Maintenance of Certification

Virginia A. Moyer, MD, MPH
Vice President, MOC and Quality
American Board of Pediatrics
Four-part Model

Ongoing process of lifelong learning and self-assessment to continuously improve knowledge and clinical performance.

The four-part MOC process assures the public that pediatricians involved in MOC are continually demonstrating clinical competence.
Part 1: Professional Standing & Licensure

To maintain certification, a physician must be licensed and in good standing.
Part 2: Self Assessment (SA) and Lifelong Learning

• Per ABMS, Part 2 activities “should emphasize learning based on self-assessment”

• ABP approves Part 2 activities only if they include a self-assessment component consisting of at least 25 MCQs (must be web-based); live CME that includes a self-assessment is encouraged

• 145 Part 2 activities currently available

• Almost all earn CME credit (AAP is provider)
Self Assessment Activities

• ABP Subspecialty self-assessments (45)
  • Created annually by sub-boards
  • Based on current literature
  • Not tied to exam blueprint
  • Each one is “live” for 3 years

• Other ABP self-assessment activities
  • SA’s Created by subject matter experts (6 topics)
    • Usually tied to new Performance Improvement Modules (PIMS) in Part 4
  • Question of the Week, Decision Skills, General Pediatrics Knowledge Skills Assessment
External Self Assessments

Self Assessments from other organizations

- AAP PREP, general and subspecialty
  - These are tied to the exam blueprints
- Other professional societies
- Academic institutions
- Commercial vendors
  - Online Board review courses
  - These are tied to exam blueprints
Part 4: Improvement in Medical Practice

• Per ABMS: “ongoing practice assessment and improvement”...“including adequate knowledge of quality improvement science and methods”

• ABP uses an improvement model, in which demonstration of practice assessment and application of interventions intended to improve outcomes is required, but demonstrated improvement is not required
Part 4 Activities

• Workplace-based Quality Improvement (QI) Projects:
  • QI Collaboratives and Networks
  • Institutionally based QI programs and projects
  • Diplomate-initiated QI projects
    • All require attestation of meaningful involvement by the diplomate

• Online QI modules
  • ABP Project Improvement Modules (PIMs)
  • Online Modules from other organizations
ABP PIM topics

- ADHD (initial diagnosis)
- ADHD (follow up)
- Adolescent Depression Screening
- Asthma
- Breast Milk Use
- Chlamydia Screening
- Critical Congenital Heart Disease Newborn Screening
- Developmental Screening
- Hand Hygiene
- Health Literacy
- Influenza Immunization

- Obesity Assessment and Management
- Preschool Vision Screening
- Preterm Admission Temperature
- Safe Prescription and Medication Order Writing
- Motivational Interviewing, Medication Adherence
- NICU/PICU Blood Stream Infections
- New Simulated Data PIM
QI Activity Requirements

- Identify a gap in quality or practice
  - Requires measurement
- Identify a goal (Aim statement)
- Plan and execute interventions intended to result in improvement
- Measure results
  - Multiple measurements over time are required
- Reflect on results and determine next steps
Questions for Discussion

• What is the role of Part 3?
  • Should it remain about the measurement of competency?
  • Should it be about learning?
  • What, if any, could be an appropriate balance?
  • Should it remain a summative evaluation?

• In what ways can Part 2 and Part 4 be used to improve Part 3?
• How could Part 2 and Part 4 be a part of an integrated summative evaluation?