

## APPD Annual Spring Meeting

Suzanne K. Woods, MD

Executive Vice President

Credentialing and Initial Certification

May 19, 2022



None



#### THE AMERICAN BOARD of PEDIATRICS Certifying excellence in pediatrics – for a healthier tomorrow

VISION	Inspiring a lifetime pursuit of learning to improve child health
MISSION	Advancing child health by certifying pediatricians who meet standards of excellence and are committed to continuous learning and improvement
VALUES	Consistency: Making unbiased decisions based on published ABP policies  Excellence: Striving to do our best work  Reliability: Living up to responsibilities and commitment  Transparency: Sharing non-confidential information openly
GUIDING PRINCIPLES	<ul> <li>Overarching Principle: The "North Star" for the ABP is and will remain the improvement of health outcomes for children, adolescents, and young adults.</li> <li>The ABP is primarily accountable to children, from infants to young adults, and their families as it guides professional self-regulation and certifies pediatricians.</li> <li>ABP certification recognizes pediatricians who meet rigorous standards for competencies essential to improving child health.</li> <li>The ABP supports best practices for the assessments of all core competencies using tools that are fair, valid, reliable, and contribute to lifelong professional development.</li> <li>The ABP prioritizes work that the organization is uniquely positioned to do.</li> <li>The ABP strives to align opportunities for continuing certification with pediatricians' professional practice.</li> <li>The ABP continually evaluates and improves its work based on changing trends in child health, stakeholder feedback, and advances in knowledge, assessment, technology, and care delivery.</li> <li>The ABP engages in open dialog with pediatricians, patients and families, and other members of the public.</li> <li>The ABP seeks out and respects diverse backgrounds, experiences, and perspectives to inform its work.</li> <li>The ABP collaborates with other regulatory bodies, medical organizations, and professional societies to align accreditation and certification across the continuum from training through practice.</li> </ul>



- Absences from Training policy
- ☐ ITE and SITE
- ☐ EPA Timeline
- ☐ GP Exam 2021
- ☐ Program Portal Evaluation Time!
- MOC Updates



# Absences from Training



#### ABP Corporate Policy

#### Absences from Training Policy- Parental/Medical/Caregiver Leave

#### Read the Absence from Training: Details and Frequently Asked Questions

In order to meet the training requirements to apply for certification by the ABP, an individual must train in a program accredited by the Accreditation Council for Graduate Medical Education (ACGME) in the United States or the Royal College of Physicians and Surgeons of Canada (RCPSC), and the program director must verify that the individual has successfully met the training requirements.

The duration of accredited training as required by the ACGME or RCPSC varies by pathway. For general pediatrics categorical residency and most core pediatric fellowship training, it is 36 months. All pathways, though, allow for one month of absence each year for time away from training which can be used for vacation, illness, or family leave.



Consistent with our long-standing policy, individuals in three-year core training programs are allowed up to a total of eight weeks of additional parental, medical, or caregiver leave once over their training period. Similarly, effective July 1, 2021, individuals in nonstandard\* and combined\*\* pathways will be allowed up to a total of six weeks of additional parental, medical, or caregiver leave once over their training period. The additional leave time is over the entire duration of training and is not allocated annually.

The total amount of leave time offered to the trainee is at the discretion of the institution. Programs have the flexibility to grant longer periods of leave time, but training must be extended to make up for any absences greater than what is allowed by the policy for vacation, parental, medical, or caregiver leave for a given residency or fellowship pathway. Trainees who experience an interruption in residency for greater than 24 continuous months or in fellowship for greater than 12 continuous months and who wish to re-enter training must petition the ABP to determine whether credit may be awarded for prior training. To qualify for the additional absence from training, outside of the standard one month per year, all of the following requirements must be met for an individual trainee:

- The absence is due to parental, medical, or caregiver leave;
- The trainee is deemed competent by the Program Director and Clinical Competency Committee;
- All training requirements must be met except for elective training or research time as determined by the pathway; and
- The scholarly activity requirement must be met if the trainee is a fellow.

The ABP encourages trainees to take yearly vacation and strongly discourages "banking" vacation from year to year as it can negatively affect trainees' health and well-being. The ABP views educational leave, which includes attendance at training-related seminars, as bona fide educational experiences, and it need not be counted as time away from training. All trainees must have satisfactory performance in all core domains of competence to complete their training. In addition, trainees must complete all required experiences as outlined by the training pathway.

## **Absences from Training**

- ➤ Continue SAME 2 month policy for core 3 year programs = minimum of 31 months in training IF COMPETENT
- Created 6 week leave policy for all programs ≥ 2 yr duration that are not 3 year core programs\*
- Combined programs must split time with other board
- ➤ Effective date July 2021, graduates in Spring 2022
- Collect data work in progress

https://www.abp.org/sites/abp/files/pdf/cic-absences-from-training.pdf https://www.abp.org/sites/abp/files/pdf/cic-absencefromtrainingfaq.pdf

\* Not all boards aligned with 6-week option

#### Waiver Requests

## Qualtrics survey!





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This form is designed to simplify the process for program directors to request a waiver of the American Board of Pediatrics Absences from Training Policy. This form should be used for any waiver (e.g. COVID-19, parental leave, etc) and can *only be completed by a program director*.

Please note that waivers can only be submitted during the final three months of training.

To complete this waiver please have the following information available:

- Program Name (including name of institution)
- ABP Program ID Number (4 digits)
- Trainee Name
- Trainee ABP ID
- Trainee subspecialty, if applicable
- Reason program director is requesting a waiver and if it is COVID-19 related
- Rotation/experience missed by the trainee, length of time being requested for waiver, and whether waiver request involves clinical and/or research time
- Details on why the scholarly activity work product should be modified for this trainee, if applicable
- For fellows and the research requirement, please keep in mind that this waiver is not considered complete until the ABP has approved the trainee's work product.

