

ABP Updates



MPPDA Annual Meeting
April 15, 2022

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Executive Vice President
Credentialing and Initial Certification



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	<p>Consistency: Making unbiased decisions based on published ABP policies</p> <p>Excellence: Striving to do our best work</p> <p>Reliability: Living up to responsibilities and commitment</p> <p>Transparency: Sharing non-confidential information openly</p>
GUIDING PRINCIPLES	<p>Overarching Principle: The “North Star” for the ABP is and will remain the improvement of health outcomes for children, adolescents, and young adults.</p> <ul style="list-style-type: none">• The ABP is primarily accountable to children, from infants to young adults, and their families as it guides professional self-regulation and certifies pediatricians.• ABP certification recognizes pediatricians who meet rigorous standards for competencies essential to improving child health.• 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.• The ABP prioritizes work that the organization is uniquely positioned to do.• The ABP strives to align opportunities for continuing certification with pediatricians’ professional practice.• 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.• The ABP engages in open dialog with pediatricians, patients and families, and other members of the public.• The ABP seeks out and respects diverse backgrounds, experiences, and perspectives to inform its work.• The ABP collaborates with other regulatory bodies, medical organizations, and professional societies to align accreditation and certification across the continuum from training through practice.



Topics

☐ Absences from Training

☐ GP exam 2021

☐ EPAs



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 programs
- Created **6-week leave policy for all programs \geq 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



Exams



Initial Certifying Exams

Exam Application Deadlines

ITE:

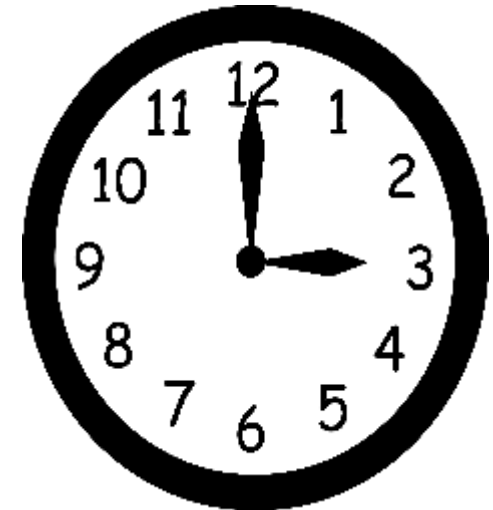
Registration ends: May 31, 2022

Exam dates: July 13 – July 27, 2022

General Pediatrics:

