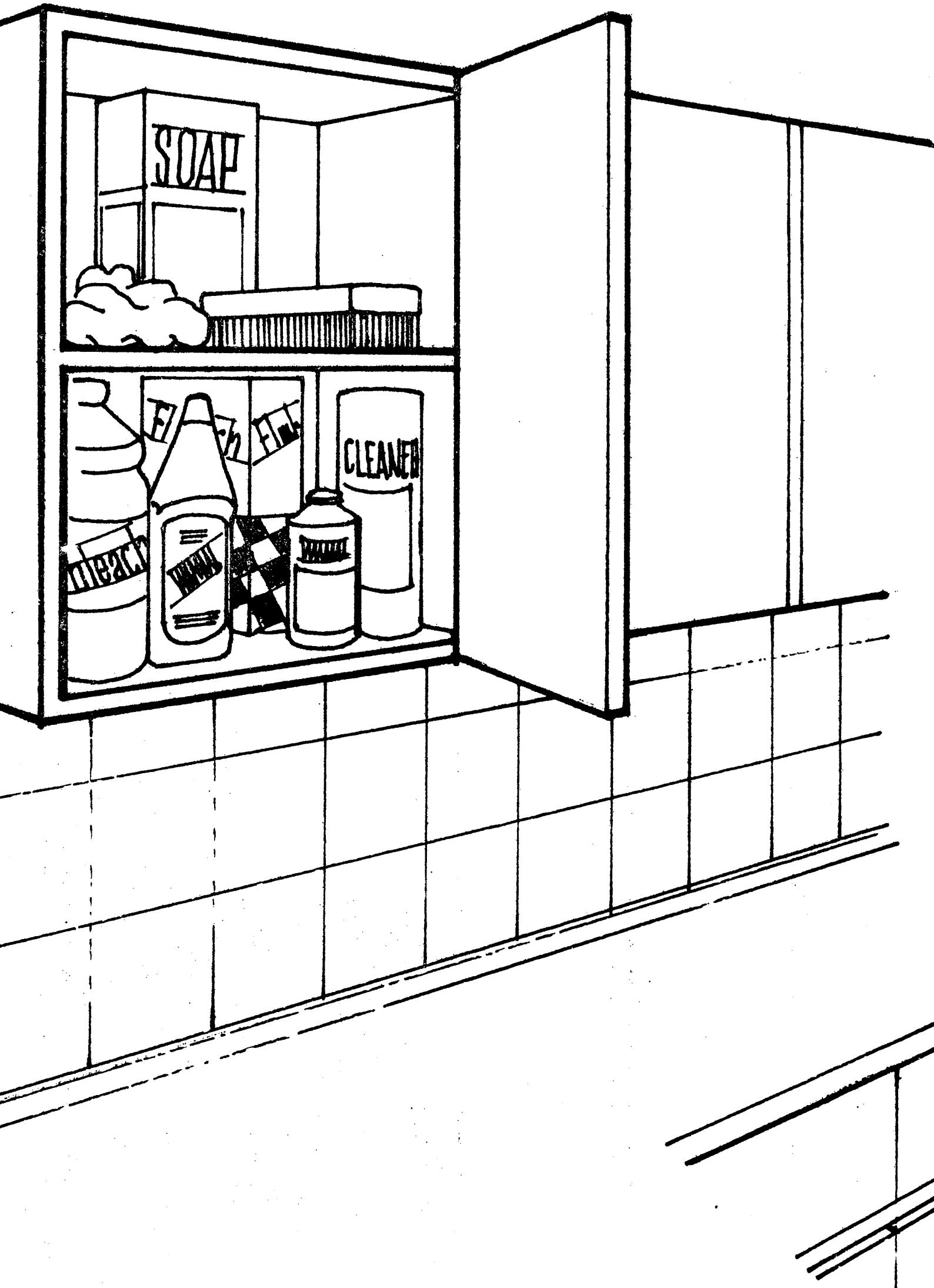


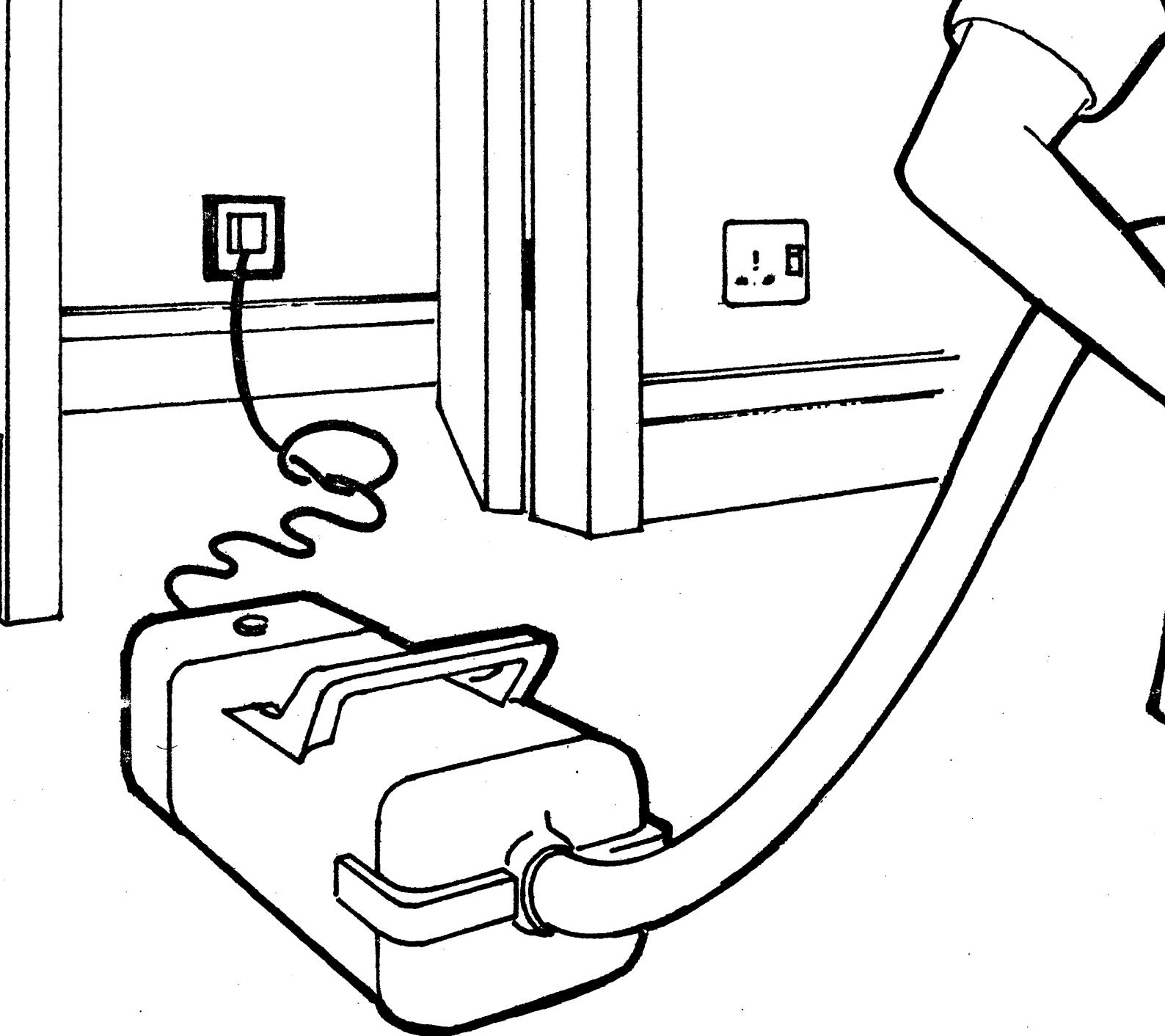


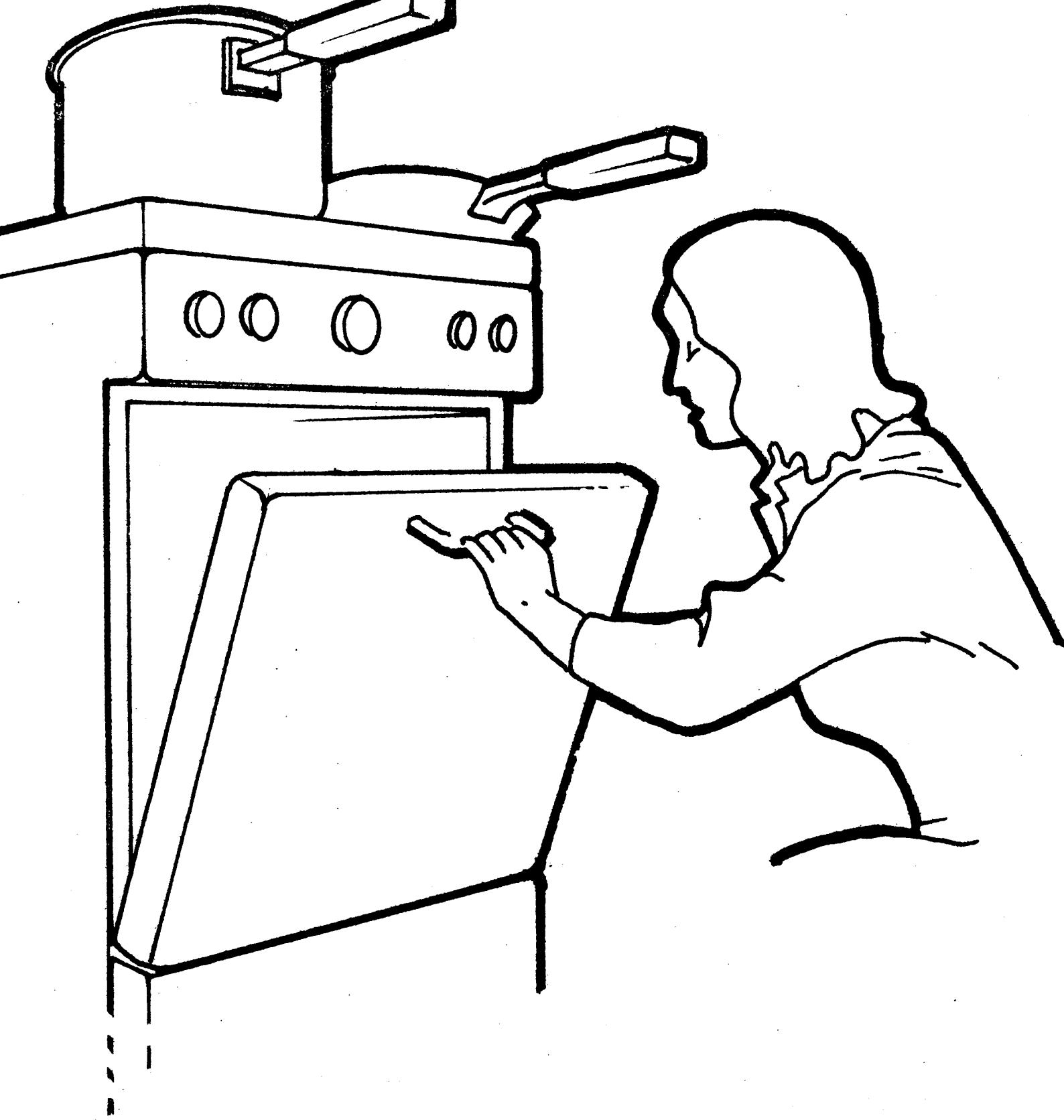


