

NPTE Remediation — To Require or Not to Require

This article is based on a presentation by Harvey Aikman, PT, Chair, Texas Board of Physical Therapy Examiners; Jeanne L. Cook, PT, PhD, Department Head, Department of Physical Therapy, Missouri State University; Scott D. Majors, Executive Director, Kentucky Board of Physical Therapy; Dr. Kay Tasso, PT, PhD, PCS; and Richard Woolf, PT, DPT, CSCS, FSBPT Assessment Content Manager, at the 2016 FSBPT Annual Meeting.

Should your jurisdiction require remediation for candidates who fail the NPTE? Is this the responsibility of the PT board, educational program, or the candidate? This panel discussion reviewed the experiences of three jurisdictions and a PT education program. Information was shared on how jurisdictions handle remediation, including when remediation takes place, how it is tracked, and its perceived effectiveness. Additionally, panelists discussed remediation at a PT educational program and how evidence-based tools can be suggested for remediation. The panel addressed questions from the audience.

The *Standards for Educational and Psychological Testing* is the bible for examiners. It's the standard for how the NPTE is developed. It tells examiners what to do and how to do it. One of the standards discussed was the Validity of Test Consequences. It asks, "Is what we do based on test scores the right thing?" When a candidate fails, is it the examiners' only responsibility to prevent them from practicing, or is it the responsibility of boards to give them feedback on remediation?

In November 2010, Kentucky passed an administrative regulation requiring a Board-approved remediation plan after a prospective licensee failed the NPTE three times. A year later, the Kentucky Board of Physical Therapy (KBPT) limited the number of failed examinations before the applicant was banned for life at six. That was for either the PT or PTA exam or a combination of the exams and in any jurisdiction, not just Kentucky.

In a typical scenario, after three unsuccessful attempts, the applicant is notified in writing that all future applications must be accompanied with a remediation plan based on the FSBPT's Performance Feedback Report (PFR). The applicant's plan, including deficiencies identified by the PFR and prior NPTE scores, is reviewed by the Board's remediation workgroup. Once the plan is approved, the applicant is notified by email that he or she is authorized to retest.

A recent case example is a PTA applicant who had failed the NPTE on four occasions in another state. He applied to take the April 2016 exam in Kentucky. The submitted remediation plan included three PFRs identifying areas of weakness, evidence of tutoring,

use of the O'Sullivan and Scorebuilders study guides, completion of an online Therapy Exam Prep Program, and contact with a former program instructor. The remediation plan was approved, and yet the applicant did not pass the exam.

The same PTA applicant applied to take the test for a sixth time in October 2016. The submitted remediation plan included reviewing the previous PFRs, a bimonthly consultation with a psychologist to address test anxiety and test-taking strategies, and recent employment in a physical therapy clinic. The remediation plan was initially deemed "questionable," but was ultimately approved. The applicant failed on the sixth attempt as well.

The KBPT lists about nine products for remediation applicants to use to better prepare for the tests. At this point, the products were reviewed to ensure they were still available, but no review of the products themselves were undertaken. In fact, the KBPT explicitly states it "does not assume legal liability or responsibility for the accuracy, completeness of any information, apparatus, product, or process disclosed. This information is provided for informational purposes only. The Kentucky Board of Physical Therapy does not endorse, recommend, or guarantee the products, services, information described or offered by the companies listed."

Despite that disclaimer, during its September 22, 2016, meeting, the Board discussed if it does in fact assume some responsibility to ensure the effectiveness of the products is lists. It also discussed if it has a duty to periodically monitor and make a qualitative assessment of a listed company's effectiveness. Further, the Board discussed how to handle a company that provides an acceptable product one year but a substandard model in a subsequent year.

Other issues discussed included the disclaimer at the beginning of the remediation resource document. If an applicant relies on the resources listed and submits a remediation plan based on those resources, has the plan approved, then fails the NPTE, does the applicant have a legitimate cause of action to sue the Board?

