The Maintenance of Certification (MOC) Program

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NOTE

• The information given in this presentation is accurate as of June 22, 2020.
• For the latest information, please visit the ABR website at www.theabr.org
Learning Objectives

- Identify factors that lead to the design and implementation of the original ABR MOC program.

- Explain the process for how the ABR MOC program is reviewed and improved.

- Describe changes to the ABR MOC program since original implementation.
What lead to MOC?
What lead to MOC?

- **Scientific Research**
  - In professions that were studied professional competence decreased over time

- **Public Concerns**
  - Focus Groups
    - Strongly recommended an MOC program with an exam

- **Professional Interest**
  - Keep MOC with the boards
    - NOT the government
    - NOT Insurance companies
    - NOT TJC
What lead to MOC?

• Founded out of concern for quality of care and need to set standards
• Ongoing need to monitor and promote quality and safety
  • 44,000 to 98,000 Americans die each year as a result of preventable errors caused by faulty systems or processes used in their care
Why MOC?

- Demonstrates commitment to lifelong learning and self-assessment
- Allows the physicist to self-direct own continuing education
- Results in continuous quality improvement
What is MOC?

- The ABR MOC program builds on the validity of the IC process and provides a framework for self-regulation by the profession to improve quality of care.

- The program evaluates on a continuous basis, the six essential competencies. MOC uses four parts to evaluate these competencies.
The Six Core Competencies

- Patient Care
- Medical Knowledge
- Practice-based Learning and Improvement
- Interpersonal and Communication Skills
- Professionalism
- Systems-based Practice

Original ACGME List

- Widely adopted beyond the boards
  TJC, Hospitals ....
ABMS Maintenance of Certification

PART 1
Professionalism & Professional Standing

PART 2
Lifelong Learning & Self-Assessment

PART 3
Assessment of Knowledge, