

ENSURING THE HIGHEST STANDARDS IN SPECIALTY MEDICINE

American Board of Medical Specialties (ABMS) comprises 24 Member Boards that assess and certify physicians meeting specialty practice standards. Board certification is:

- A **credential** that is attained and maintained through rigorous, independent evaluation of a physician's experience, knowledge, and skill.
- An **ongoing process** that helps specialists demonstrate they are keeping their knowledge current, their skills sharp, and their practices strong.
- An **outcome** of initial training and continuing professional development.
- An **identity** representing how physicians' approach their work.
- A **public trust** between patients and the profession to receive and provide safe, quality health care.

ABMS Member Boards certified in

40specialties

89subspecialties

More than
975,000
Board Certified Physicians

TAKING CONTINUING CERTIFICATION TO THE NEXT LEVEL

In 2021, the ABMS adopted new standards for continuing certification that provide a framework for improving patient care through a meaningful process of ongoing professional development and assessment that is aligned with other professional expectations and requirements. Some important changes to the certification program include:

- Assessment of certification status no longer than every five years.
- Continuous evaluation and improvement of certification programs.
- Annual review of professional standing including verification of unrestricted licensure.
- Assessment of knowledge, clinical judgment and skills to practice safely and effectively in the specialty that includes practice-specific content relevant to physicians.
- Personalized feedback that enhances learning.
- Use of data to identify specialty-based gaps shared with essential stakeholders for the development of learning opportunities.
- Engagement in improving health and health care.

ABMS Member Boards are offering new assessment experiences to support physicians in continually assessing and updating their abilities throughout their careers.

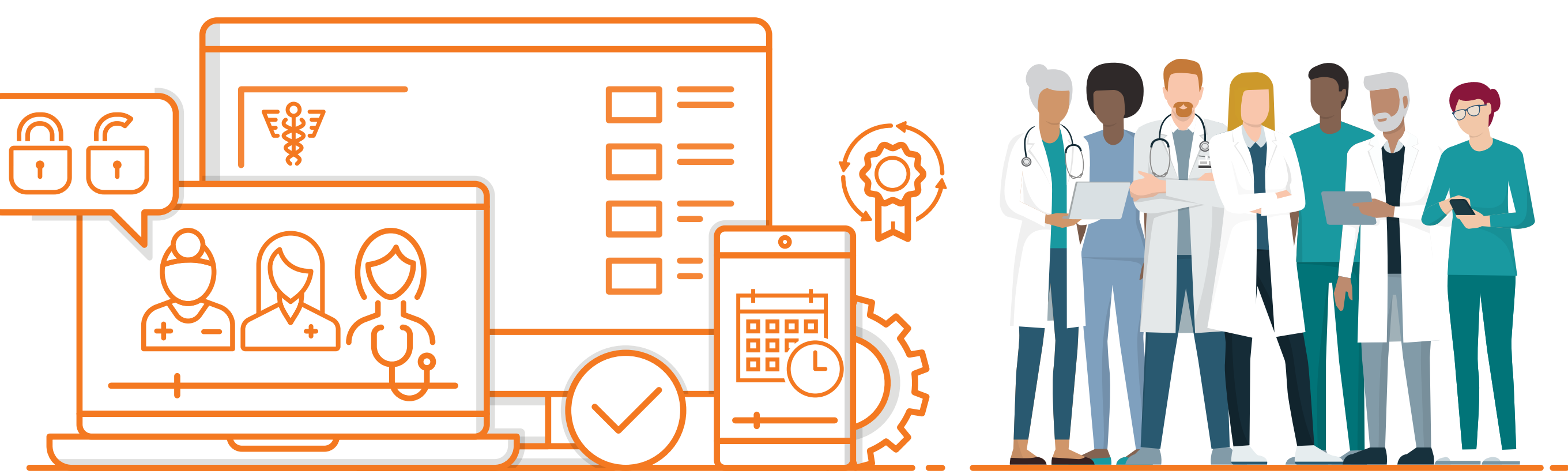
A NEW ROLE FOR ASSESSMENT IN PHYSICIAN CERTIFICATION

Member Boards' incorporating formative approaches to support professional development