#### Link available in the Portal!



## Exams

## **Initial Certifying Exams**

## **Exam Application Deadlines**

#### ITE:

Registration ends: May 31, 2022

Exam dates: July 13 – July 27, 2022

#### **General Pediatrics:**

Regular registration: March 31, 2022

Late registration period: April 1 - May 16, 2022



- Administered in February
- Need all trainees in program roster
- Fellow register Nov Jan
- Portal dashboard registration view
- Exam at Prometric
- "Low stakes"
- Intended as formative feedback
- Cannot offer extensions of the testing window



## **SITE Updates**

• **SITE:** Register 11/1/22 – 1/13/23

Administration Dates:
 Feb 1-15, 2023

• SITE → IBT pilot





Dear Program Directors and Coordinators:

Congratulations on another academic year transition, and we hope the summer is going well for each of you. Reflecting on the past year, we continue to be impressed with the innovation and ingenuity demonstrated by programs to address the numerous challenges over the past 18 months.

One major challenge has been assuring that your residents and fellows could achieve competence in the setting of dramatic adjustments to your programs and trainee educational experiences due to the COVID-19 pandemic. This challenge highlighted the need for a more robust programmatic approach to competency assessment to maintain our obligation to the public in certifying pediatric graduates.

To that end, we plan to continue the work that began over a decade ago in competency-based medical education and be transparent in sharing these updates. Specifically, we will:

- Transition toward entrustable professional activities (EPAs) as part of our assessment framework for initial certification.
- Work with you to develop strategies, approaches, and tools to facilitate your programs' broader implementation of EPAs at the local level.
- Initiate a multi-center study this fall focusing on implementation of the 17 general pediatrics EPAs to create a 'Crosswalk' with the milestones that can then be used to simplify the assessment process. Over 45 general pediatrics and medicine-pediatrics residency programs are already enrolled, and we are still enrolling sites.
- Continue ongoing subspecialty EPA implementation research.
- Continue research and nonconsequential data collection to gather information to establish future standards for graduation and certification.
- Plan to integrate EPAs into the credentialing process for all ABP initial certification exams by 2028.

We look forward to collaborating with you as our approach to certification continues to evolve to meet the needs of our patients, their families, our trainees, and your programs. Please do not hesitate to contact us with any questions or concerns at <a href="mailto:cbme@abpeds.org">cbme@abpeds.org</a>.

Thank you again for your commitment to education for the next generation of pediatricians.

Sincerely,

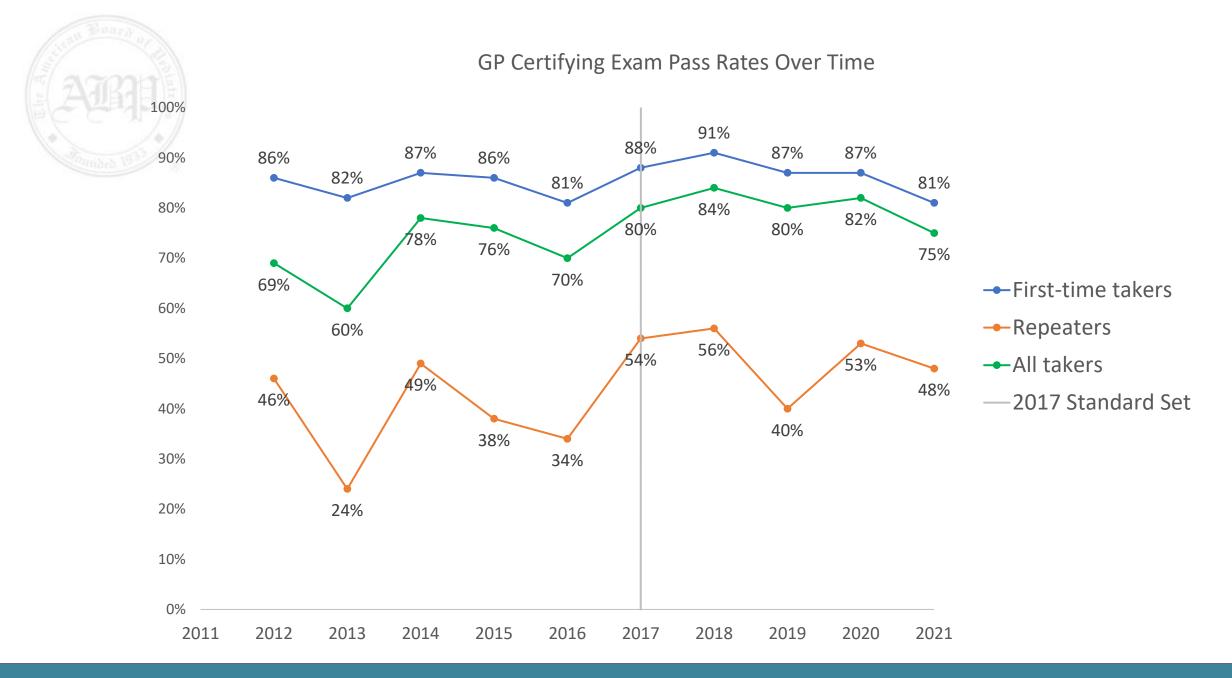
Suzanne K. Woods, MD Executive Vice President Credentialing and Initial Certification David A. Turner, MD Vice President Competency-Based Medical Education

Letter to PD/PC community about CBME and future requirement for EPAS timeline TBD

