Educational Effectiveness of Part 4 Maintenance of Certification
Joel S. Tieder, MD, MPH; Sean P. Prall, PhD; Jimmy Beck, MD, MEd; Debra Jensen; Deepthi Nair, MS; Jan D. Carline, PhD

BACKGROUND
• Part 4 Maintenance of Certification (MOC) aims to improve physician knowledge, engagement, participation, and skills in quality improvement (QI).
• There is little data to indicate the circumstances in which this large scale and controversial program achieves these aims.

OBJECTIVES
• To determine whether participation in an American Board of Medical Specialties (ABMS) Part 4 MOC project improves educational outcomes for physicians.
• To explore physician characteristics associated with learning.

METHODS
• Design: On-line survey administered at the beginning and end of a Part 4 MOC project.
• Setting: Ambulatory and inpatient pediatric settings during the 2015 calendar year.
• Participants: Academic and community physicians from various American Board of Medical Specialties (ABMS) specialties participating in an MOC project from an ABMS Multi-Specialty Portfolio Approval Program affiliated with an academic children’s hospital.

METHODS (Continued)
• Intervention: Completion of a Part 4 MOC project.
• Main Outcome Measure: Change in survey response on a 5-point Likert scale compared overall and for 3 learning domains (engagement and attitudes about MOC and QI; application of QI methods; improvement in patient care processes and outcomes).

RESULTS
• 123 paired responses (97% response rate)
• Significant improvement in the learning domains:
  • Engagement and Attitude (-0.15, Z=-2.78, P=0.005)
  • Perceived Application of QI Methods (-0.39, Z=-7.364, P<0.005)
• No significant improvement in Patient Care: (-0.11, Z =-1.728, P=.084)
• Residency year completion not associated with statistically significant differences for any of the domains (P>0.05).
• Prior QI training associated with improvement only in the Application of QI Methods domain (Z=-3.397, P=0.001).

DISCUSSION
• Participation in a Part 4 MOC activity was associated with improvements in:
  • Physician perceptions of engagement and attitude in MOC and QI.
  • Application of QI methods.
• Participation was not associated with perceived improvement in patient care.
• May not be generalizable to non-pediatric or other ABMS MOC portfolio programs or projects.

NEXT STEPS
• Systematic critical evaluation and improvement of the learning effectiveness of all MOC Part 4 activities.
• Better link of MOC to physicians’ learning needs and meaningful improvements in patient care.
• Validate and scale-up survey across other ABMS portfolios and MOC Part 4 projects.

CONTACT
moc@seattlechildrens.org