


**“Surprise: You have been selected for audit!”**

**The ABPN Continuing Certification Process from an Early Career Psychiatrist’s Perspective**

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**Objectives**

- Articulate the rationale behind continuing education
- Describe the ABPN Continuing Certification process
- Navigate the ABPN audit process

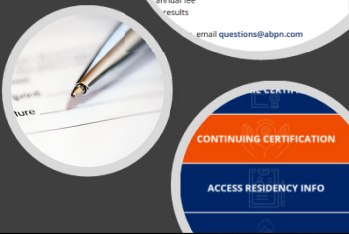
**Our ABPN Physician Portal**

ABPN Physician Portal is your personal account to guide you through the certification process. All ABPN Board certified physicians have an ABPN Physician Portal account.

Physician Portal account is a customized and secure account to:

- Manage and update personal contact information
- Renew medical licenses up-to-date
- Register for and pay for exams or access the ABCC article exam platform
- View and attest to your CC requirements
- View annual fee schedule
- View exam results

email: [questions@abpn.com](mailto:questions@abpn.com)




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**Disclosures**

There will be no discussion of branded products occurring during the discussion.

Diplomate of the American Board of Psychiatry and Neurology

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### Post-Residency Life

- Relocation
- New Job
- Work
- Family
- Friends
- Advocacy
- Community Activities
- Board Certification

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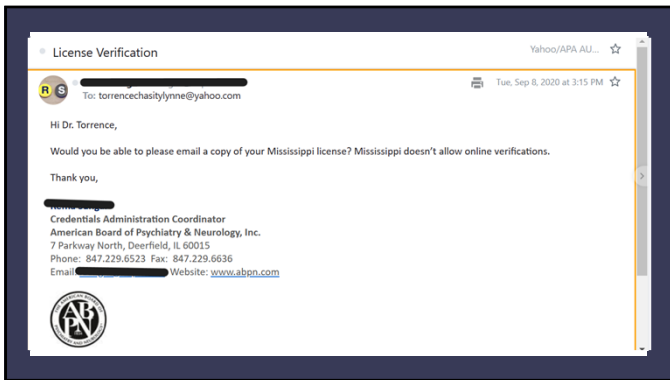
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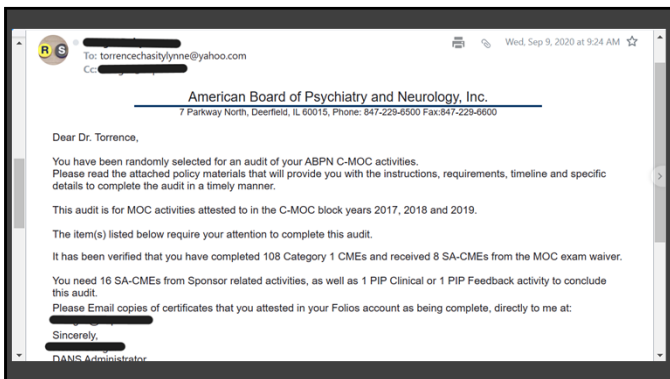
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## Mission

The mission of the ABPN is to promote and assess the competence of psychiatrists and neurologists to provide high quality patient care in an equitable and inclusive manner to diverse populations by:

- Establishing standards and requirements for initial and continuing certification;
- Implementing state-of-the-art testing methods to evaluate candidate and diplomate competencies;
- Encouraging and assessing diplomate involvement in lifelong learning;
- Applying available technologies and information to collect and analyze pertinent data;
- Communicating and collaborating with training programs, residents, candidates, diplomates, professional and health care organizations, and the public;
- Supporting innovative educational and research programs relevant to psychiatrists and neurologists;
- Operating internal programs and services effectively and efficiently; and
- Advancing diversity, equity, and inclusion in all programs and services.

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## In the event of Failure of ABPN Activity Audit

Diplomates whose audit results in a fail their certification status will be changed to Conditional - Non Meeting MOC Requirements.

Diplomates will have the remaining time in their second block to provide the ABPN Credentials and/or with the understanding to satisfy the requirements of the audit. If the requirements of the audit are not met under the conditions, the audit may be changed to a FAIL status.