APPLYING FORMATIVE ASSESSMENT TO CONTINUING CERTIFICATION

Physicians need to rapidly access and interpret continuously evolving information and understand how to use the new data to support the delivery of the best patient care. To help physicians evaluate their knowledge and determine next steps in learning, the ABMS Member Boards are adding formative assessment to their continuing certification programs. The basic elements the formative assessment process include:

- Identifying gaps between what physicians know and what they need to know.
- Feedback that is constructive and timely, enabling physicians to advance learning.
- Learning progression that breaks knowledge assessment and development into smaller, more manageable activities




MEMBER BOARD OPTIONS SUPPORT CONTINUOUS ASSESSMENT FOR LEARNING

Nearly all of the Member Boards have introduced a formative assessment option as part of their continuing assessment process. Timely, continuous, and frequent assessments are customized to physicians' practice and conveniently delivered online. They typically feature multiple choice questions and other questions based on "must-read" journal articles curated by specialty experts. Depending on the program, features can include:


- Relevant, varied content in areas of expertise.
- Intermittent, spaced repetition and retrieval to maximize learning and retention.
- Immediate feedback with rationale and references to promote greater self-awareness of what is known, what needs development, and where to learn more.
- Ability to compare performance against peers.

Questions are spaced across the continuing certification cycle for the board, so that physicians can learn material over time. This translates into improving patient care because physicians are staying current and learning new things continuously.



Member Board Benefits

Metrics from the assessments provide valuable data to help the Member Boards improve their program. For example, data may identify areas where specialists as a whole may be weak in. The boards can then work with their partners in continuing medical education to deliver material aimed at those areas.



Physician Benefits

The assessments support physicians in being expert, self-directed and lifelong workplace learners. They help physicians understand what they know, learn things they don't know well, and focus ongoing study in areas of their expertise. This allows them to stay current in the everyday knowledge essential to specialty practice.

NEW OPTIONS ARE MAKING THE ASSESSMENT PROCESS MORE WORTHWHILE, MORE PURPOSEFUL, AND MORE EFFECTIVE IN DRIVING PHYSICIAN LEARNING FORWARD

"It promotes **true learning** and reviewing material is **acutally fun** (rather than cramming for a test)."

"Love the **ease of use, visibility of timer**, and **immediate feedback with answer explanations** whether my response was correct or incorrect."


"I feel like I'm **learning as I go**."

"The feedback giving my **score versus my peer comparison group** is great!"

"My favoriate aspect is that I can **customize the question bank** to fit my **specific professional needs**."

EXAMPLES OF ABMS MEMBER BOARD PROGRAMS

The advancements ABMS Member Boards have made in continuing certification assessment are part of an overall commitment to bring value to physicians in practice and support their learning and improvement needs.

American Board of Pediatrics MOCA-Peds Online Continuous Assessment Program		
	Cycle length	4 years (16 quarters)
	Frequency	Quarterly
	Format	Question and Article Based
	Content customization	Core content based on 45 learning objectives chosen annually
	Number items/year	Up to 20 per quarter and no more than 72 annually

MOCA-Peds was designed to assess medical knowledge and clinical judgment while also incorporating learning into the assessment process. The program is available online and accessible by computer, tablet, or smartphone.

