

# How policy makers view language tests for professional registration

John Pill, Lancaster University

Susy Macqueen, Australian National University

**EDITED SLIDES**

Language Testing Forum, University of Bedfordshire

24 November 2018

# Test use

Language tests as

- social sorting mechanisms, policy mandates
- articulating “objective” standards

Need to monitor

1. fair use of tests in policy
2. positive test impact in workplace

**'No checks' on more than 80% of EU doctors working in NHS**

Fewer than one in four EU doctors had their clinical competence and language skills checked, NHS figures show

**James Meikle**

The Guardian, Wednesday 13 October 2010

**NHS staff's poor English is 'potential danger to patients'**

By Adrian Goldberg  
Presenter, 5 live Investigates

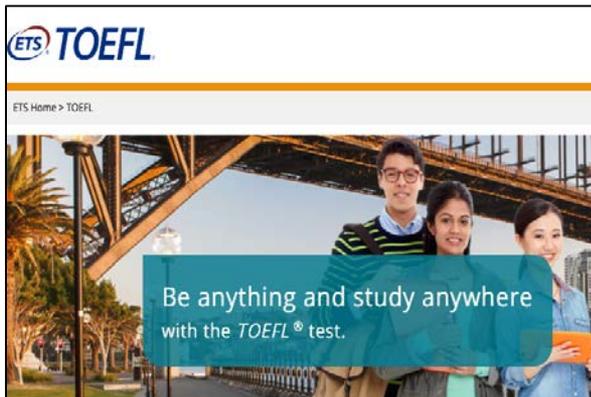
[15 Sep 2012]

# Test use

*TOEFL* and *IELTS* designed for international students joining English-medium universities

Now also used in other contexts: migration, employment

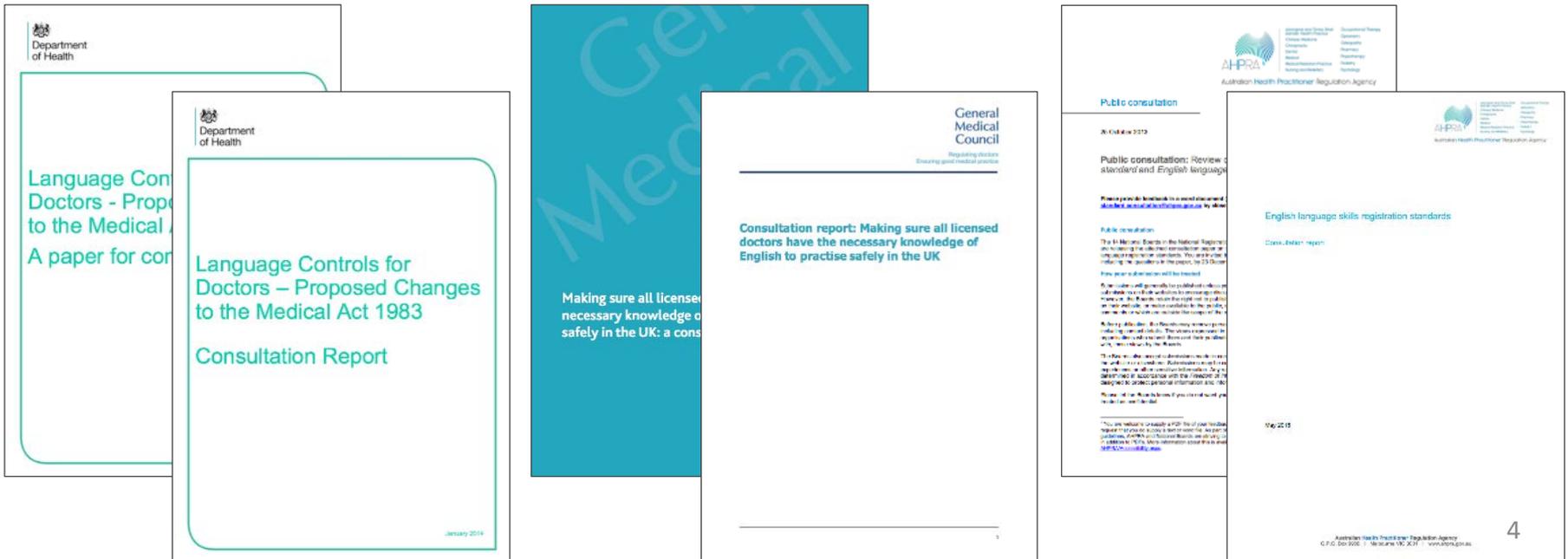
Standards are “ambitious for wider and wider acceptance” – need to be vigilant that they are not the wrong standards (Davies, 2008)



# Test mandate discourse

## Study 1

Document analysis of consultation discourse in the UK and Australia about professional registration of doctors trained outside these jurisdictions



## **Research question**

How are the test constructs perceived and/or represented by policy makers?