Regular registration OVER: March 31, 2022

Late registration period: April 1 – May 16, 2022

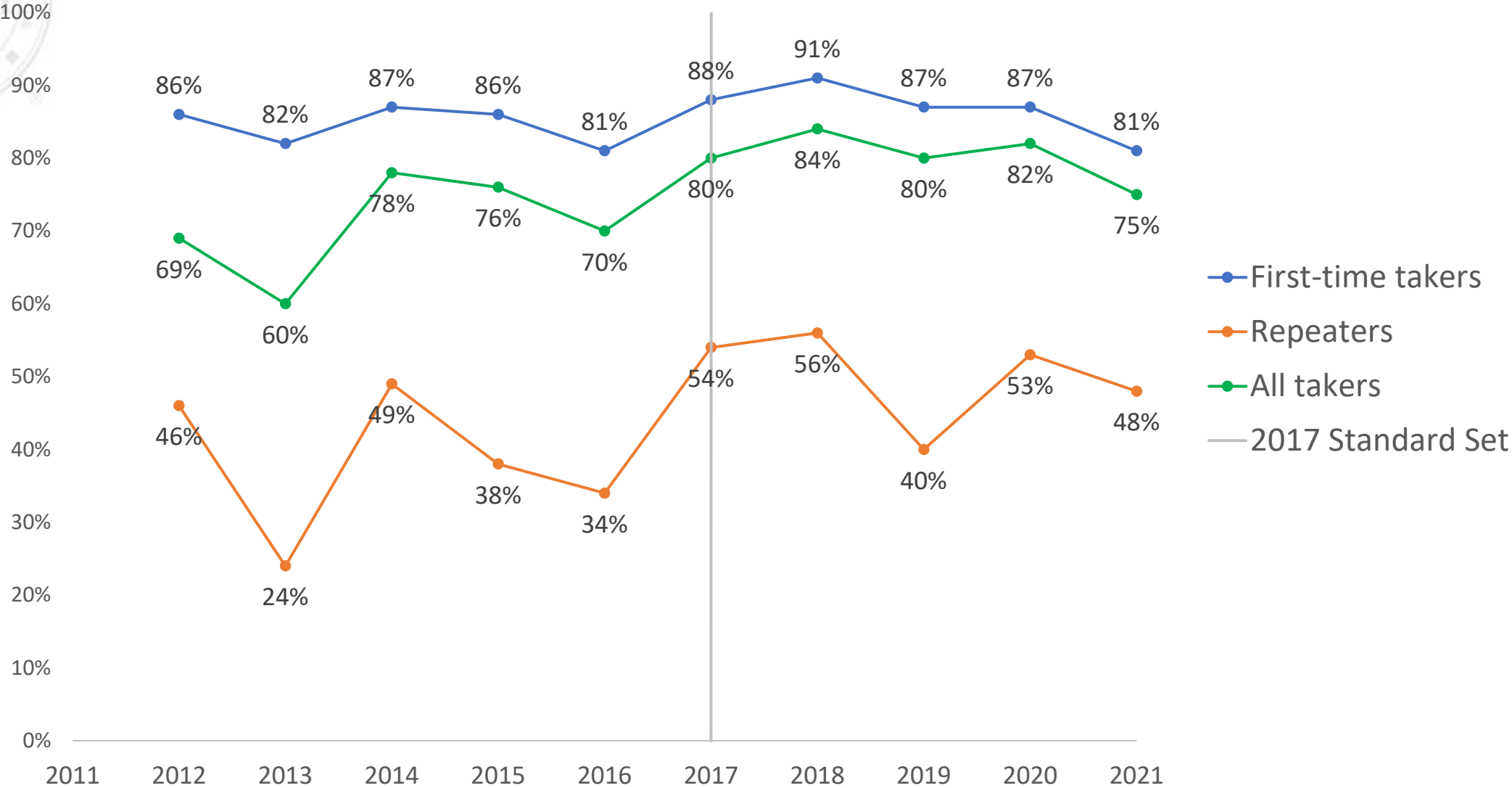




Analysis of the 2021 GP Certifying Exam Pass Rate



GP Certifying Exam Pass Rates Over Time

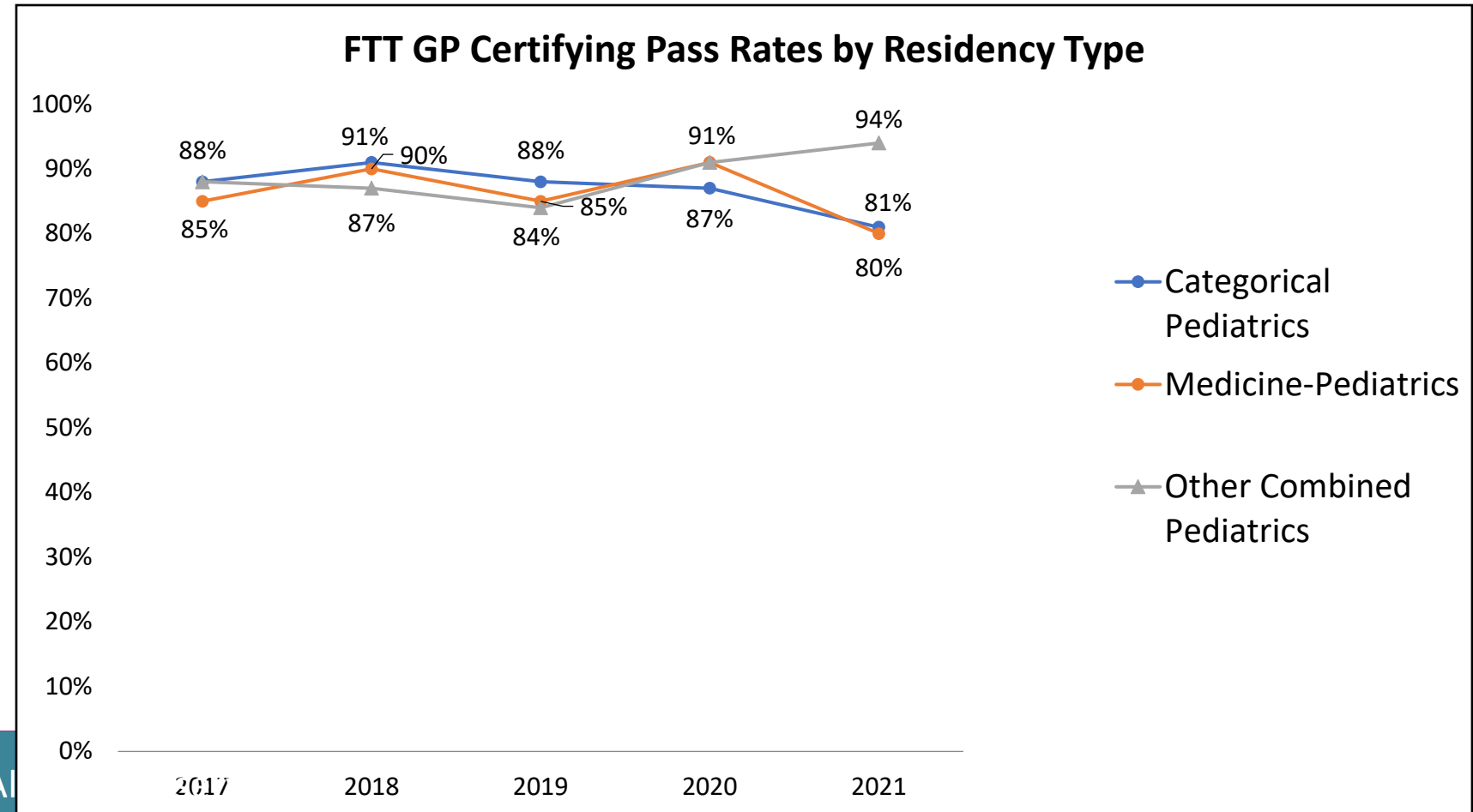




	Categorical Pediatrics		Medicine-Pediatrics		Other Combined Pediatrics		Other/Unknown	
Year	N	Pass %	N	Pass %	N	Pass%	N	Pass %
2017	2895	88%	331	85%	40	88%	12	75%
2018	2976	91%	327	90%	39	87%	16	94%
2019	2970	88%	355	85%	44	84%	15	87%
2020	2861	87%	304	91%	43	91%	16	94%
2021	3010	81%	340	80%	48	94%	25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