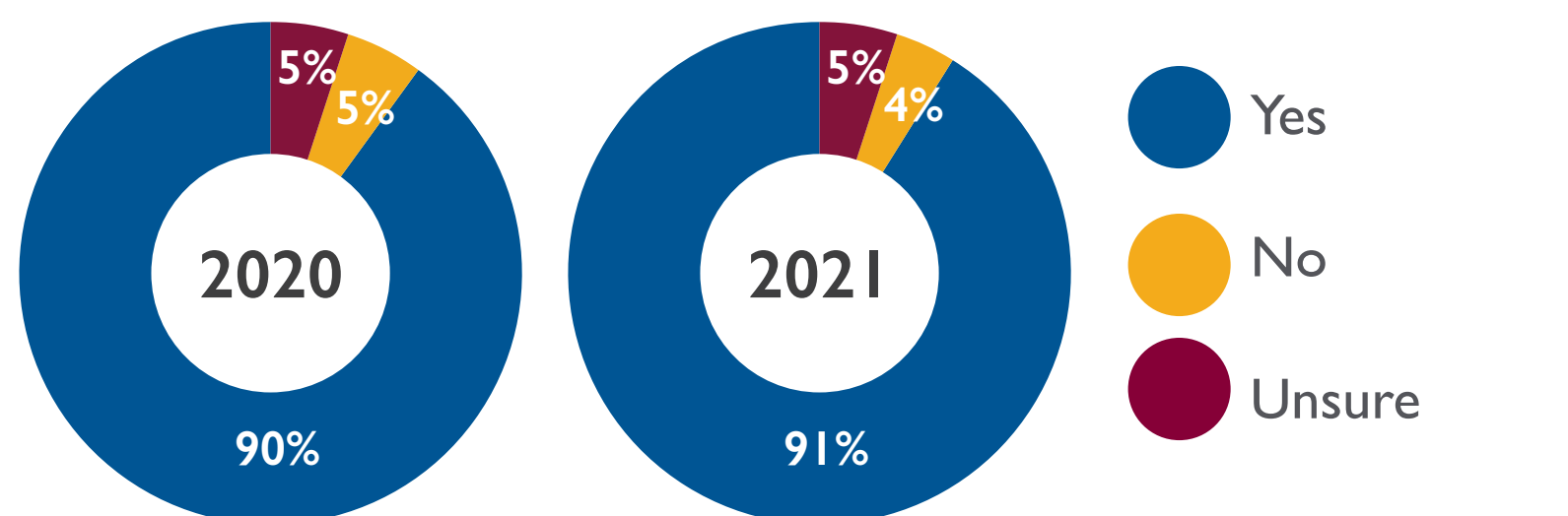
- Core Content:** Physicians answer 15 timed multiple-choice questions per quarter, or a total of 60 annually. These questions are based on the 45 learning objectives chosen annually and derived from the core content for the specialty. 15 of the questions are repeats of previously administered items based. Physicians receive repeat questions via a recommender system that prioritizes questions relevant to their practice that they previously answered incorrectly.
- Journal Articles:** Physicians answer up to 8 additional questions per year based on recently published journal articles. Up to four featured readings are selected per certification area per year, with a diplomate seeing two items per featured reading.
- Trending Topics:** Additional emerging topic items can be added at the discretion of the medical editors. These items cover important, timely topics that may not have made it into the published content outline for a certification area yet, and as such are delivered to diplomates in an educational capacity and do not count toward their quarterly, yearly, or cumulative scores.
- Resources:** Physicians are expected to answer the questions on their own and are not allowed work with colleagues.
- Scoring:** Performance is reported using a standardized score scale that takes into consideration the difficulty level of each question. The four lowest scoring quarters are dropped when computing the final score.


MOCA-Peds is now the preferred assessment option for general pediatricians and subspecialists representing all 15 subspecialties of the American Board of Pediatrics.

Did you learn, refresh, or enhance your medical knowledge based on participating in MOCA-Peds?

The majority of respondents (91%) indicated they had learned, refreshed, or enhanced their medical knowledge as a result of participating in MOCA-Peds.* This is roughly equivalent to what pediatricians said in 2020 (90%).