## **Data analysis**

**Study 1:** document analysis

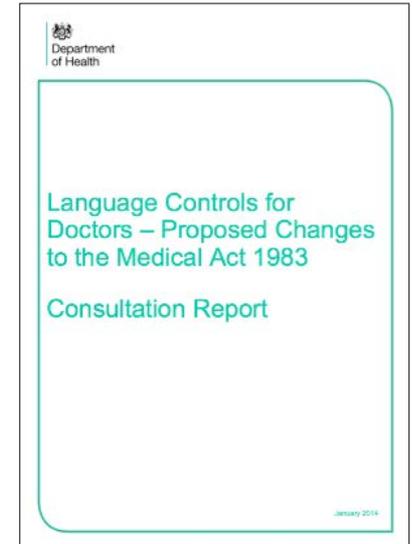
# Study 1: Consultations

## *Test is evidence of establishing control*

*The Department of Health is firmly committed to preventing doctors who do not have **sufficient knowledge of English** from working in the UK.*

(DoH call, p. 5)

*In May 2010, the Coalition Agreement set out that ‘we will seek to stop foreign healthcare professionals working in the NHS **unless they have passed robust language and competence tests**’ in order to assure patient safety and quality of care in the UK. (DoH call, p. 6)*



# Study 1: Consultations

***Priority is technical detail and implementation issues***

Specific feedback sought on currency of test results, results from more than one sitting (AHPRA)

Test scores have inherent meaning; a particular test is assumed by default

*There were various views about the overall score and the minimum score for each component, with proposals for a minimum overall score ranging **from 6 to 7.5.***

(AHPRA report, p. 11)

# Study 1: Consultations

## ***Respondents broaden the discussion***

Report's first quotation from a respondent:

*It goes without saying that **clinical information and advice must be communicated clearly and accurately** to patients, other healthcare professionals and carers so that patient safety and high quality care can be assured. From a patient perspective, **communication is key** to building trust in the patient-practitioner relationship* (DoH report, p. 12)

# Study 1: Consultations

## *Respondents broaden the discussion*

*We will give full consideration to accepting any **suitable alternatives to IELTS** as soon as we are confident that these methods provide the necessary assurance of a doctor's English language capability. (GMC report, p. 34)*

*Six submissions indicated that English language skills are not evidence of communication ability. Several of these questioned **whether the standard is intended to be an English language test or a communication test.***

*(AHPRA report, p. 13)*

# Discussion

Test construct is generally not a feature of policy-related discourse

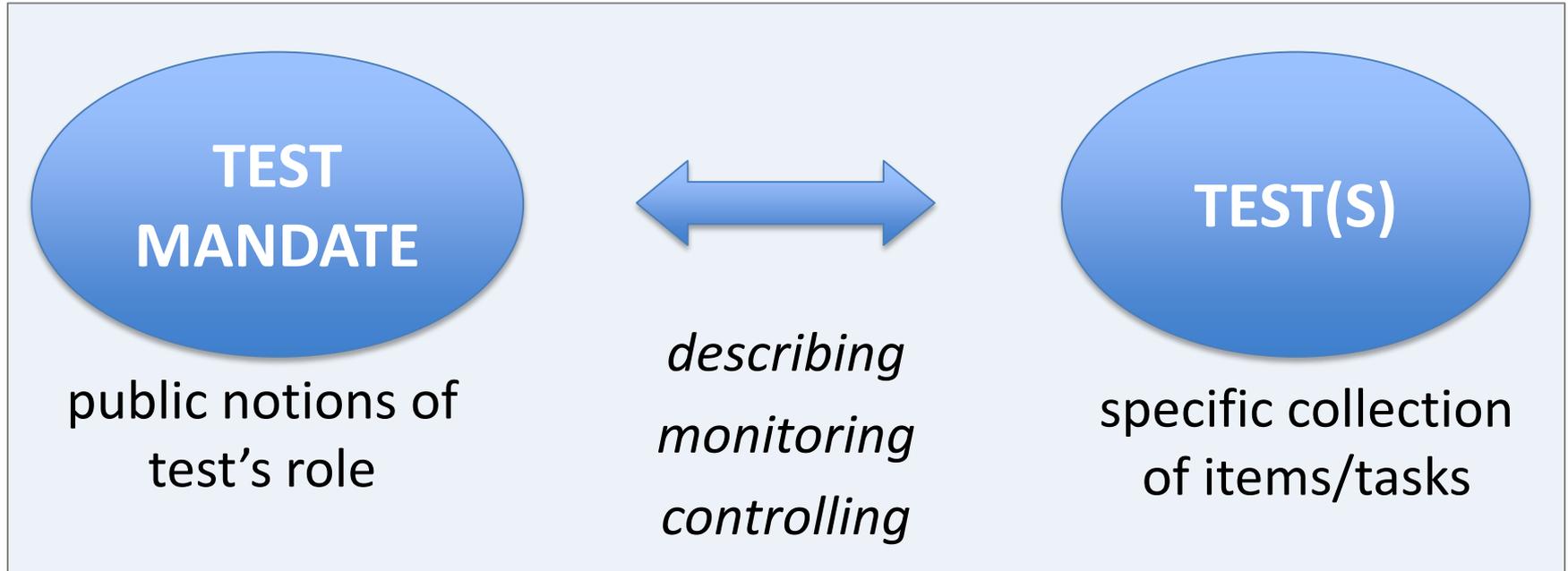
Standard is naturalised, trusted – maintaining the standard ensures good functioning of the workforce and public safety