August 25, 2021



# Analysis of the 2021 GP Certifying Exam Pass Rate





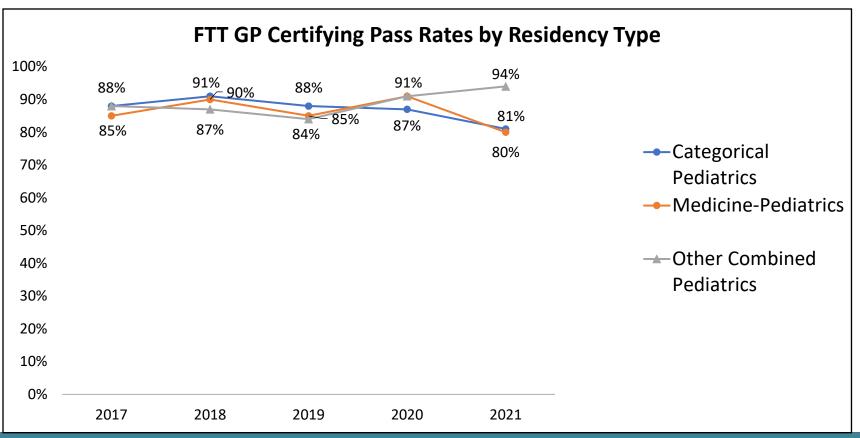
	•	Categorical Medicine- Pediatrics Pediatrics				Combined iatrics	Other/ Unknown		
Year	N	Pass %	N	Pass %	N	Pass%	N	Pass %	
2017	2895	88%	331	85%	40	88%	12	75%	
2018	2976	91%	327	90%	39	87%	16	94%	
2019	2970	88%	355	85%	44	84%	15	87%	
2020	2861	87%	304	91%	43	91%	16	94%	
2021	3010	81%	340	80%	48	94%	25	68%	

## Residency Program Type

Categorical Peds vs.

Medicine-Pediatrics vs.

Other combined pediatrics

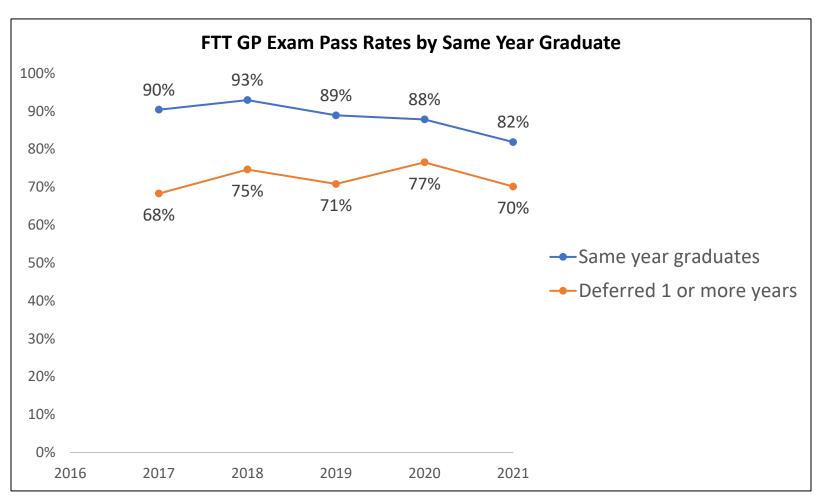




## FTT pass rates by Same Year Graduate

"Same year graduate" = candidate who took the exam in the same year they graduated

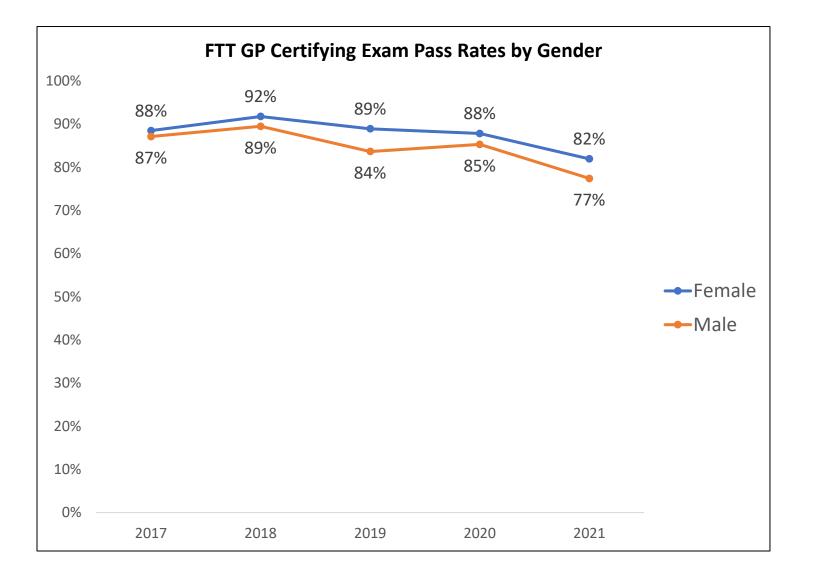
		e Year uates	Deferred 1 o more years			
Year	N	Pass %	N	Pass %		
2017	2,934	90%	344	68%		
2018	3,023	93%	335	75%		
2019	3,103	89%	281	71%		
2020	3,011	88%	213	77%		
2021	3,068	82%	355	70%		





## Gender

	Fen	nale	N	lale
Year	N	Pass %	N	Pass %
2017	2,353	88%	924	87%
2018	2,407	92%	951	89%
2019	2,417	89%	966	84%
2020	2,292	88%	932	85%
2021	2,443	82%	978	77%





## Recent ITE Performance

#### **Average Scaled Scores by Training Year**

	Categorical Pediatrics			Medicine-Pediatrics				Other Combined Pediatrics						
	Residency Year				F	Residency Year				R	Residency Year		ar	-
Year	1	2	3	Mean	1	2	3	4+	Mean	1	2	3	4+	Mean
2017	142	160	169	157	141	157	166	169	158	143	168	163	167	161
2018	150	169	177	165	151	165	173	178	166	151	165	177	173	166
2019	149	163	170	160	153	163	166	173	164	153	159	165	171	162
2020	151	167	174	164	154	167	173	176	167	150	164	168	177	165
2021	141	155	162	152	145	157	163	167	158	152	152	156	160	155