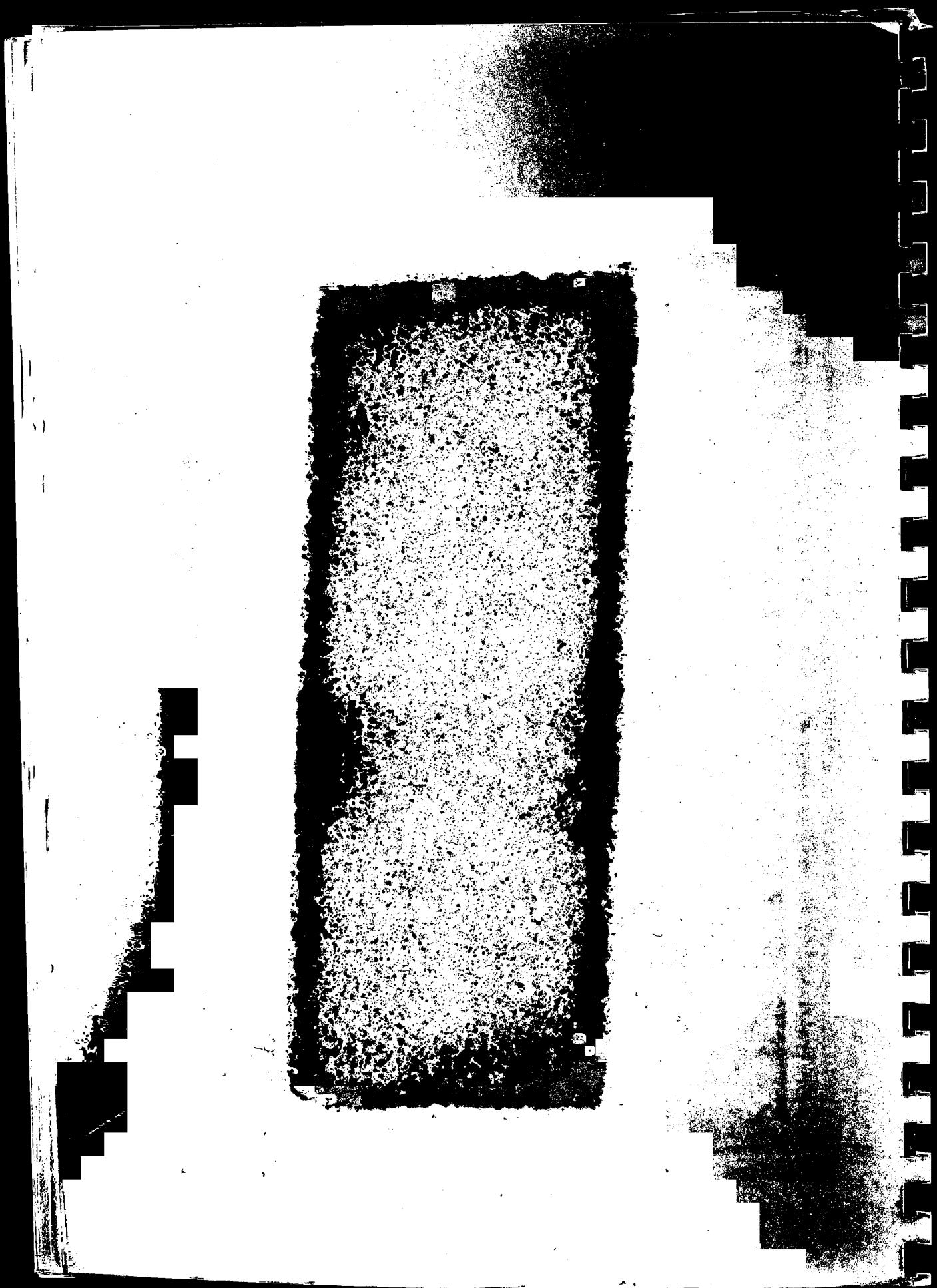












ENGLISH LANGUAGE COURSE
for
OVERSEAS HOSPITAL DOMESTIC STAFF

FURNITURE

Flash Cards (12)