Scores may be set rather arbitrarily

Awareness of need to engage with test construct in some contexts of use

# Conclusions

- Language testing is often out-sourced
- Tests users rarely consider test construct
- Engaging with construct is difficult



## References

- Bachman, L. F. (2004). *Statistical analyses for language assessment*. Cambridge, UK: Cambridge University Press.
- Busch, L. (2011). *Standards: Recipes for reality*. Cambridge, MA: MIT Press.
- Davies, A. (2008). Ethics, professionalism, rights and codes. In N. H. Hornberger & E. Shohamy (Eds.), *Encyclopedia of Language and Education, Volume 7: Language Testing and Assessment* (pp. 2555-2569). Berlin: Springer.
- Fulcher, G. (2010). *Practical language testing*. London, UK: Hodder Education.
- Fulcher, G., & Davidson, F. (2007). *Language testing and assessment: An advanced resource book*. Abingdon, UK: Routledge.
- Macqueen, S., Pill, J., Elder, C., & Knoch, U. (2013). Investigating the test impact of the OET: A qualitative study of stakeholder perceptions of test relevance and efficacy. Melbourne: University of Melbourne, Language Testing Research Centre.
- Macqueen, S., Pill, J., & Knoch, U. (2016). Language test as boundary object: Perspectives from test users in the healthcare domain. *Language Testing*, 33(2), 271-288.
- Messick, S. (1996). Validity and washback in language testing. *Language Testing*, 13(3), 241-256.
- Star, S. L., & Lampland, M. (2009). Reckoning with standards. In M. Lampland & S. L. Star (Eds.), *Standards and their stories: How quantifying, classifying and formalizing practices shape everyday life* (pp. 3-24). Ithaca, NY: Cornell University Press.

## Documents

Australian Health Practitioner Regulation Agency. (2013, October). *Public consultation: Review of Criminal history registration standard and English language skills registration standard*. (26 pp.)

Downloaded from <https://www.ahpra.gov.au/news/consultations/past-consultations.aspx>

Australian Health Practitioner Regulation Agency. (2015, May). *English language skills registration standards. Consultation report*. (44 pp.)

Downloaded from <http://www.ahpra.gov.au/Registration/Registration-Standards/English-language-skills.aspx>

Department of Health [UK]. (2013, September). *Language controls for doctors – proposed changes to the Medical Act 1983. A paper for consultation*. (23 pp.)

Department of Health [UK]. (2014, January). *Language controls for doctors – proposed changes to the Medical Act 1983. Consultation report*. (20 pp.)

Downloaded from <https://www.gov.uk/government/consultations/ensuring-doctors-have-sufficient-english-language-capability>

General Medical Council. (2013, September). *Making sure all licensed doctors have the necessary knowledge of English to practise safely in the UK: A consultation*. (26 pp.)

General Medical Council. [2014, January]. *Consultation report: Making sure all licensed doctors have the necessary knowledge of English to practise safely in the UK*. (43 pp.)

Downloaded from: <https://www.gmc-uk.org/-/media/documents/08---making-sure-all-licensed-doctors-have-the-necessary-knowledge-of-english-to-practise-s-55152226.pdf>