## SKW thoughts on GP 2021 Exam PROGRAM

- Decreased patient care opportunities
- ☐ Changes in educational opportunities
- ☐ Decreased faculty interactions work from home
- ☐ Access to educational resources especially for struggling learners
- ☐ Use of ITE as an opportunity for formative feedback
- Mentoring and advising meetings frequency/content
- ☐ Use of individualized learning plans (ILP)
- ☐ Educator stress and personal/professional burnout

## SKW thoughts on GP 2021 Exam INDIVIDUAL

- ☐ Virtual patient interactions
- Decreased patient interactions to help drive learning/reading
- Conference attendance
- ☐ Embrace self-directed learning vs passive learning
- ☐ Use of tools for "in the moment learning" vs studying/preparation "for the moment" initial certifying exams
- ☐ Personal and professional challenges/stress/burnout
- □ Self- assessment skills/knowledge of how to access educational resources

## Time-Limited Eligibility (TLE)

- For all ABMS member boards there must be a TLE policy for initial certification
- The duration of time following the successful completion of accredited training to expiration of eligibility to sit for an exam must be no fewer than 3 years and no more than 7 years.







## Time-Limited Eligibility - #2

#### Center for Personalized Education for Professionals (CPEP)

- CPEP is a mission-driven 501(c)(3) non-profit organization
- An alternative to supervised practice
- They provide competence/skills assessments and intensive education services to physicians and other healthcare professionals.

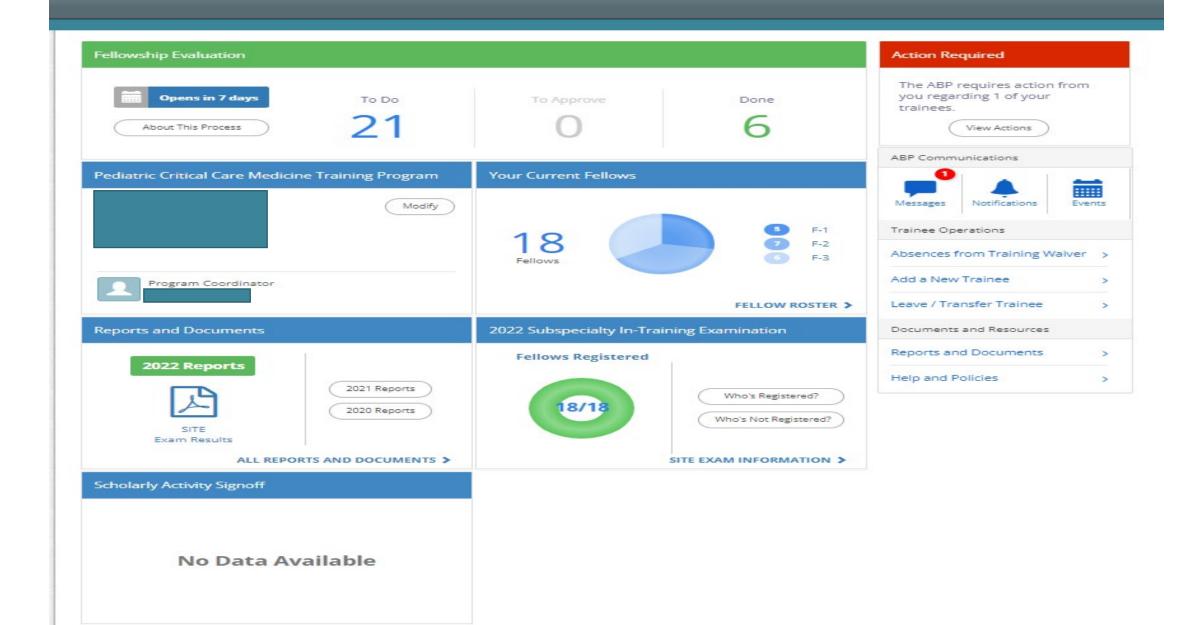
Another option to regain time-limited eligibility in addition to supervised practice for pediatricians who have not achieved timely initial certification.