CHAIR
WINDOW
TROLLEY
BED
DOOR
BATH
WC
REFRIGERATOR
TABLE
CUPBOARD
BEDSIDE LOCKER
ELECTRIC COOKER

King's Fund Centre

ENGLISH LANGUAGE COURSE
for
OVERSEAS HOSPITAL DOMESTIC STAFF

FURNITURE

Flash Cards (12)

CHAIR

WINDOW

TROLLEY

BED

DOOR

BATH

WC

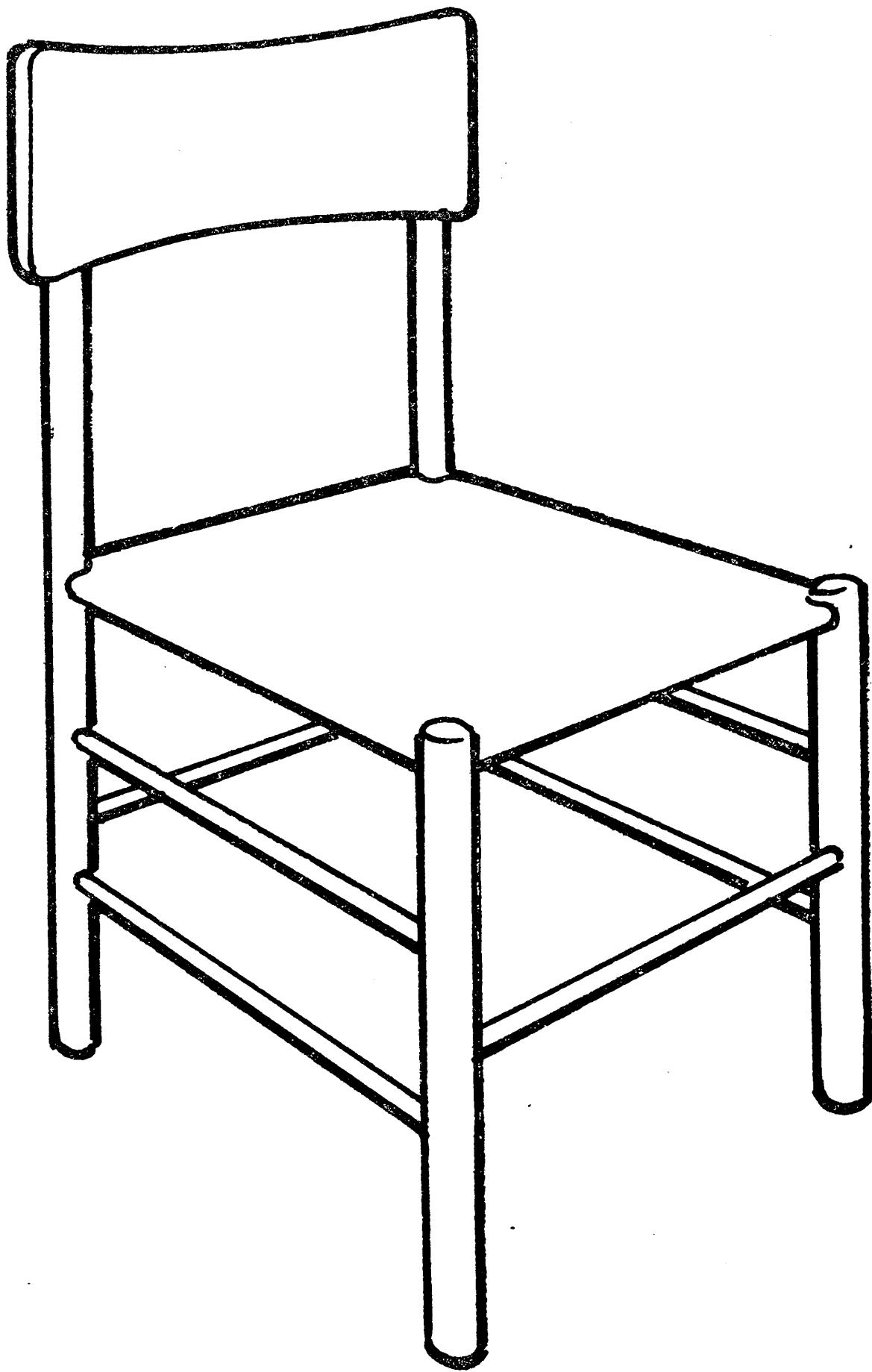
REFRIGERATOR

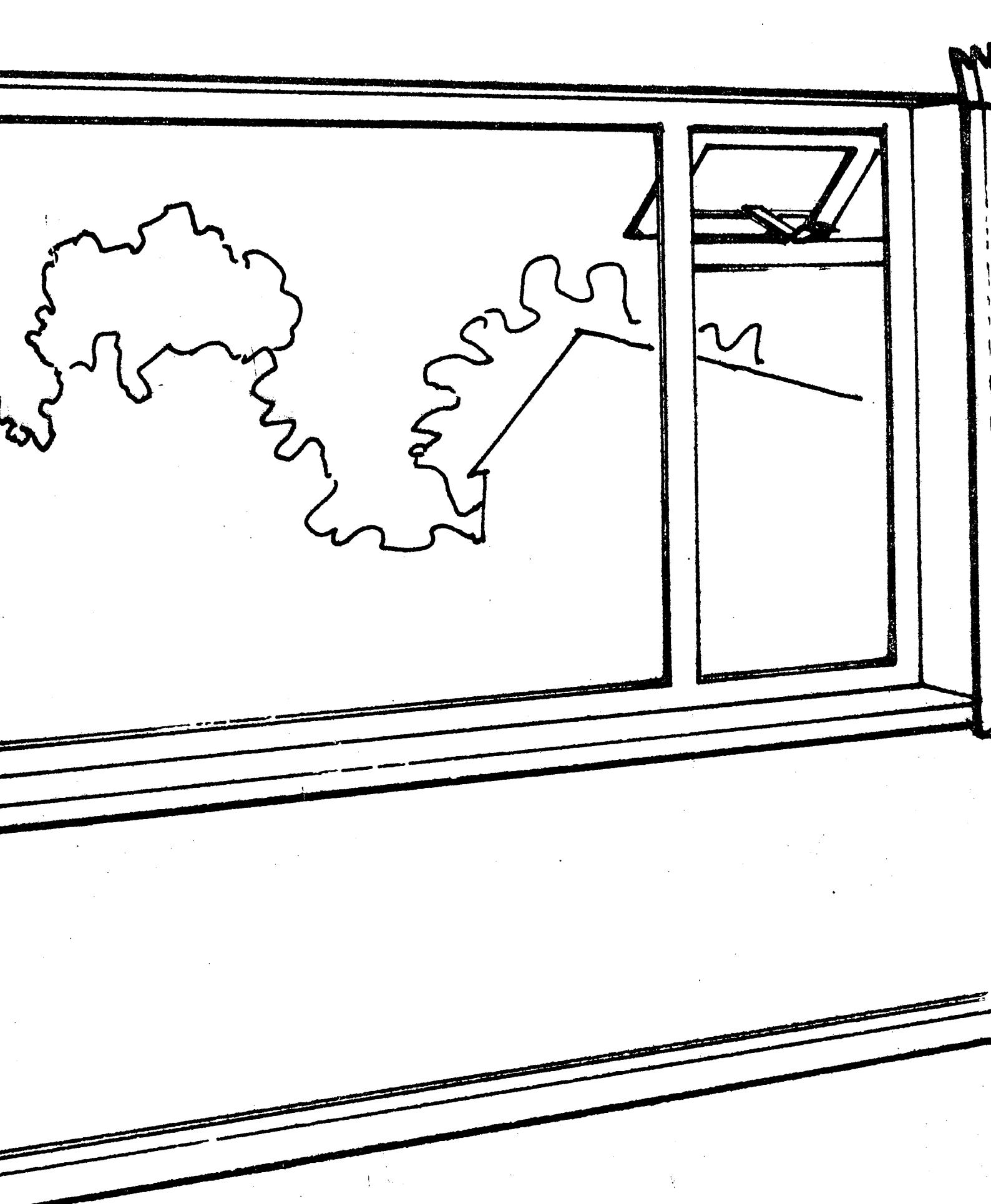
TABLE

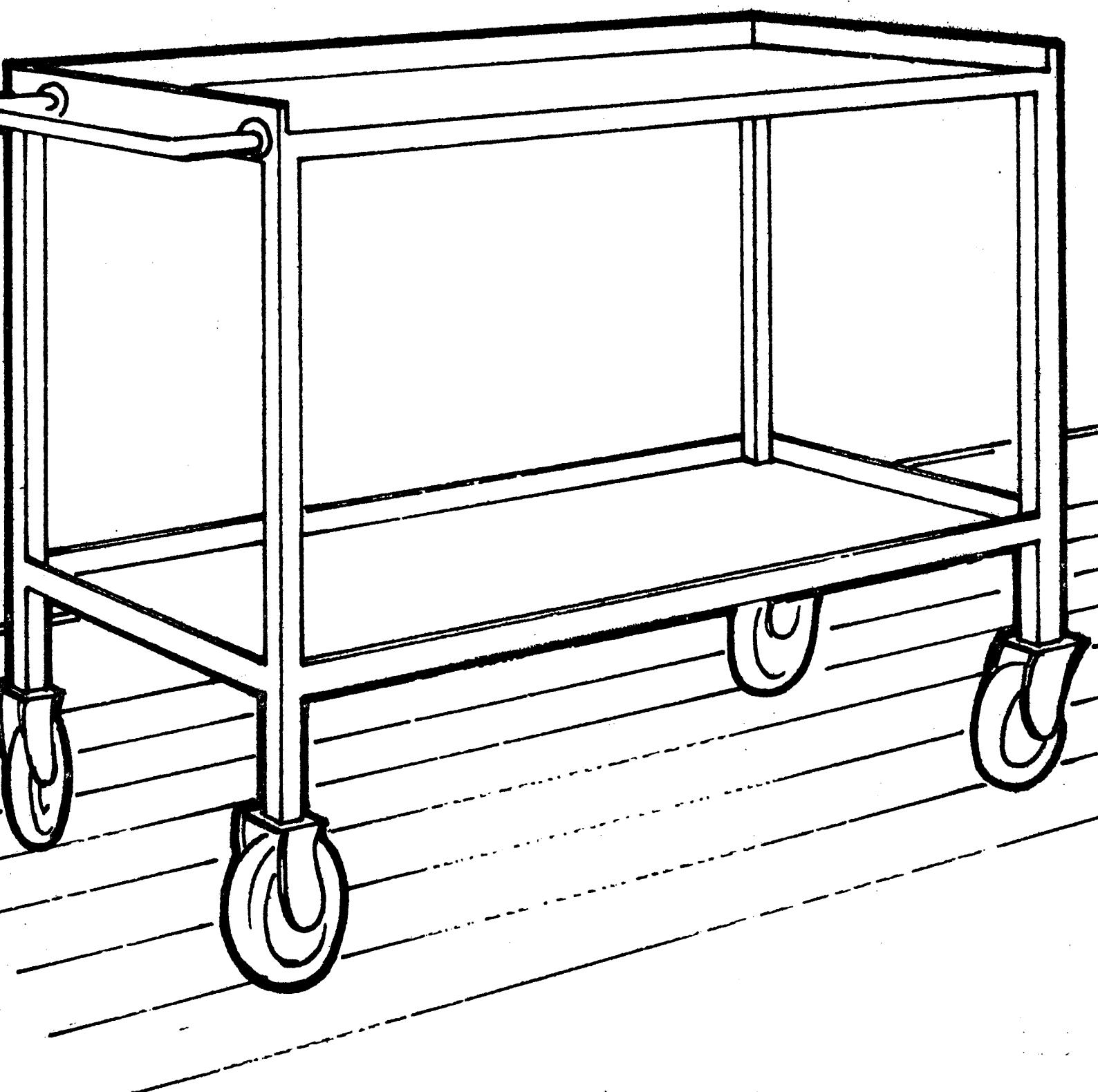