The Board also discussed if the development of the remediation plan should be between the Board and the applicant or between the applicant and the educational institution. In being faithful to its mission of public protection, the Board also discussed how far it should go in ensuring an applicant passes on the sixth attempt.

The Board voted the table the issue to its November meeting, hoping to bring back ideas from the FSBPT Annual Conference.

Florida has similar language in its statutes. If an applicant fails three times, they are required to undergo "additional education or training requirements prescribed by the board." However, Florida bans applicants from taking the test again after the fifth failure.

In August 2013, the Florida Board of Physical Therapy (FBPT) began a review of its rules. Florida has a list of four "approved" courses, but no one knew what "approved" meant because the Board has no criteria for approving courses. And, at the June 2013 FSBPT member training, it was recommended that boards not be in the business of approving courses, particularly in the current antitrust environment.

There was consideration that applicants should return to their own educational programs for remediation, that it was the educational programs' responsibility to prepare the applicants for the NPTE. This, after all, was high stakes for the applicant. Many were in student loan debt to the tune of \$70,000 to \$100,000. FBPT also looked at Texas and Virginia remediation language.

At the November 7, 2013, meeting the Board voted to not change the rule. While the academics wanted to prescribe a remediation plan, the majority of the board took the position that PTs are independent professionals and so applicants need to be responsible for their own remediation plans. It is the educational institution's responsibility to ensure a candidate is prepared. Therefore, the applicant should receive remediation from them. The board staff and website could offer a list of possible alternative courses, but there would be no Board "approval" of courses.

In Texas, remediation first appeared in the rules in 1978. At the time, the Texas Board of Physical Therapy Examiners (TBPTE) administered its own test, which was written by the Board every year and changed by the Board every year. Remediation was required after the second failure; the executive director and Board reviewed each applicant's file and determined the standards to be met before the re-exam.

In 1981, the Board changed some of the remediation rules. Remediation still was required after the second and subsequent failures, but the applicant designed a course of study to be approved by the Board and administered by a Board member.

In 1993, the Board took the first steps toward an organized structure. It clarified that acceptable studies were institutional, continued education, or individually tutored. Satisfactory evidence of remedial completion included an institution's official transcript, certificate of continuing education, certificate of course completion, or a notarized statement from a tutor.

In 1994, the Board determined the structure was not being applied uniformly, so it spent considerable time creating a matrix based on the number of times failed/number of points of failure. The more times you failed and the more points you failed by determined the level of remediation required. No one knows how the matrix figures were determined because the notes on determination do not exist.

The Board revised the rules again in 2001, requiring the applicant to describe their weaknesses and develop and plan of remediation. Board members at that time acted as tutors.

In 2006, the exam score reporting was changed from a raw score to a cut score and Texas updated its matrix accordingly. But again, there is no evidence of why the numbers on the new matrix were chosen. In 2009, the matrix again was updated when the Texas Practice Act changed from continuing education (CE) to continuing competence (CC). But the matrix continued to be built on basically the same framework from the very beginning with no real basis for why.

By 2015, Texas was licensing about 30,000 PTs and PTAs. At the same time, the six-time

lifetime limit on NPTE attempts was instituted. The Board decided to look at just how effective it had been in its management process and tried to determine if what it was doing made any sense. The Board determined it had no justification whatsoever for requiring people to do the remediation it had because it had no evidence to support that completing any level of those remediations ultimately led to passing the exam.

The Board met with about seven of the Texas schools to discuss with them whose responsibility it is to provide the information people needed to pass the exam. Is it the faculty's responsibility, the student's responsibility, or the Board's responsibility? At the meeting, the Board determined its responsibility is protection of the public and not necessarily to protect the licensee's ability to get a license. Instead, the Board's responsibility is to ensure PTs and PTAs are competent to practice. It was the determination of the Board and the education committee at that time that the responsibility for remediation lies more in a contractual relationship between the school the applicant attended and the applicant.

The Board decided it would make suggestions for study, using the NPTE Performance Feedback Report (PFR), commercial means, tutorial hours, and continuing education courses. But the determination of how it would be done was shifted to the responsibility of the applicant.