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1

Scholarly Activity Signoff

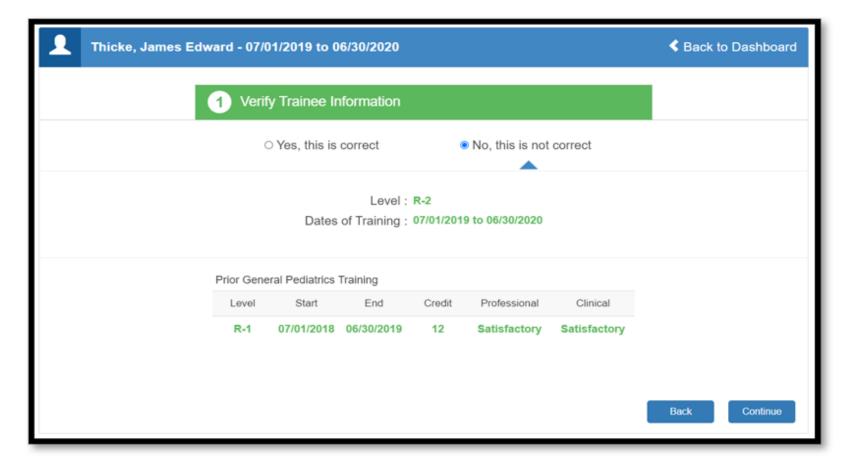
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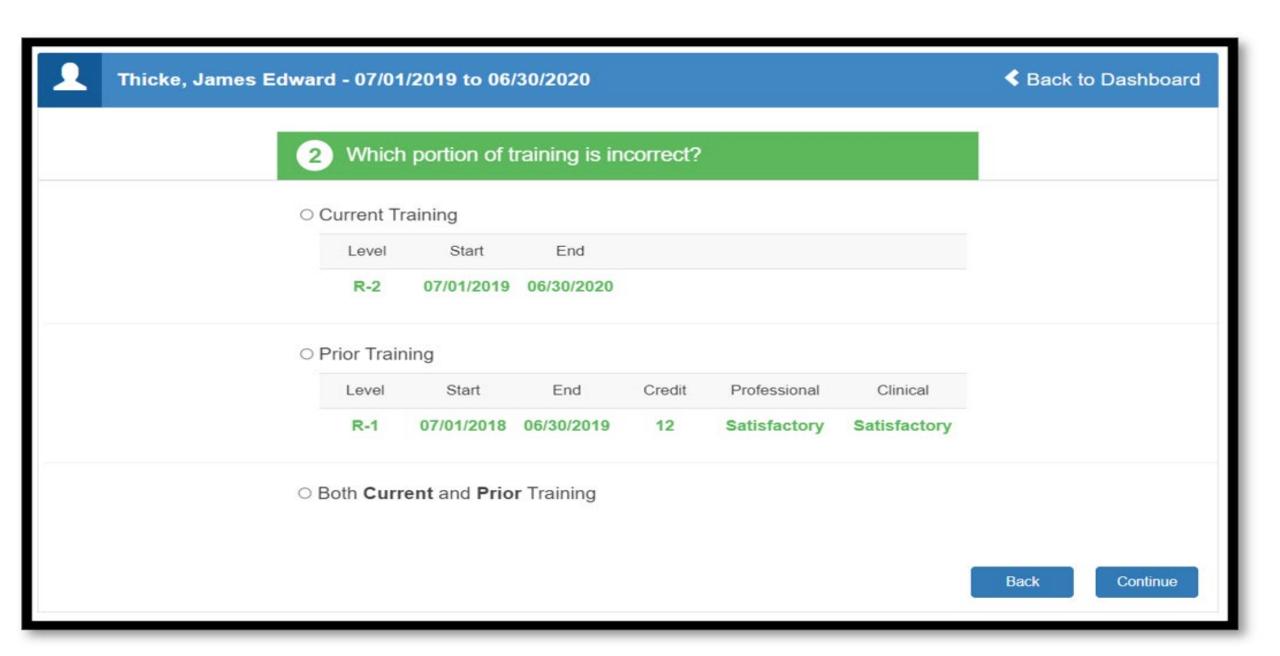
ubmitted	Fellow	Status	SOC Members	E-Mail	Reminders
9/29/2021	Jonah Day	In Progress	John Doe, MD	John.doe@ abpeds.edu	22
	(ABP ID# 671112)				2
			✓ Jane Doe, PHD	Jane2doe@abpeds.nc.edu	2
			✓ Tom Tall, PHD	Ttall@abpeds.nc.edu	

✓ = Complete 
X = Disapproved 
M = Pending

#### Make provision for "No, this training is not correct" during evaluation ("No Path")

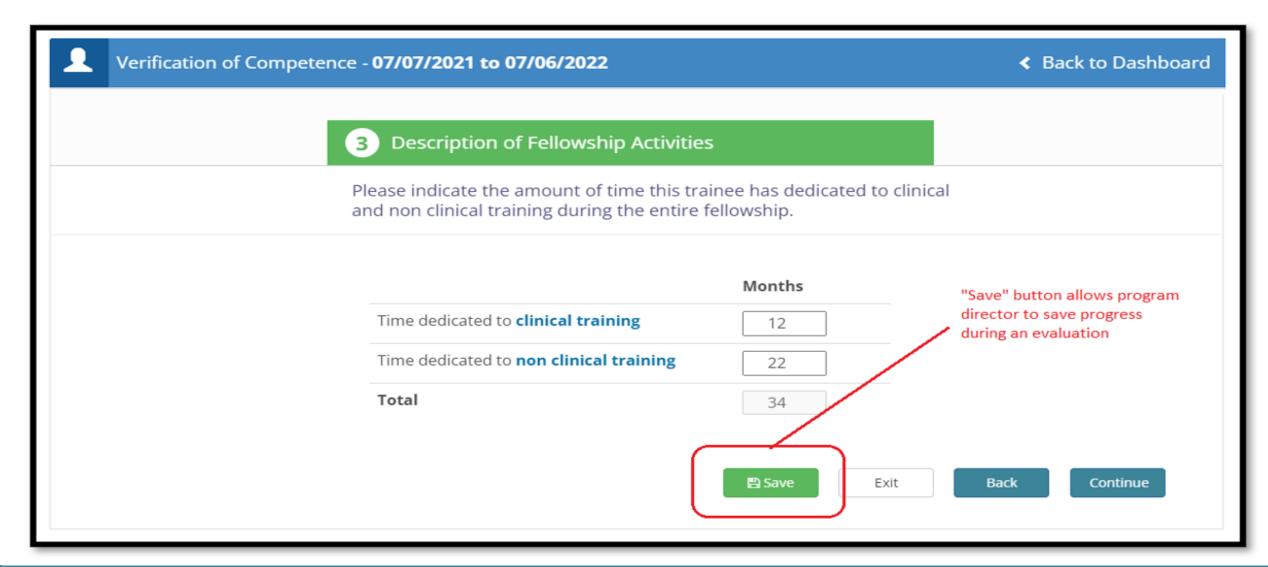
- Respond to "No" on Verify Trainee information page during evaluation by allowing program director to indicate portion of training which is incorrect.
- If program director indicates current training line, provide mechanism to allow program director to edit and correct the training