* Includes data from survey respondents who completed all quarters in MOCA-Peds and were participating for Part 3 credit, regardless of exam area. Data from General Pediatrics and subspecialty exam participants are presented in aggregate due to small sample sizes in some subspecialties.



American Board of Ophthalmology Quarterly Questions Online Program		
	Cycle length	10 years
	Frequency	Quarterly
	Format	Question and article based
	Content customization	Core and concentration
	Number items/year	40 questions plus 5 articles and answer 10 questions

The American Board of Ophthalmology's Quarterly Questions® program is both a learning activity and an assessment tool. Available online, on-demand, Quarterly Questions challenges diplomates to answer relevant clinical knowledge questions and review timely journal articles at least five times during diplomates' 10-year Continuing Certification cycle. In addition to meeting the Continuing Certification requirement for assessment, participation in various aspects of the Quarterly Questions program can be used to earn CME and self-assessment credit, Patient Safety activity credit, and Improvement in Medical Practice credit.

Each yearly edition of the Quarterly Questions program assesses everyday clinical knowledge essential to the practice of ophthalmology and promotes the application of new knowledge from recent peer-reviewed journal articles. The two components are:

Knowledge Assessment


New knowledge questions are released during the first two quarters of every year. Diplomates have the option to choose questions in comprehensive ophthalmology or one of nine other preferred subspecialty areas. In every year that they participate, diplomates see 40 knowledge questions: 30 questions from within their subspecialty and 10 in core ophthalmic knowledge.

Article-Based Learning

For this section of the activity, teams of board-certified ophthalmologists representing the major ophthalmic subspecialty societies have carefully curated the recent literature and selected journal articles that they consider "must-read" publications. During Quarter 3, diplomates are asked to choose five of these articles to read at their own pace and answer 10 questions about them. Article options from 2019 forward can also help diplomates meet Continuing Certification requirements for Patient Safety and Improvement in Medical Practice.

In 2021: 953 respondents

77% of diplomates agreed or strongly agreed that: **"Questions assessed my clinical judgment, going beyond factual recall"** **85%** of diplomates agreed or strongly agreed that: **"Questions were relevant to the specialty area I selected"**

American Board of Physical Medicine and Rehabilitation Longitudinal Assessment		
	Cycle length	4 years (16 quarters)
	Frequency	Quarterly
	Format	Question and article based
	Content customization	Core and concentration
	Number items/year	10-20 questions per quarter/60

The Longitudinal Assessment for PM&R (LA-PM&R) replaced the traditional Maintenance of Certification Examination in 2020. The platform encourages continuous learning and knowledge retention over time. Physicians are administered between 10 and 20 questions each quarter for a total of 60 questions per year.

- Customization:** LA-PM&R offers traditional multiple-choice questions (MCQs) and article-based questions. Each question type allows for customization based on individual practice while maintaining a base of core content.
 - Traditional MCQs (15 to 20 questions in Quarters 1-3):** There are four content areas that cover core PM&R knowledge. All physicians are required to answer 10% of questions in each of the core content areas (40% of the total assessment) and can "dial up" any of the four content areas to 50% of their assessment. Thus, if a physician practices primarily in Neuromuscular Medicine (NMM), they can choose to answer 50% of their questions in NMM, but are required to answer at least 30% of questions between the other three content areas.
 - Article-based questions (10 questions in Quarter 4):** Physicians are presented with articles from a variety of topic areas. They can choose which articles to read and answer questions based on their practice focus.
- Knowledge Retention:** Questions answered incorrectly are readministered in subsequent quarters. Physicians are not provided the correct answer following the initial incorrect attempt so they must read the rationale and references to determine the correct answer. Physicians are rewarded with full credit by correctly answering the reattempt, encouraging knowledge retention.

85%
Of physicians who participated in LA-PM&R, reported that their **questions reflected their scope of practice**.

In response to your request for a more relevant CC program, LA-PM&R allows for customization of questions based on your scope of practice. How well have your questions reflected your scope of practice?