Residency Program Type

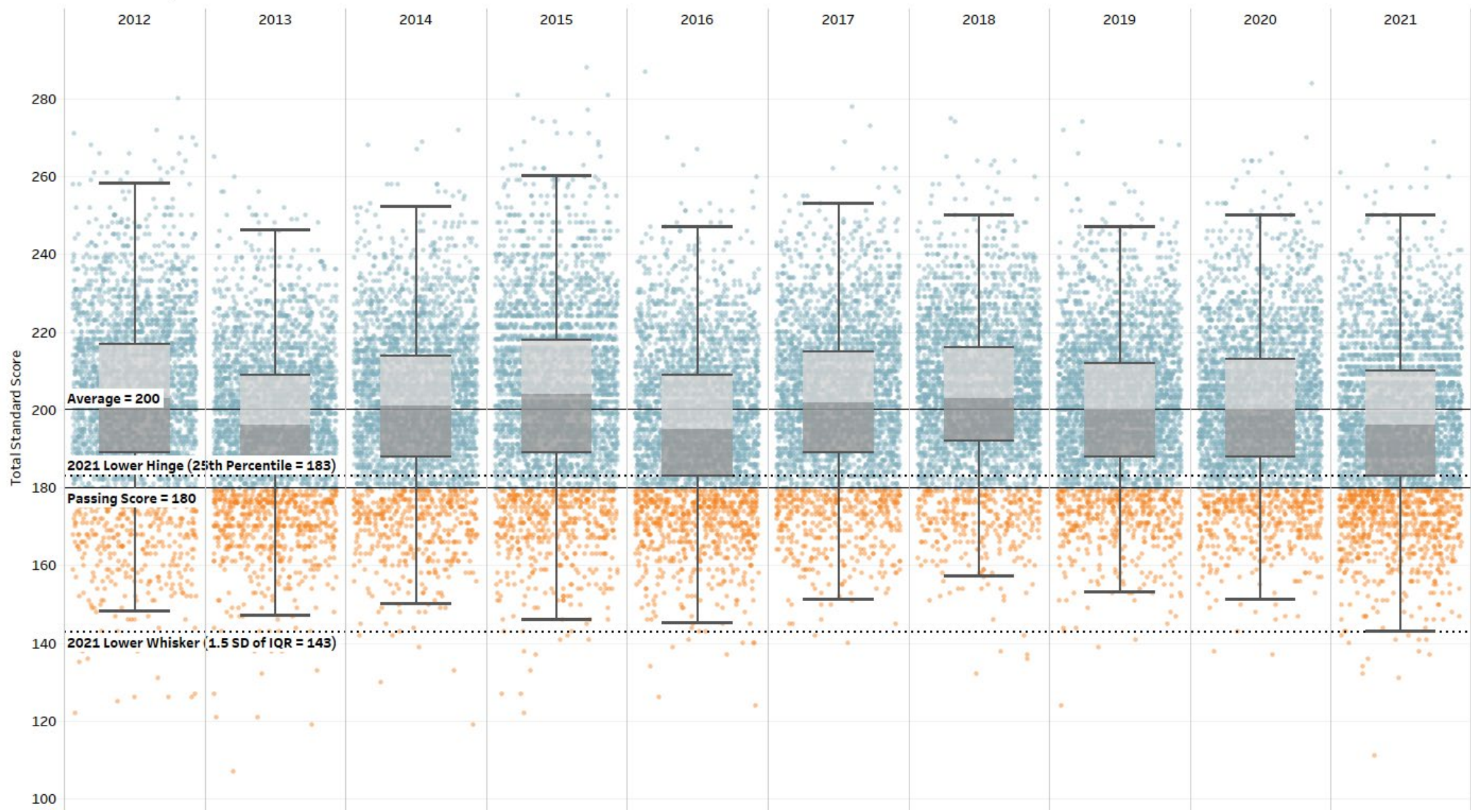
Categorical Peds vs.
Medicine-Pediatrics vs.
Other combined pediatrics