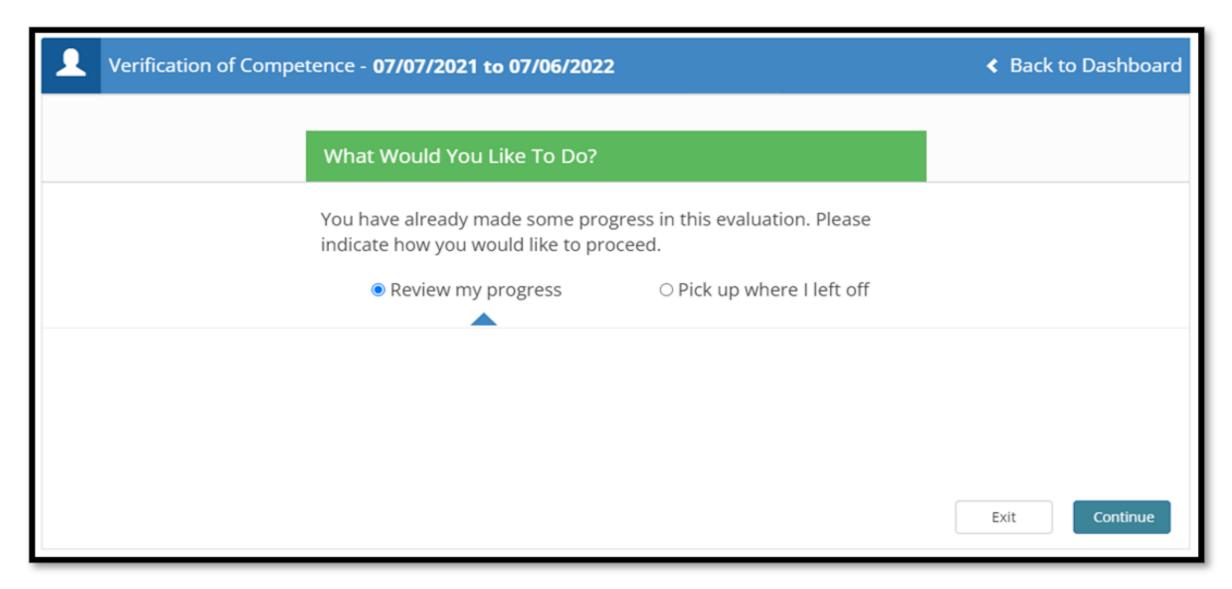


#### Added "Save" feature to final and non-final evaluation process

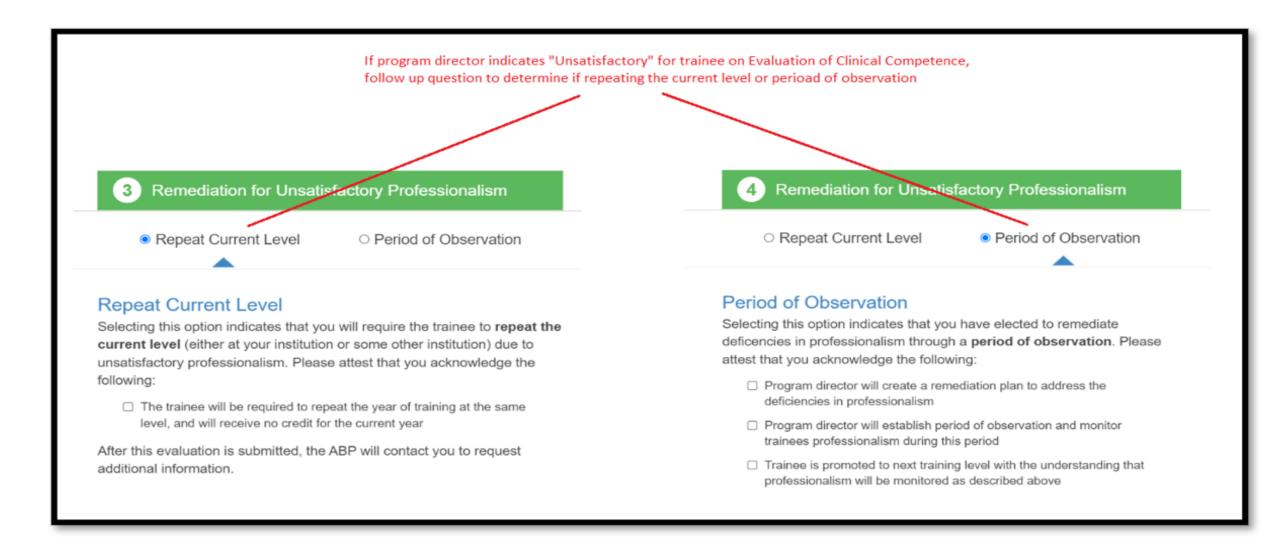
Allows program director to save progress during the evaluation and pick up where he left off