If the requirements of the audit have not been met by the end of the second block, the following activity will be required:

**Failure to meet MOC Requirements more than six years from block of MOC activities**

- A diplomate will be required to "test out" if the audit does not complete more than 6 years (2 blocks) of MOC activities. A diplomate may change his/her status back to "Certificate Holding MOC Requirements" upon successful completion of MOC activities included in one block.
- No requirement for further testing and no requirements are waived.
- No Category 1 (MOC) from their last block (MOC credits from 1st activities)
- 20 MOC from all subsequent MOC activities
- 1 requirement in Medical Practice (MP) unit
- 1 Board Status (BS) requirement (BSU)
- Pay the full recertification fee and pass the MOC examination

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**ABPN  
Continuing  
Certification  
Program**

As mandated by the American Board of Medical Specialties (ABMS), the Board has developed a CC program that includes four components:

- [Professionalism and Professional Standing \(Part I\)](#)
- [Lifelong Learning \(CME\), Self-Assessment \(SA\) and Patient Safety \(Part II\)](#)
- [Assessment of Knowledge, Judgment, and Skills \(Part III\)](#)
- [Improvement in Medical Practice \(PIP\) \(Part IV\)](#)

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**I.  
Professionalism  
and  
Professional  
Standing**

- Requires an active unrestricted medical license in all states of practice
- Upload to the ABPN Physician Portal annually

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**II. Lifelong Learning, Self-Assessment, and Patient Safety**

<b>Lifelong Learning (CME)</b>	90 CME activities for each 3-year block CME can be ANY Category 1 credits relevant to one's field of practice. Diplomates choose their own CME activities. Activities do not need to be ABPN approved.
<b>Self-Assessment (SA)</b>	24 Self-Assessment (SA) CME activities for each 3-year block Specific type of CME activity that assist physicians in recognizing their current knowledge base in order to identify specific topics for gaining further knowledge
<b>Patient Safety</b>	1 Patient Safety Activity requirement for diplomates whose first block of Continuing Certification (CC) activities began in 2017 or later Completion required within three years prior or three years after entering the CC Program will fulfill the one-time requirement Participation ensures diplomates have adequate knowledge of safety science and principles.

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### III. Assessment of Knowledge, Judgment, and Skills

#### NEW Initial Board Certification and Article Based Continuing Certification (ABCC) Pathway

- Ongoing professional journal article-based assessment activity designed as an alternative to the Continuing Certification Part III traditional 10-year recertification/CC examination
- Available to all diplomates beginning with the 2022 ABPN assessments and exams
- Default option for all ABPN-administered specialties and subspecialties, except for Neurocritical Care, which will be added in 2025
- Required to successfully complete a set of article exams for each of their certifications on an ongoing basis every 3-year block

#### Initial Board Certification and traditional 10-year recertification examination

- Option available

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### ABCC Pathway vs 10-yr Recert Examination

	Article-based continuing certification (ABCC)*	Traditional cc/recertification examination*
FREQUENCY	Every 3-year block	Every 10 years
LOCATION	Online	Pearson VUE computer test center
AVAILABILITY	Beginning 2022	Currently
FORMAT	Online, open-book, non-timed	Proctored, closed-book, timed
CONTENT	Covers ten categories per specialty	Covers ten categories per specialty
RESULTS	Instant, upon completion of article exam	10-12 weeks after exam administered
COST**	Covered with payment of annual fee(s)	Covered with payment of annual fee(s)
CREDITS	16 Self-Assessment (SA) CME credit waiver	8 Self-Assessment (SA) CME credit waiver

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### IV. Improvement in Medical Practice

This quality improvement exercise is designed for **clinically active** physicians to identify and implement areas for improvement by choosing 1 of the following:

- **Clinical Module:** Review of one's own patient charts on a specific topic (diagnosis, types of treatment, etc.)
- **Feedback Module:** Obtain personal feedback from either peers or patients regarding your own clinical performance using questionnaires or surveys.

#### Each Module consists of three steps to complete within a 24-month period:

- Step A: Initial Assessment
- Step B: Identify and Implement Improvement
- Step C: Reassessment

#### General Information

- For the C-MOC program, one PIP activity is required every 3 years.
- ABPN does not collect patient or peer data. If audited, ABPN will require that diplomates explain how they carried out the Improvement in Medical Practice activity and submit information about their process and improvement plan.

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## Controversial PIP Activities

Current requirements for CC activities for Board certified physicians within the CC process — in particular **Part IV: Improvement in Medical Practice (PIP)** — have been the subject of increased discussion recently by physicians and medical societies.

Based on recent feedback from its professional society partners, the ABPN has respectfully asked the ABMS to consider modifying its 2015 MOC Standards so that Part IV is an optional component of MOC. **Unless and until that happens, the ABPN will continue to follow the ABMS MOC Standards and require participating diplomates to complete all four Parts of MOC.**

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## PIP-Feedback Module Options

**How to Complete a PIP Feedback Module**

**Step A: Initial assessment of patient or peer feedback**

A diplomate can collect feedback using one of the following options:

- Patient\* feedback forms from five patients
- Peer\*\* feedback forms from five peers
- Resident evaluation feedback forms from five residents
- Supervisor evaluation feedback form from one supervisor
- 360-Degree evaluation feedback forms from five respondents.

**Step B: Identify and implement improvement**

- Based on results from feedback, identify opportunities for improvement to the effectiveness and/or efficiency in practice as related to the general competencies and take steps to implement improvements as needed.
- If no areas for improvement are determined based on initial assessment, then maintenance of performance in medical practice should be reassessed in Step C.

**Step C: Reassessment of patient or peer feedback**

- Within 24 months of initial assessment, collect data from another set of the same or different patients or peers.
- Use the same feedback option for the initial assessment and reassessment steps.

- Patient\* feedback forms from five patients,
- Peer\*\* feedback forms from five peers,
- Resident evaluation feedback forms from five residents,
- Supervisor evaluation feedback form from one supervisor, or
- 360-Degree evaluation feedback forms from five respondents

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## PIP-Clinical Module Options

**How to Complete a PIP Clinical Module**

**Step A: Initial assessment of five patient charts**

- Collect data from at least five of your own patient charts in a specific category (diagnosis, type of treatment, or treatment setting) obtained from your practice over the previous three-year period.
- Compare the data from the five patient cases with published best practices, practice guidelines, or peer-based standards of care (e.g., hospital QI programs, standard practice guidelines published by specialty societies), using a minimum of four quality measures.

**Step B: Identify and implement improvement**

- Based on results from chart reviews, develop and carry out a plan to improve effectiveness and/or efficiency of your medical practice.
- If no areas for improvement are determined based on initial assessment, then maintenance of performance in medical practice should be reassessed in Step C.

**Step C: Reassessment of five patient charts**

- Within 24 months of initial assessment, collect data from another five of your own patient charts (may use same or different patients).
- Use the same category and practice guidelines for the initial assessment and reassessment steps.

- Complete a Clinical Module from the [ABPN Approved Products List](#)
- Participate in your institution's QI effort that is approved by the [ABMS Portfolio Program](#)
- Participate in an approved registry such as the [Acad Registry](#) from the American Academy of Neurology or the [PsychBO Registry](#) from the American Psychiatric Association
- Participate in a Joint Commission accredited, specialty-specific Ongoing Professional Practice Evaluation (OPPE). **Individual preapproval is no longer required.**
- Complete a quality improvement effort under the auspices of an International Certification Organization (e.g., RCPS-C) that meets the ABPN CC requirements; submit for preapproval.
- Seek individual preapproval (**at no charge**) for your own developed Clinical Module, or your institution's quality improvement efforts. Submit for preapproval using the [Individual Part IV Improvement in Medical Practice \(PIP\) Approval Request Form](#).

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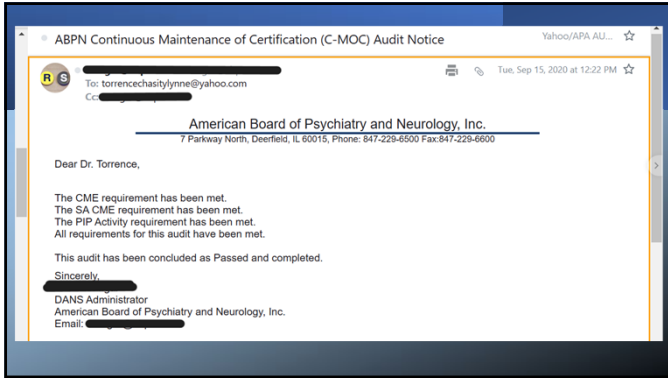
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### ABPN Audit Process

- Initially anxiety-provoking and shocking notification
- Overall positive, professional, and easy process

**BECOME CERTIFIED**

**CONTINUING CERTIFICATION**

**ACCESS RESIDENCY INFO**

**CHECK PHYSICIAN STATUS**

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### How does an ECP attain and maintain certification?

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### Continuing Certification

**Complete CMEs**

- APA or district branch conferences
- AMA, state medical associations
- Medical organizations and conferences
- Academic Institutions and Grand Rounds

❖ Keep your own personal copy of continuing medical education certificates in a protected electronic file or protected filing cabinet in case of audit.

\* Ensure that you meet both ABPN and State Licensure CME requirements annually.

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### Continuing Certification

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**Complete SA-CMEs**

- 8 received from initial board certification
- 16 received from article pathway completion
- Available for APA ECPs through free Focus journal subscription following completion of questions
- Options available on ABPN approved products list at low cost

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Citations  
ABPN – [www.abpn.com](http://www.abpn.com)  
\* All information was taken directly from the ABPN website.  
\* No information enclosed is original work of the author.

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Questions?

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