The panel then shifted to the perspective of a physical therapist education program.

In Missouri there is no state requirement for remediation. Once students graduate from Missouri State University (MSU) or another PT program, the program has no authority to call them back and remediate.

Programs are concerned about overall pass rates, however, because they affect accreditation standards. There is a strong motivation for programs to have students pass on the first try for the reputation of the program. Because Missouri programs cannot force students back for remediation if they fail to pass the NPTE, programs focus on prevention. MSU tries to ensure first-time passage. The program utilizes computer-based exams, builds their test formats as similar to what students will see on the NPTE, and requires students to take commercial practice exam assessments that are purchased by MSU.

In the final semester, students are required to take the Academic Practice Exam and Assessment Tool (PEAT) and another practice exam. If issues arise from those exams, students are required to take a Guided Self-Assessment. Because the students are still enrolled, the program can force them to look at how they're performing and why they are performing that way.

The MSU faculty has identified five basic issues of why a student has difficulty with the exam. They do not know the information, they misread the question, they narrow the answer down to the possibility of two then pick the wrong one, they select the correct answer but then change it, or they do not respect the test because of hubris.

Self-assessment is designed to give the students some tools so when they take the test they have some method of figuring out how to help themselves, especially if they choose not to

come back.

The focus of the faculty guidance is to try to guide the students to not only self-assess and figure out what they're doing wrong, but then to ask the right questions so students can begin to develop a plan they can then use to fix the problem. Students need to identify the problem, with help, then fix the problem and come up with a plan. They are supposed to be responsible professionals, and the faculty's job is to help them do that. Once the student answers the questions posed by faculty to find out why they are having a particular difficulty, the student is required to devise a remediation plan to address those issues.

For the few who return after failing the NPTE, there are a few precautions that have to be taken. To protect the integrity of the NPTE, programs must ensure students do not talk about specific questions on the exam. They also must ensure that faculty doing committee work with FSBPT do no work with students.

The Federation has several tools to help boards with remediation efforts, should they decide to do so. If boards do require remediation, make sure it works. It should be based on past experience, research-based, and logical. Above all, it should not be punitive. It should be designed to move the applicant forward. But at the end, the applicant must be able to stand on his or her own two feet and pass the exam.

Eighty-four percent of NPTE PT applicants pass on the first attempt. Of those who fail, the average point gain the second time is 36 points. It then falls though the third through fifth attempt, and rises some in the final gasp of the sixth attempt.

FSBPT provides PFRs and PEAT. PFRs are best purchased after the first attempt, with a lesser impact in subsequent testing. Applicants who use PFRs generally see a 5- to 30-point gain. But once the PFR identifies areas of weakness or test-taking issues, it's up to the applicant to find ways to shore up those areas. PFRs can also be used multiple times to see if perhaps there's a pattern.

PEAT can be used after the first attempt, or even in the classroom before the first attempt. Individuals generally realize a 30-point gain from using PEAT. Each PEAT form comes with a PFR. PEAT can only be used once because the questions do not change. Applicants purchase it for 30 days. FSBPT has developed Academic PEAT, which cannot be purchased by an individual, only by an institution for training in the classroom. One of the important aspects of PEAT is you can go back and see what questions you answered wrong and discover your weaknesses. It also provides a reference for the question the student or applicant can look up. It also provides written rationales of why each option was correct or incorrect. There is strong evidence PEAT works.

Other options include a self-study plan, but the Federation has no research on whether or not they're effective. Guided study remediation programs have been shown to be effective, particularly if they are led by a PT. If English proficiency is a problem in a particular jurisdiction, perhaps TOEFL should be a part of its remediation plans. Additional education and bridge programs are highly effective. The best preparation for the exam is a CAPTE-accredited program. Applicants from those programs pass in the range of high 90s.

In the question and answer period, much of the discussion centered on pre-screening applicants to PT programs and at what criteria should be used to remove underperforming students before graduation. All agreed it was a difficult subject.

An audience member offered that Louisiana requires remediation after the third try, and graduation from a CAPTE-accredited course after the fourth try.



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