



Technical Memorandum: 2016 Update of the FSBPT TOEFL Standard
Oct. 14, 2016

This memorandum is in response to a request from the Physical Therapy Board of California (CA Board) to provide additional information regarding the decision of the Federation of State Boards of Physical Therapy (FSBPT) to revise their recommended minimum TOEFL scores. Specifically, the CA Board requested information pertaining to why the CA Board should adopt FSBPT's minimum scores, as opposed to any other entity's standard (e.g., the United States Custom and Immigration Service [USCIS]).

FSBPT's previous standard was set in 2004 (and adopted in 2005), using a small panel of physical therapists alongside representatives of other healthcare professions.¹ The technical documentation relating to process for setting the standard is limited. Similarly, it is unclear how the standard was communicated at that time to licensing jurisdictions. We do know that some jurisdictions adopted a "Composite" score standard that consisted of the Listening, Reading, and Writing section scores (totaling 63), and a separate standard for Speaking (26). It is unclear whether the recommendation at this time came from FSBPT staff or elsewhere.

The derivation of the standard used by USCIS is also unclear, as it is not recorded in the Code of Federal Regulations (CFR), which was last updated in 2003.² It was likely adopted subsequent and pursuant to FSBPT's adoption of the 2004 standard, based on the timing of ETS's transition from a TOEFL CBT, which is computer-based, to the TOEFL IBT, which is administered live over the internet and is scored differently from the scores encoded in the CFR.³

Most, but not all licensing jurisdictions adopted the standard recommended by FSBPT. Some jurisdictions adopted a total minimum TOEFL score without requiring minimum section scores, some adopted different minimum section scores, and some adopted no standard at all. Additionally some jurisdictions have different rules for who is required to demonstrate proficiency in English. More details can be found in FSBPT's Licensure Reference Guide.⁴

In 2015, FSBPT determined that updating the TOEFL standard was necessary. Our decision was based on the following reasons.

- The TOEFL standard was going to be a requirement for all NPTE candidates in 2018.
- The NPTE Technical Advisory Panel (TAP) strongly suggested that we reconsider the TOEFL standard, given possible changes in the profession, candidate base, and the PT patient population. Given these potential changes, the TAP was concerned that the 2004 standard might not represent what is minimally required for safe and effective performance among

¹ http://www.fsbpt.org/download/forum_vol20_no2.pdf, see p.10

² <https://www.uscis.gov/ilink/docView/SLB/HTML/SLB/0-0-0-1/0-0-0-11261/0-0-0-15905/0-0-0-16755.html>

³ *Ibid.*

⁴ http://www.fsbpt.org/Portals/0/documents/free-resources/JLRG_FEPT_EnglishLanguageRqmts_201412.pdf



current PTs. This situation could be in at variance with the *Standards for Educational and Psychological Testing*.⁵

- The 2004 standard did not explicitly consider whether a standard was appropriate for Physical Therapist Assistants (PTAs). Since that time, the number of foreign-educated candidates taking the NPTE-PTA has grown substantially. FSBPT staff wanted to have an expert panel consider whether an English proficiency standard was appropriate for the PTA exam.
- FSBPT staff believed that the standard would be more defensible if we included a larger, more diverse expert panel, representing PTs educated outside of the United States and a broad range of practice settings.

As a result of the March, 2016 TOEFL standard review, the standards adopted by FSBPT's Board of Directors are more defensible and relevant to current safe and effective practice than the 2004 standard. Key points in FSBPT's position are as follows.

- The Speaking section standard was updated to reflect current practice and impact concerns. The minimum score of 26 excluded an unreasonable proportion of candidates who were sufficiently proficient in English, and the patient population today is more familiar with and accepting of minor language issues.
- The Writing section standard was updated to reflect current practice. Electronic medical records have reduced the need for extensive writing. In many cases, PTs and PTAs are selecting from a list of options on a screen rather than making handwritten notes.
- The Reading section standard was updated to reflect current practice. The counter to the reduced need for writing was an increased need to read and integrate information.
- The Listening standard was, in the view of the panelists, set too low. Listening is as important as speaking in patient interactions, especially with a growing emphasis on PTs being a first point of contact and the growing proportion of medically complex patients.
- The new standards are well documented, and include a performance level description of minimum competence in English for safe and effective practice.
- The expert panel was broadly representative of licensing jurisdictions, practice settings, patient populations, and approximately half of the panel members were educated outside of the United States.

In addition to the previous points regarding the improved relevance and defensibility of the revised standard, there may be unintended consequences for jurisdictions that do not adopt the new FSBPT standard.

- Because the FSBPT standard will be a requirement for candidates taking the NPTE, jurisdictions that retain the previous standard will effectively be holding candidates to a much higher standard than either standard alone. Under California's current model, for example, the minimum score would total 93 scale score points (FSBPT minimums for Reading = 24, Listening = 21, and Writing = 22, and the CA Board's minimum for Speaking = 26).

⁵ American Educational Research Association, American Psychological Association, and the National Council on Measurement in Education (2014). *Standards for Educational and Psychological Testing*. Washington, DC: American Educational Research Association.



- USCIS's standard does not apply to all foreign-educated candidates, only those seeking a specific type of healthcare workers visa. Jurisdictions that do not adopt the current FSBPT standard may be holding foreign-educated candidates to a standard that does not apply to them.
- The USCIS standard may be updated to reflect FSBPT's revised standard. FSBPT is still making policy determinations about when the previous standard will no longer be accepted. We expect to inform USCIS of the changes once those policy decisions have been completed. We expect that USCIS will begin considering whether to update their policies at that time.