CUPBOARD

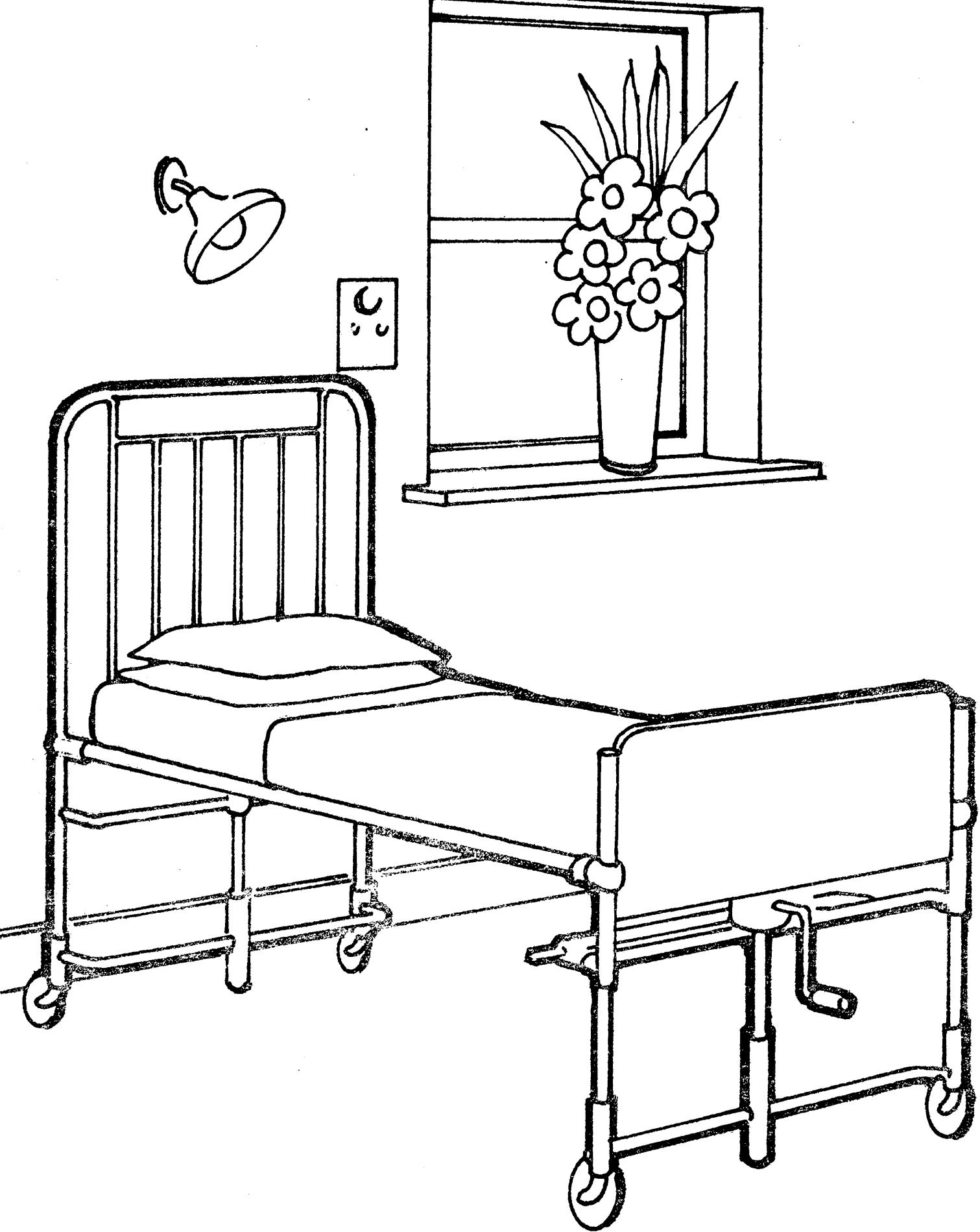
BEDSIDE LOCKER

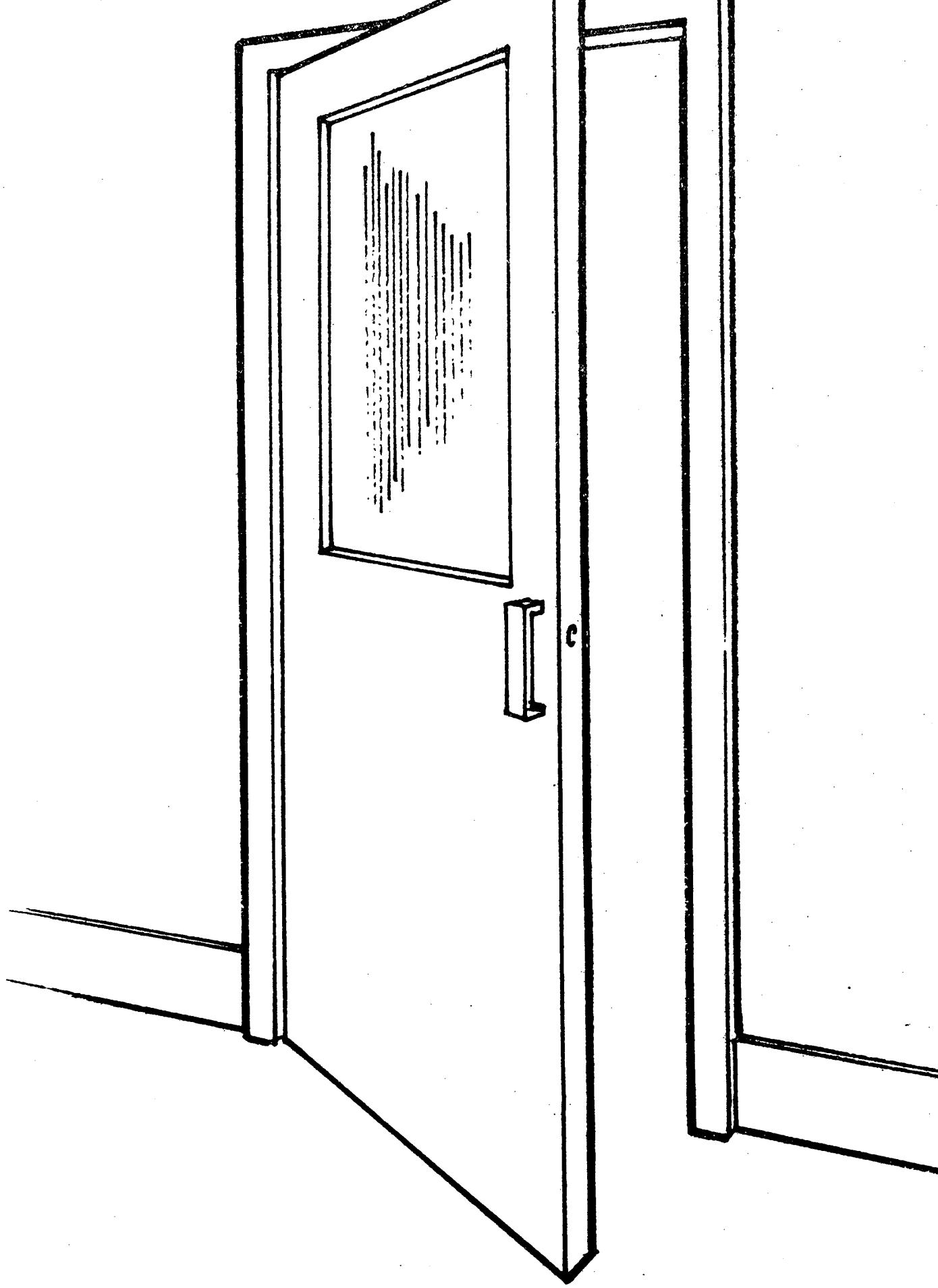
ELECTRIC COOKER

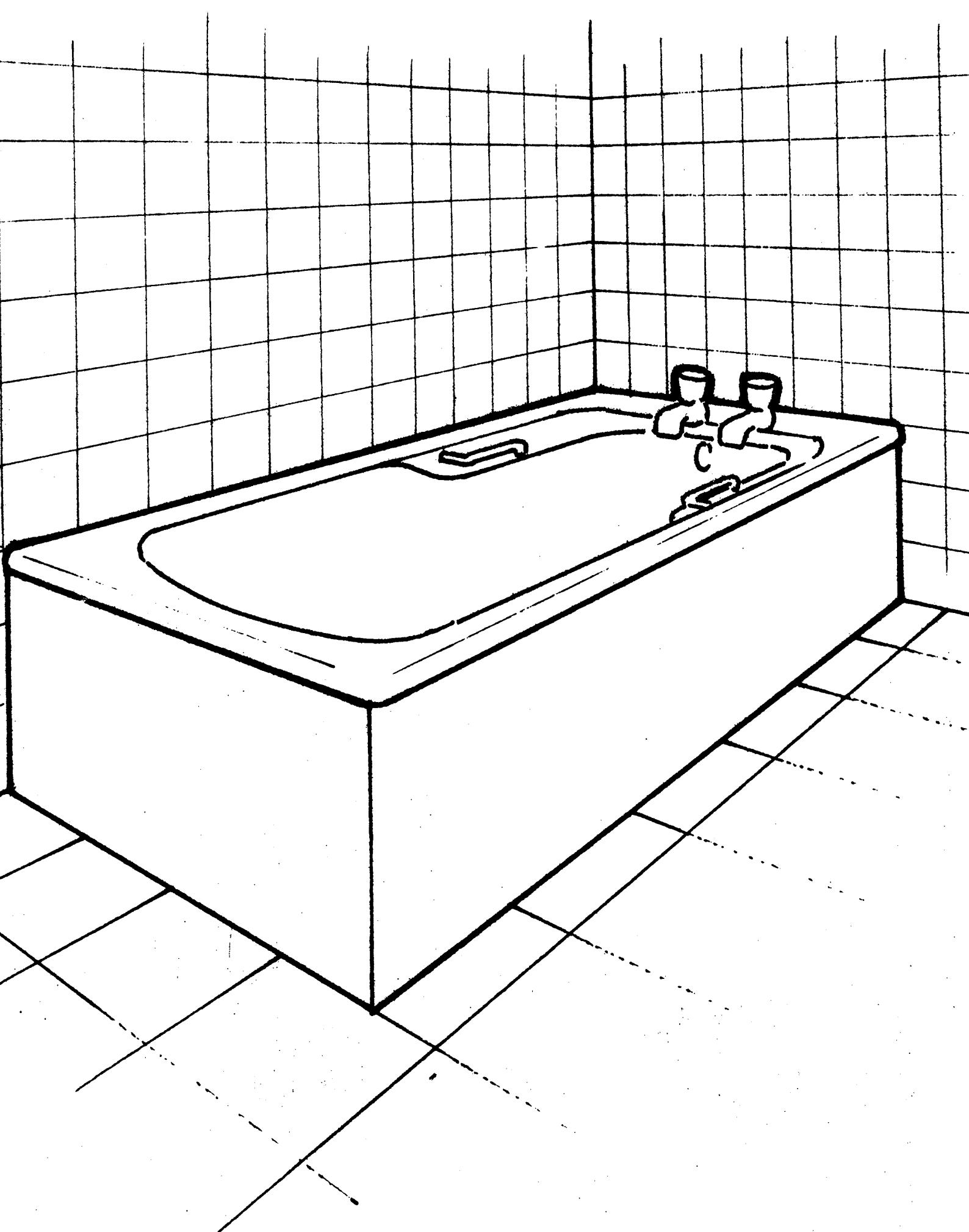


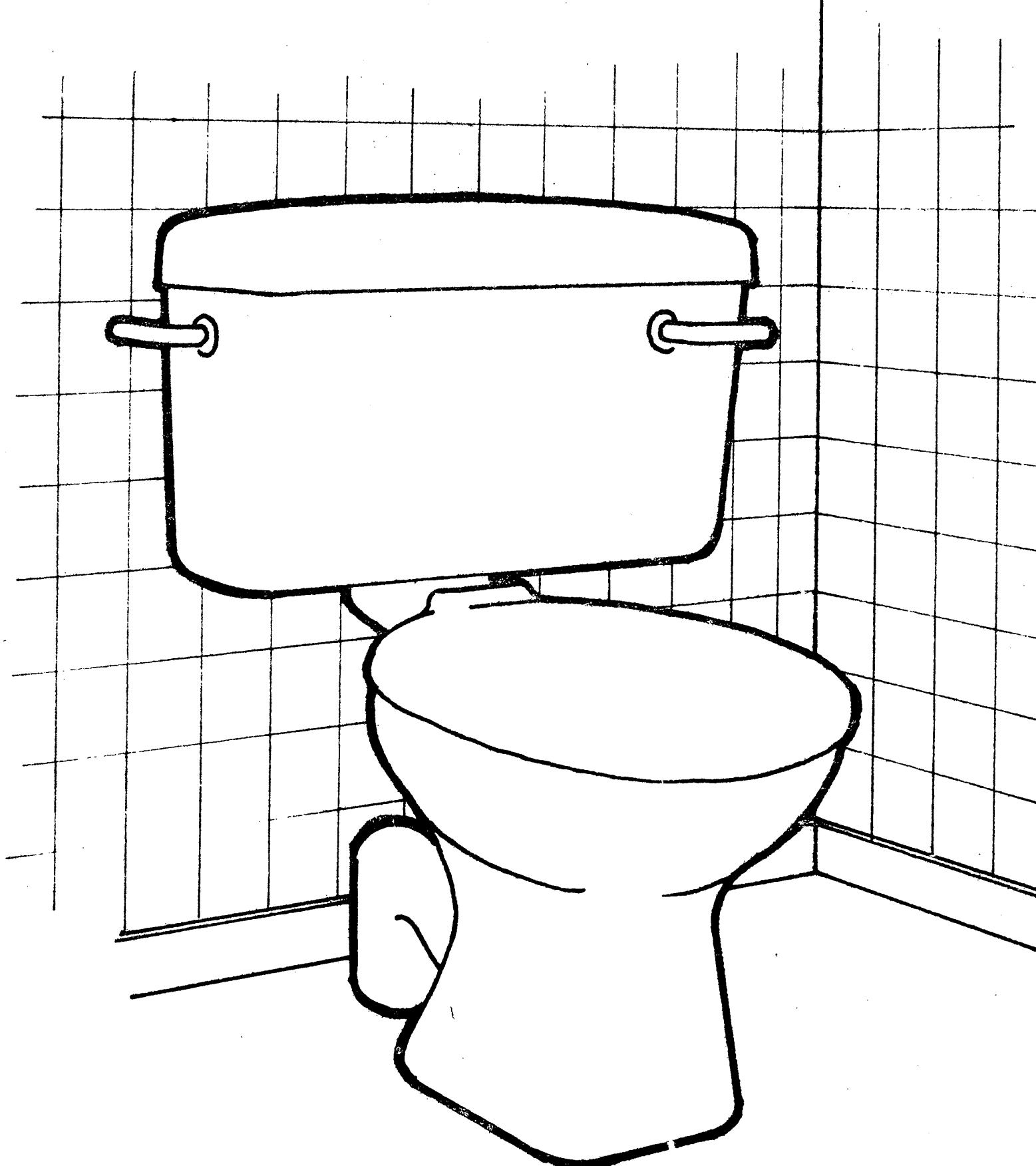


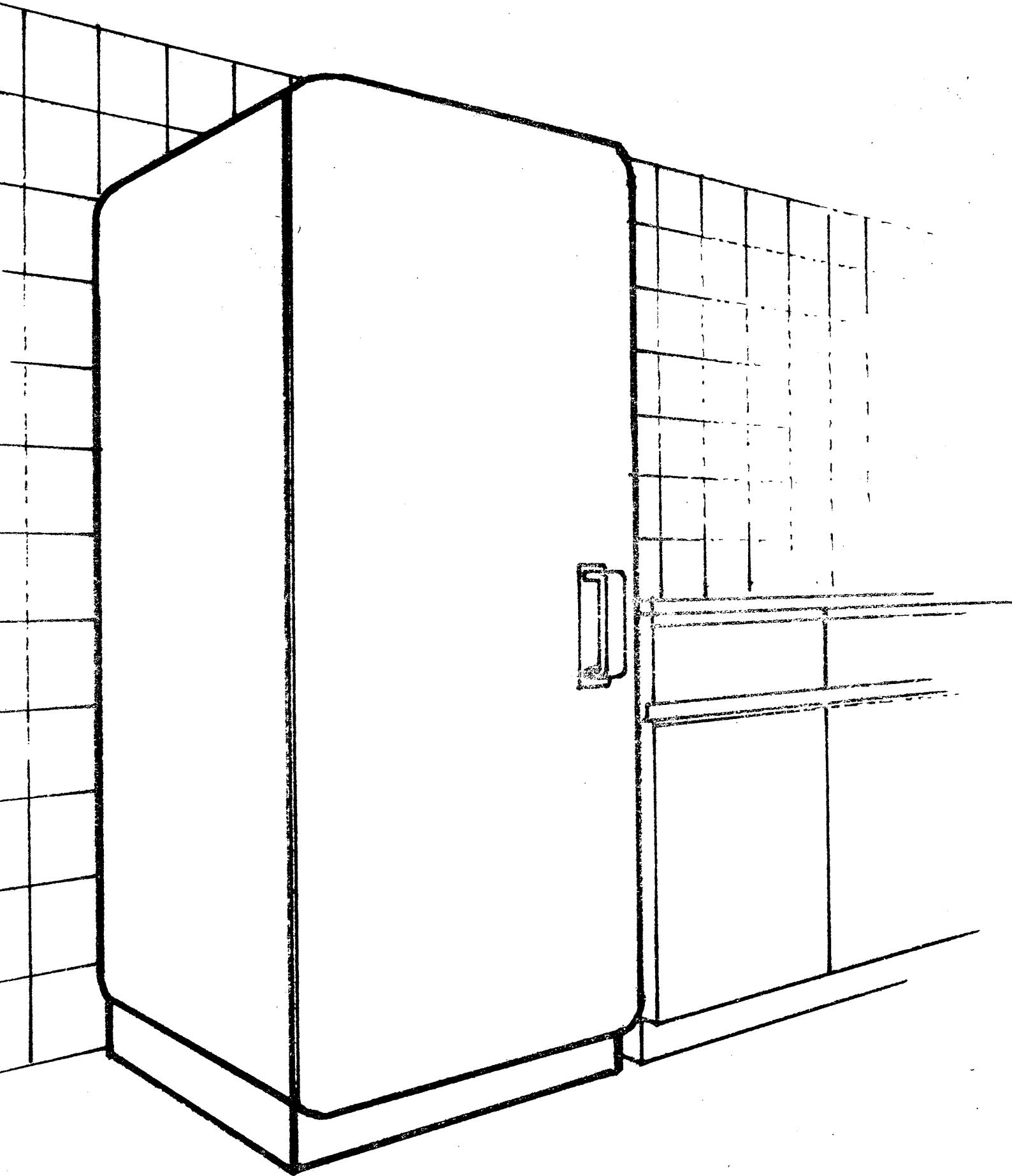