Scaled Score Scatter Plot

First Time Test Takers Only

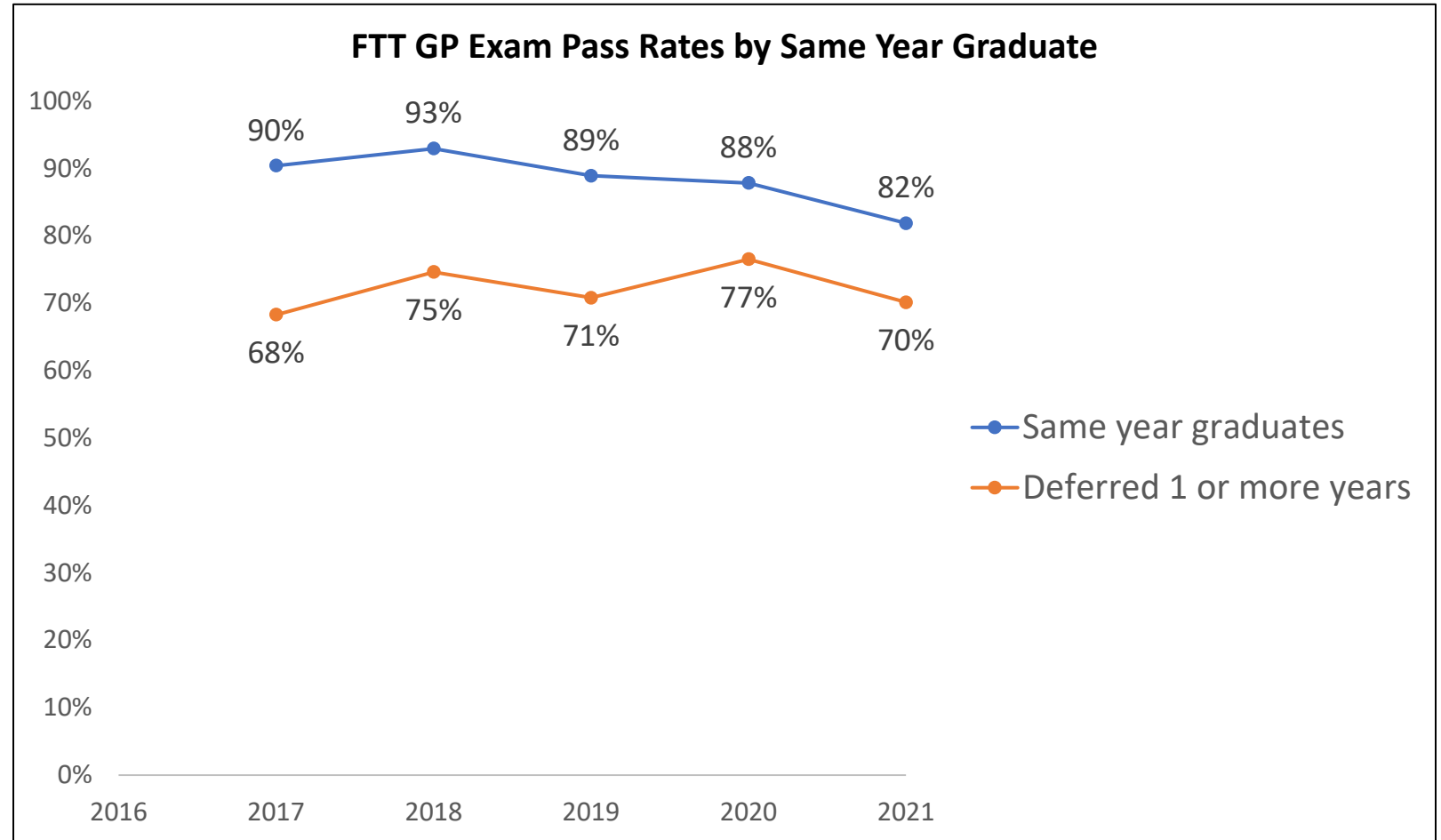




FTT pass rates by Same Year Graduate

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

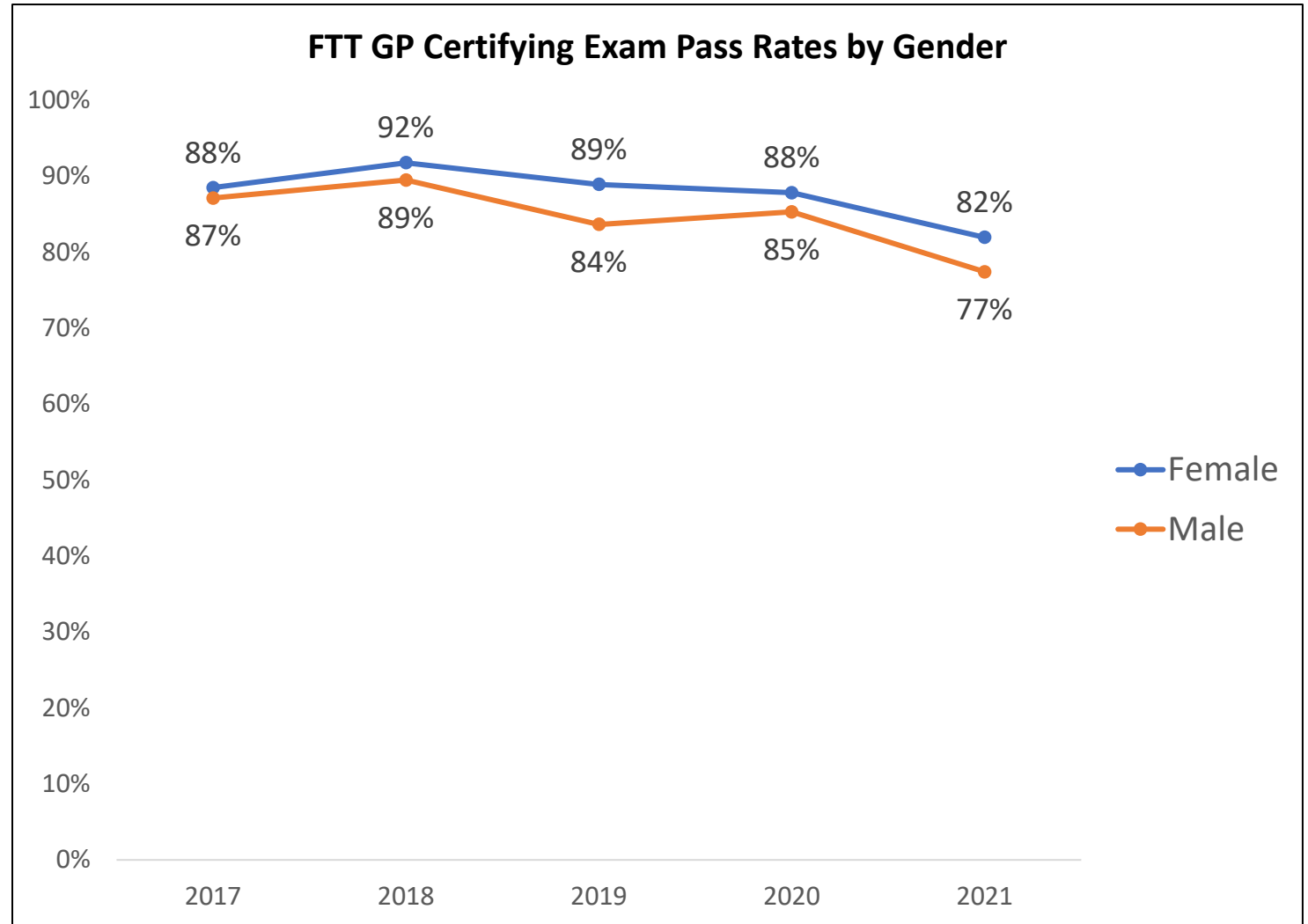
Year	Same Year Graduates		Deferred 1 or more years	
	N	Pass %	N	Pass %
2017	2,934	90%	344	68%
2018	3,023	93%	335	75%
2019	3,103	89%	281	71%
2020	3,011	88%	213	77%
2021	3,068	82%	355	70%





Gender

Year	Female		Male	
	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

Year	Categorical Pediatrics				Medicine-Pediatrics					Other Combined Pediatrics				
	Residency Year				Residency Year					Residency 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



PROGRAM **PORTAL**

THE AMERICAN BOARD *of* PEDIATRICS



Progression of CBME at the ABP

Develop

Entrustable Professional Activities (EPAs) have been created for general pediatrics and all subspecialties

Investigate

Multiple studies evaluating and validating EPAs as a curricular and assessment framework

Implement

Implementation of EPAs is a key element of our *Certification Excellence* goal of the ABP Strategic Plan

Recent Steps Toward Broader Implementation

CBME Committee created as standing ABP Committee

Timeline established for EPA integration into initial certification decisions by 2028

Integration of EPAs into the Practice Analysis process to create alignment across all ABP assessments

Modification of EPA framework to better address racism and inequities

Renewed engagement and collaboration with stakeholders and the community



Goals for the Next Few Years

2022 - 2024

- Education, engagement, and collaboration with multiple stakeholders
 - Developing toolkits, including faculty development materials
 - Enhancing curricula to address deficiencies
 - Enhancing (or creating) and approach to data collection
 - Establishing standards for equitable and defensible entrustment decisions by at the program level
- Pilot EPA framework for coaching in early continuing certification
- Ongoing CBME research



Longer Term Goals

2025 - 2028

- Continue partnership and collaborative implementation efforts
- Begin EPA data collection (*initially in a non-consequential way*)
- Finalize standards for how EPAs will be used in certification decision-making
- Expand the use of the EPA framework in continued certification

Thank You!