#### Resuming "Saved" evaluation



#### Ask for remediation if trainee receives unsatisfactory in professionalism during final evaluation



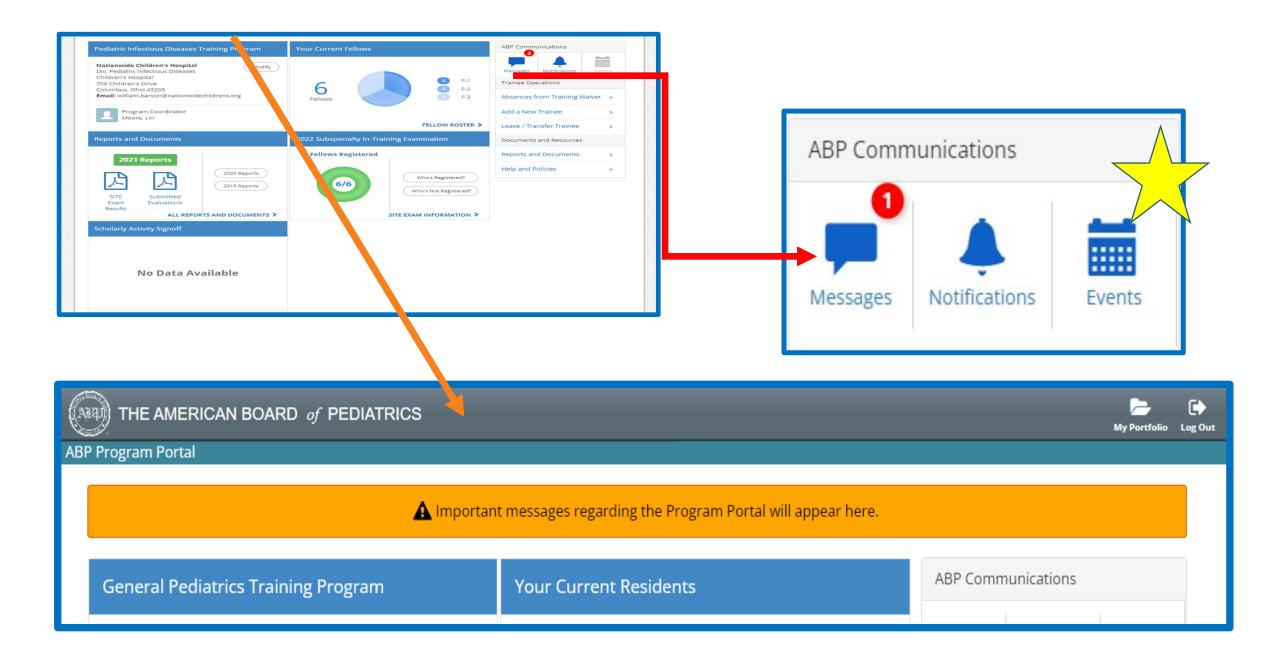
- GO TO https://oit.app.org
- 2. Enter your username and password
- 3. Look for the 'Submitted Evaluations' icon in the bottom panel of the dashboard titled 'Reports and Documents'



- 4. Click on the 'Submitted Evaluations' icon to access pdf(s)
- 5. Look under the section titled 'Final Evaluation Documents' to download a pdf for each trainee



# Copies of Final Evaluations PDF









#### Event Calendar

#### **∢** Back to Dashboard

#### **Event Details**

**Evaluation Window** Title:

**Start:** 5/25/2022

7/16/2022 End:



Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
29	30	31	1	2	3	
↓ ITE Registrati					Confirm ITE	
■ Evaluation W	/indow					
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3	4	5	6	7	8	
■ Evaluation W						



# Continuing Certification (MOC)

## Changes to the MOC Points Requirement

- ☐ Request Rollover COVID Points awarded in 2020
  - > Solution: Simplifying MOC points to 50 Part 2 and 50 Part 4
  - ➤ And....have expanded rollover points to all Part 4

☐ Changes went into effect January 2022

Awarded every pediatrician 10 part 2 points

Retroactively increased the point value for certain QI projects

Moving forward, all QI projects in increments of 25 points

## Part 2 Improvements

- ☐ Learning Opportunities with MOC Cycle Fee
  - Question of the Week
  - Decision Skills micro-forms
- □ ACCME Collaboration
  - UpToDate
- ☐ Credit for What You are Doing
  - Upload resuscitation certificates
  - Claim credit for Diversity, Equity, Inclusion learning

## Part 4: Improving Health and Health Care

Encourage people to engage in quality improvement activities which will give credit for work already being done in their practice



MULTI-INSTITUTION
OR LARGE-SCALE QI
PROJECTS



WORKPLACE BASED QI PROJECTS



NCQA PATIENT CENTERED MEDICAL HOME



INSTITUTIONAL QI AND SAFETY LEADERSHIP

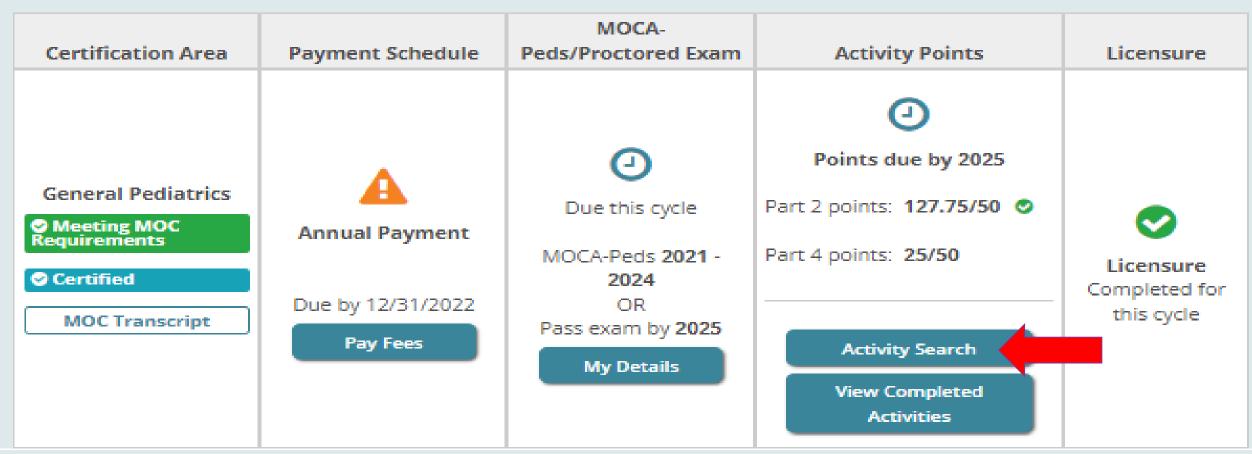


ONLINE PERFORMANCE IMPROVEMENT
MODULES

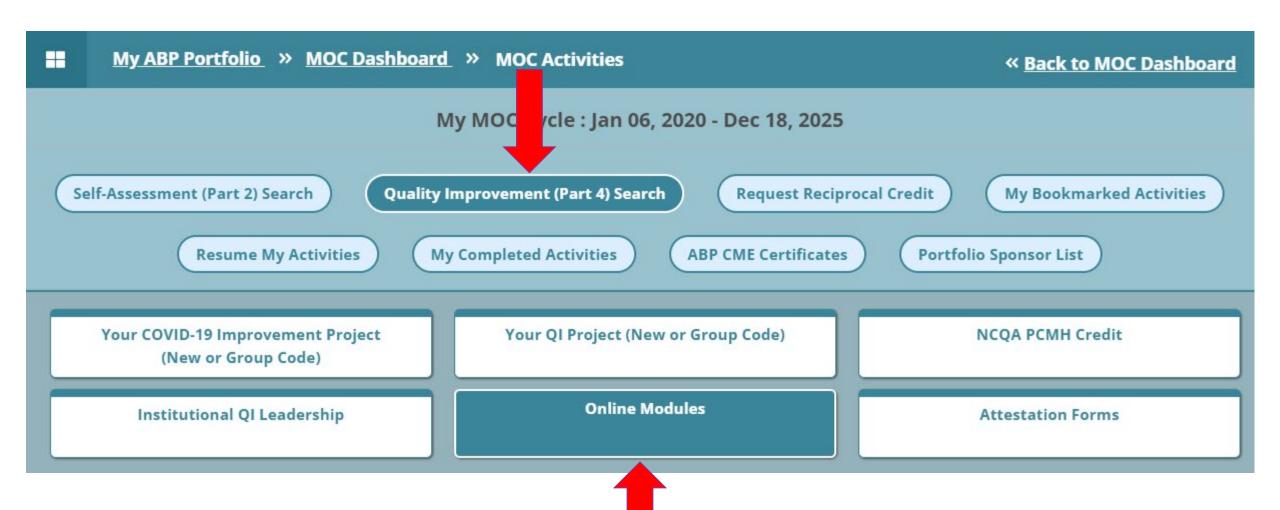


#### MAINTENANCE OF CERTIFICATION

My MOC Cycle: Jan 06, 2020 - Dec 18, 2025



You are qualified to participate in MOCA-Peds.



#### Search Term: Residency & American Board of Pediatrics & ACGME Annual Program Evaluation: Part 4 Improvement MOC Points: 25 **Template** Cost: Free with MOC Enrollment Expires: Dec 31, 2026 Sponsor: American Board of Pediatrics Continuous improvement of residency and fellowship training programs View is at the core of the ACGME Annual Program Evaluation. This application is designed specifically for Residency or Fellowship Program Leaders to obtain Part 4 MOC credit for ongoing program improvement in response to the ACGME Annual Program Evaluation. These efforts may utilize a variety of improvement metrics, such as overall ITE or SITE scores, internal surveys, trainee evaluations, course evaluations, Milestones, and/or Entrustable Professional Activities (EPA). Bookmark Activity Residency and Fellowship Programs: Part 4 Improvement MOC Points: 25 Template Cost: Free with MOC Enrollment Expires: Dec 31, 2026 Sponsor: American Board of Pediatrics This application is designed specifically for Residency or Fellowship View Program Leaders to obtain Part 4 MOC credit for improvements to the educational programs designed to train pediatric residents and subspecialty fellows. These efforts may utilize a variety of improvement metrics, such as overall ITE or SITE scores, internal surveys, trainee evaluations, course evaluations, Milestones, and/or Entrustable Professional Activities (EPA).

Sponsors

Pediatrics

NASPGHAN

American Board of Pediatrics

American Academy of Pediatrics

Illinois Chapter, American Academy of

Cincinnati Children's Hospital Medical Center

Bookmark Activity

- NMCP Pediatric Residency Annual Program Evaluation: Optimizing Service Vs Education (Naval Medical Center Portsmouth)
- Improvement in Follow-up Communication for Resident Identified Patient Safety and Hospital Process Issues (Children's Mercy Kansas City)
- Pediatric Resident Wellbeing (Madigan Army Medical Center)
- Restructuring of Inpatient Teams to Improve Education and Clinical Work Hours for Pediatric Residents (University of Michigan Department of Pediatrics)
- An Effort to Improve Faculty Engagement in Fellow Education (UPMC Children's Hospital of Pittsburgh)
- Ensuring manageable patient care responsibilities to optimize education in our pediatric hematology/oncology fellowship

(Boston Children's Hospital)

Improve the wellness and mental health of Pediatric residents (University of Colorado School of Medicine)

## Updates to MOC Points During Fellowship

#### **BEFORE 2022:**

- > Fellows get 10 Part 2 / 10 Part 4 points each year of fellowship
  - = 30 points Part 2 + 30 points Part 4 total over three years for a traditional 3-year fellowship
- > This does not always allow for all Part 4 points in one cycle

#### **CHANGE IN 2022:**

- > 25 Part 4 points after completion of the first year of fellowship
  - = 30 points Part 2 over three years for a traditional 3-year fellowship + 25 points after the first year of fellowship
- ➤ Will be awarded in Nov 2022

# ABP Home Page

### www.abp.org

- Eligibility and training requirements
- PD information, ABP policies, etc.
- Resources for Program Directors
  - Program Directors button



# Thank You!