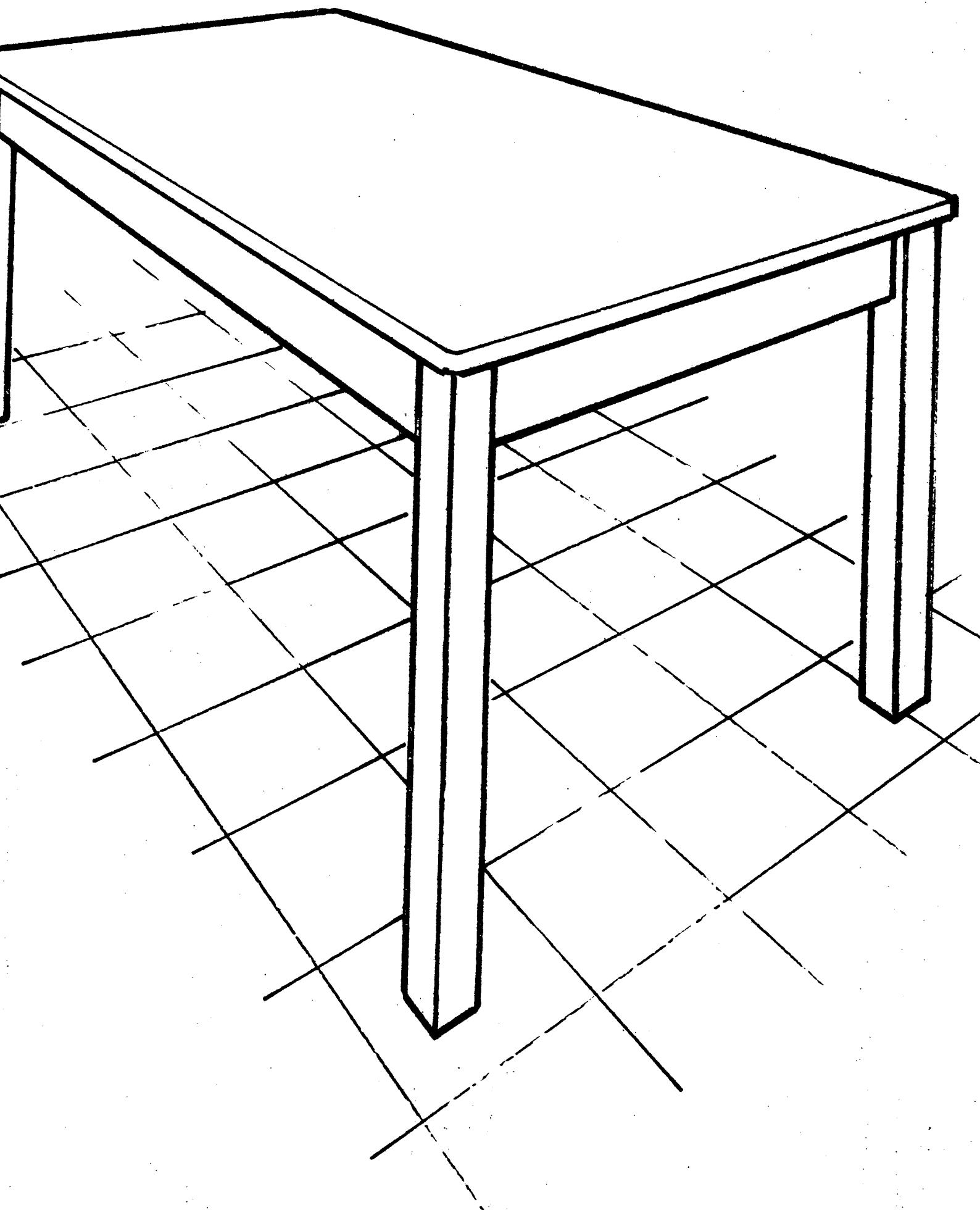


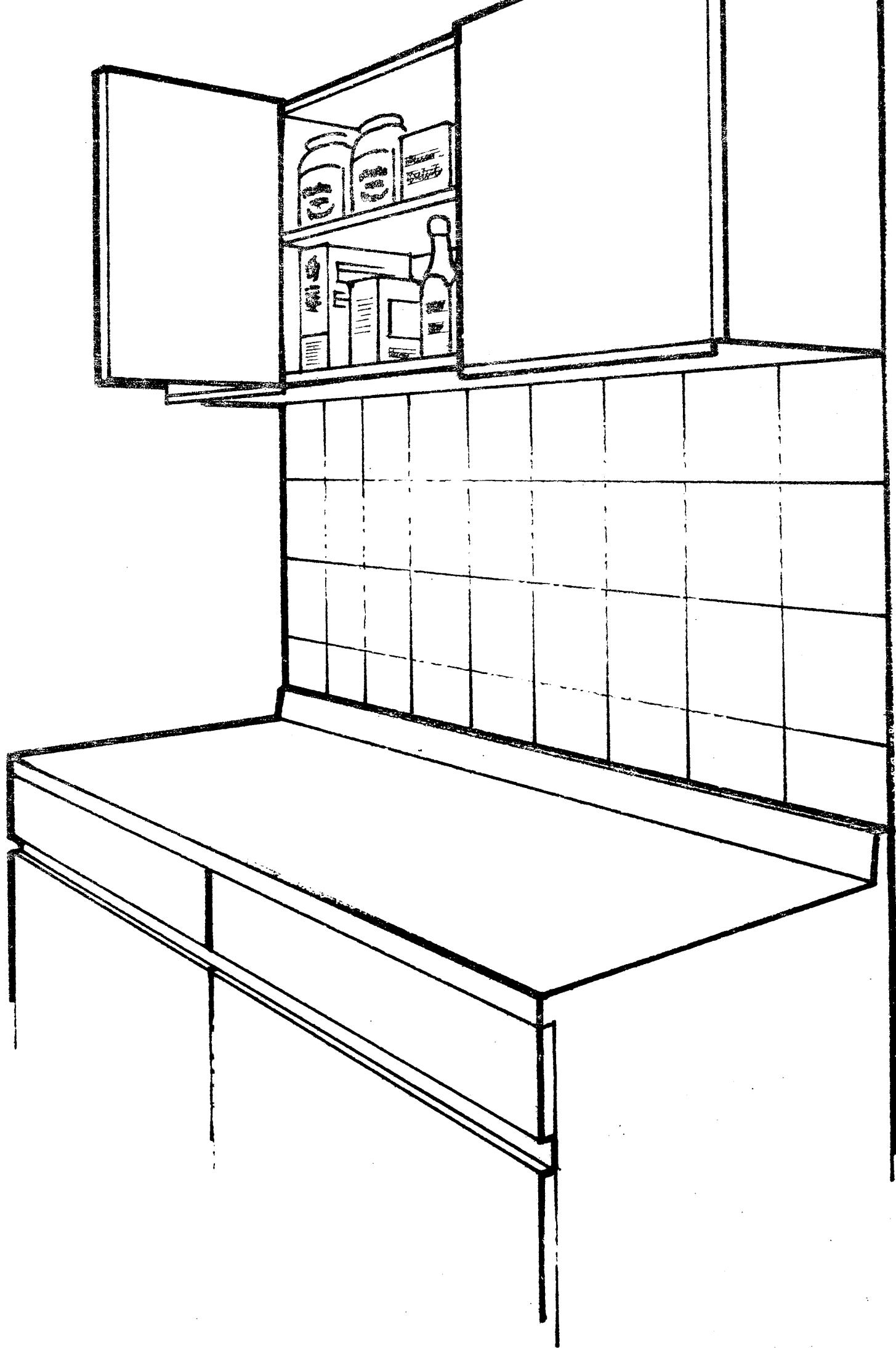


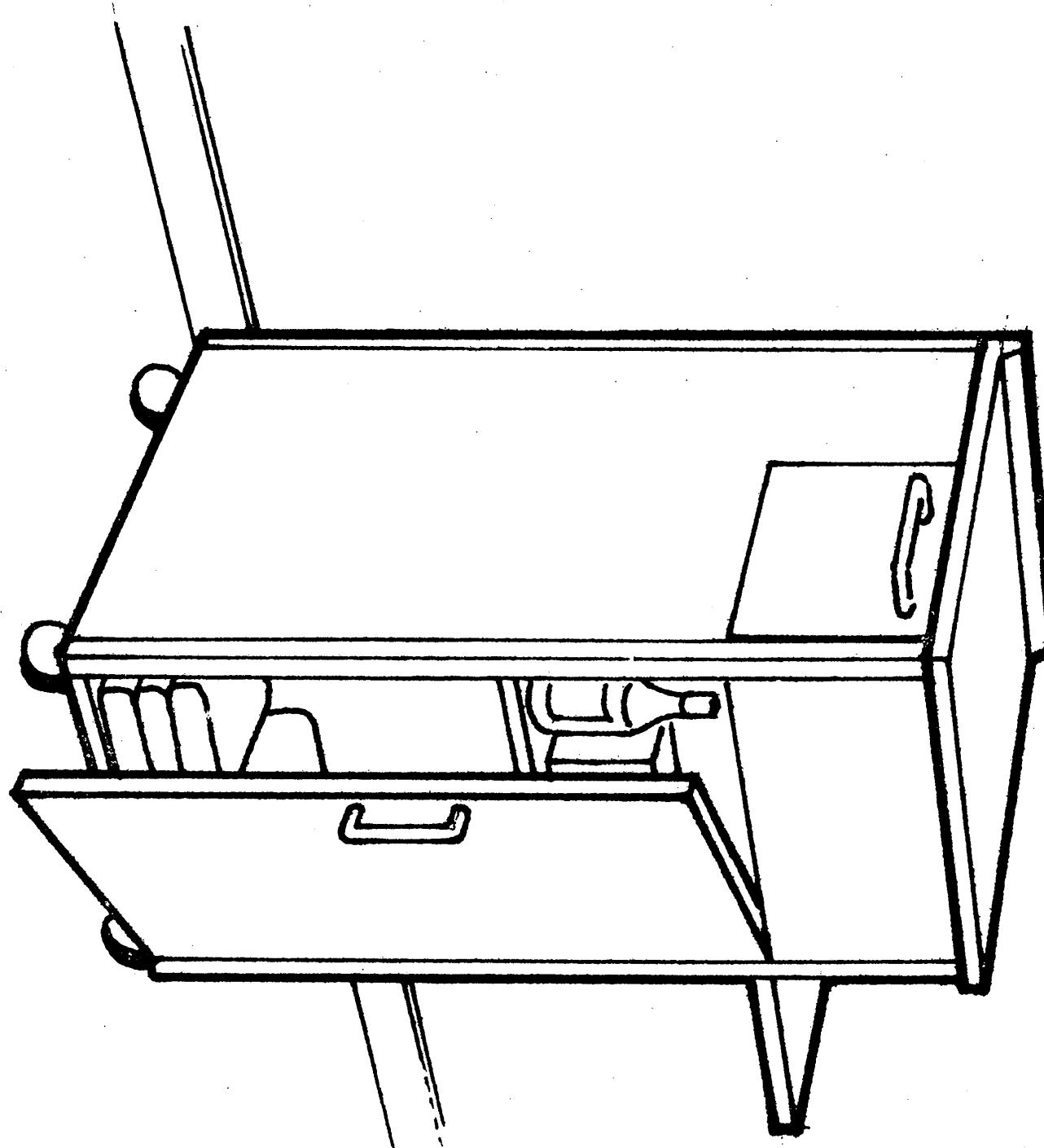












c
c
c

