



*Lifelong Learning and
Self-Assessment for MOC Part 2*

CME Provider Program Manual

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THE AMERICAN BOARD *of* PEDIATRICS

Overview

The American Board of Pediatrics (ABP) certifies general pediatricians and pediatric subspecialists based on standards of excellence that lead to high quality health care during infancy, childhood, adolescence, and the transition into adulthood. ABP certification provides assurance to the public that a general pediatrician or pediatric subspecialist has successfully completed accredited training and fulfills the continuous evaluation requirements that encompass the six core competencies: patient care, medical knowledge, practice-based learning and improvement, interpersonal and communication skills, professionalism, and systems-based practice. The ABP's quest for excellence is evident in its rigorous evaluation process, and in new initiatives undertaken that not only continually improve the standards of its certification, but also advance the science, education, study, and practice of pediatrics.

Maintenance of Certification (MOC) is the process whereby diplomates of the ABP maintain their Board certification. MOC allows participants to engage in various knowledge self-assessments, practice assessments, and quality improvement activities designed to augment professional development throughout the duration of their careers.

The ABP Lifelong Learning and Self-assessment CME Provider Program is the process through which the ABP recognizes accredited CME activities for MOC. Alignment of this program with ACCME's accredited CME system allows ABP Board-certified physicians to earn lifelong learning and self-assessment MOC points for accredited activities which meet the requirements specified in this document.



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ABP Lifelong Learning and Self-Assessment CME Provider Program Requirements

Accredited providers seeking to have accredited CME activities recognized for lifelong learning and self-assessment MOC points must attest that the activity meets the following requirements:

ABP 1	The activity is directly provided or jointly provided by a provider accredited in good standing within the ACCME system.
ABP 2	<p>The activity is certified for AMA PRA Category 1 Credit in one of the following activity types:</p> <ul style="list-style-type: none"> • Enduring materials • Internet-enduring materials • Journal-based CME • Test-item writing • Manuscript review • Live activities, including: <ul style="list-style-type: none"> ○ Courses ○ Internet live courses ○ Regularly scheduled series ○ Learning from teaching
ABP 3	The activity is relevant to physicians certified by the ABP, as demonstrated by the professional practice gap(s) and content of the activity.
ABP 4	<p>The activity meets the applicable ABP assessment of learner format-specific criteria:</p> <ul style="list-style-type: none"> • All activities, including live activities, must include a comprehensive evaluation component that assesses learner knowledge and/or skill and provides feedback to the learner as part of the activity. • Learner assessment methods must be relevant to the activity engaged in and include a justifiable passing standard, as determined by the provider. See Appendix A for Evaluation/Assessment Examples. • Feedback to the participant must include learner results with rationale for correct answers or attainment of applicable skill(s) and include relevant citations where appropriate. • For enduring materials, journal-based CME, and live activities, the activity is peer-reviewed during the planning process by at least two reviewers who are not the author(s).

ABP CME Provider Program Policies

MOC Point Assignment

For activities entered through ACCME's Program and Activity Reporting System (PARS), MOC points are equivalent to the maximum number of CME credits for the activity. Participant completion should only be reported when the maximum number of MOC points have been achieved as determined by the provider. Partial credit will not be awarded to participants. MOC points can only be awarded by whole number.

Providers offering activities that are longitudinal in nature, such as regularly scheduled series, should register the activity in PARS once and report learner completion data only after the maximum amount of credit has been earned (following completion of the assessment mechanism). It is up to the provider to determine how/when to administer the assessment mechanism.

Participant Completion Information

The provider must have systems, resources, and processes in place to:

- Collect participant completion data described in Table 1;
- Obtain permission from the participant to share completion data with the ACCME; and
- Transmit the completion data to the ACCME on behalf of the participant upon successful completion.

ABP diplomates must meet yearly reporting requirements related to completion of activities, and so accredited providers are asked to submit learner completion data to the ACCME within 30 days of the completion date and no later than December 1 of the calendar year. Activities completed after December 1 must be entered immediately into PARS. This will help ensure that diplomates are able to get credit for the activities in which they engage in the proper ABP reporting year.

Table 1: Participant Completion Information

Field Name	Description
ABP ID	Every ABP Board certified physician has a unique, ABP ID number. Physicians who do not know their ABP ID can look it up on the ABP website. https://www.abp.org/content/verification-certification
First Name	Physician's first name
Last Name	Physician's last name
DOB	Physician's date of birth (mm/dd)
Activity Completion Date	Date (mm/dd/yyyy) the physician completed the activity. Credit will be awarded on this date.
PARS Activity Identifier	A unique numeric value automatically assigned by PARS when an activity record is created.
MOC Points	MOC points based on the maximum allowable CME credit.

Participant data is governed by the ABP's Privacy Policy. Identifiable patient data must not be provided to the ACCME or the ABP by any organization or participant.

Participant CME/MOC Completion Documentation

If requested by the participant, the provider must provide the participant with written documentation (eg, that could be downloaded or provided in hard copy), to include the name of the activity and the provider; the participant name; the participant's ABP ID number; the date of completion of the activity; and the PARS activity identifier; in addition to a statement that the activity has been approved for ABP MOC Part 2 credit along with the number of MOC points awarded.

Program entry into PARS

The activity must be entered into PARS before the provider can report any physician completion data.

Program Fees/Participant Fees

The ABP will not charge a fee to providers that register activities in the CME Provider Program at this time. The ABP may revisit its fee structure in the future.

Providers are responsible for all costs associated with developing and operating the activity. The ABP does not have a policy that precludes the provider from charging a fee for participation in the activity; the ABP will not reimburse fees charged by the provider to participants.

Data Privacy and Security Compliance

Providers are responsible for ensuring that the appropriate data privacy and security safeguards are in place and conform to all relevant regulatory and industry requirements.

Public information

The following information, provided to the ACCME by the provider, is considered public information, and therefore may be released by the ABP and/or ACCME.

- Activity title
- Activity type
- Accredited provider name
- Accredited provider contact information (including phone number and website address)
- Joint provider name (if applicable)
- Activity date (start date, in the case of a multi-day live activity or enduring material activity)
- Specialty(ies) activity addresses
- MOC points

The following information will be made available in the physicians' MOC history reports located in the secure physician login area of the ABP website:

- Activity title
- MOC point value
- Activity completion date

Communication of MOC Recognition

The MOC statement must appear on all MOC activity materials and brochures distributed by accredited organizations, with the exception of initial, save-the-date type activity announcements, provided such announcements contain only general, preliminary information about the activity such as the date, location, and title. If additional specific information is included, such as faculty and objectives, the MOC statement must be included.

“Successful completion of this CME activity, which includes participation in the activity, with individual assessments of the participant and feedback to the participant, enables the participant to earn [XX] MOC points in the American Board of Pediatrics' (ABP) Maintenance of Certification (MOC) program. It is the CME activity provider's responsibility to submit participant completion information to ACCME for the purpose of granting ABP MOC credit.”

Audits

Audits may be performed by the ACCME and/or by the ABP at any time. The ACCME will provide a certain level of “Audit Services” on behalf of the ABP CME Provider Program for the benefit of the ABP, its diplomates, and providers accredited by the ACCME system, to ensure ABP requirements are maintained.

As a requirement of participating in the ABP CME Provider Program, accredited providers agree to participate in an audit of their activity(ies), and if selected, to allow the ACCME to share the results of the audit with the ABP. The ABP will review activities entered into PARS by the provider to ensure that accurate and appropriate data are completed by the provider.

The ACCME and/or ABP will select activities for audit from among those registered in the ACCME’s Program and Activity Reporting System (PARS) as “ABP CME Provider Program MOC-compliant Education.” The ACCME may determine the manner of selection of activities for audit. Accredited providers are required to submit the materials described in Table 2 for their activity(ies) selected for audit within 30 days of the initial request for information.

The ACCME will produce an audit report in compliance with the ABP CME Provider Program Requirements. The ABP will determine if additional actions are required for the accredited provider if ABP’s requirements are not met. Providers that fail an audit will receive a warning for the first violation and will not be permitted to submit participant completion information for that activity. While the ABP will not revoke MOC points that have already been issued to physicians who have completed an activity that fails an audit, future non-compliance in regard to ABP policies and requirements may result in a change in the provider’s ability to offer ABP MOC credit. The ABP reserves the right to revisit this policy in the future.

Table 2: Required Audit Materials

ABP Reqts.	Materials to be Submitted by Accredited Provider
ABP 1	None - only providers accredited within the ACCME system are eligible
ABP 2	None - only allowable types can be registered for ABP MOC in PARS
ABP 3	A description of the professional practice gap and educational need for the activity.
ABP 4	Information relevant to the method of evaluation of the learner: <ul style="list-style-type: none"> • A copy of the learner assessment tool (eg, the specific multiple choice questions used in the activity, the criteria use by a small group leader, skill demonstration in simulated setting, prompts for reflective statements) • A description of how the learner assessment is conducted, including what the passing standard is for the learner assessment mechanism (eg, multiple choice question test, passing score, small group discussion, observation, and feedback during simulation) • A description of the process by which feedback was provided to learners; and • If credit has been awarded, verification that the learner(s) successfully met the passing standard for the activity
ABP Policy	Evidence that learners were informed that their participation information would be shared with the ABP through PARS.

An audit checklist document found in **Appendix B** may be used by providers to ensure that activities audited for MOC CME credit through the ABP meet the requirements for MOC CME credit as detailed by the ACCME and ABP.

Appendix A - Evaluation/Assessment Examples

The ABP and ACCME share the expectation that accredited providers evaluate the impact of their activities on individual learners' knowledge, strategies/skills, performance, and/or patient outcomes, and provide feedback to individual learners about their performance. The following examples of assessment approaches have been compiled as a resource for accredited providers.

The assessment and passing standards listed below are not exhaustive. Rather, the method of learner assessment and passing standard should be determined by the provider and be appropriate not only to the evaluation mechanism utilized, but the expected outcomes for learners as well.

Important Tips:

- Accredited providers must be able to demonstrate and document how the learner has participated in/completed the assessment (ie, through the examples provided or through another assessment method) for the activity in order to submit the learner's participation data for MOC CME activity.
- Accredited providers may determine the method of learner assessment and passing standards. A combination of approaches to assessments may provide rich information regarding learner change.
- If the activity is selected for audit, the accredited provider will be asked to submit the evaluation mechanism, a description of how learners were assessed and how feedback was provided to participants, as well as a list of diplomates who met the passing standard.



Evaluation/Assessment Examples

Evaluation Mechanism	Evaluation Method	Passing Standard	Feedback Method
Case discussion	Learners asked to share with each other and group how they would approach the case at various stages.	Learners actively participate in the conversation as judged by a group leader or observer.	The outcome of the case is shared.
Written responses	Learners write down what they have learned and indicate what practices they'll maintain or change.	Learners write a reflective statement that is assessed by the instructor, and make a commitment to change or maintain an element of practice.	Leader/facilitator summarizes what was discussed and best next steps for learners.
Audience response system	Learners select answers to provocative questions using the ARS.	Learners engage adequately with an acceptable number of attempts. Threshold set by provider.	Answer to each question is shared verbally or in writing.
Quiz	Learners complete answers to a quiz during or after an activity.	Fraction of answers correct set by provider.	Best answer to each question is discussed or shared.
Table-top exercise	Learners write down next steps in an evolving case at various set points.	Learners write a possible next step to each question. Participation documented.	Best practice at each step is discussed or shared after each set point.
Simulation	Learners demonstrate strategy/skill in a simulated setting – could be role-play or formal simulation lab.	Learners participate in simulation as judged by a facilitator or observer.	Best practice or technique is discussed and shared throughout, or at the conclusion of, the simulation.
Review of manuscript	Learners provide constructive feedback on the manuscript according to the specifications of the journal.	Quality of the manuscript review is acceptable as determined by the editor.	Editor provides feedback on the adequacy of the review to the learner.
Writing test items	Learners write test items that are evaluated by committee chair and peers.	Item quality is adequate as determined by committee chair.	Feedback is received from peers and committee chair throughout the writing process.
Learning from teaching	Identification by the teacher (who is the learner in this instance) of knowledge gaps that need to be filled in order to teach the material.	A reflective assessment by the teacher/learner identifying ways in which the knowledge gaps were filled.	Structured, documented feedback provided to teacher by a mentor or peer upon review of the gap and the identified learning.



ABP MOC Part 2 Provider Program *Audit Checklist*

Appendix B

Accredited providers may be required to submit materials for activities selected for audit. Please complete the Audit Checklist for each activity and retain this document along with any other relevant materials for your records. The ABP reserves the right to request audited materials directly from the provider at any time. Once contacted, the provider has 30 days to respond and provide requested materials to the ABP.

PARS Activity Identifier MOC Points

Audit Attachment Checklist

Retain a copy of the audit attachments, along with the Audit Checklist for your records.

- Provide a copy of the evaluation tool.
- If credit has been awarded, provide verification that the learner(s) successfully met the passing standard for the activity.
- Provide a copy of documentation indicating that learners were informed that their completion data would be shared with the ABP through PARS.
- Provide a listing of participants who received ABP MOC credit for the activity.
- Provide an example of a completion certificate that would be provided to a learner if requested.

1. Is the Activity directly provided or jointly provided by a provider accredited in good standing within the ACCME system?
 Yes No
2. Is the activity certified for AMA PRA Category 1 Credit in one of the following activity types: Yes No

Indicate Activity Type:

- Enduring materials Internet-enduring materials Journal-based CME Test-item writing
- Manuscript review

Live activities

- Courses Internet live courses Regularly scheduled series Learning from teaching

3. Provide a description of the professional practice gap and educational need for the activity.

4. Provide a brief description of how the evaluation is conducted, including what the passing standard is for the evaluation mechanism, and how feedback is provider to the learner.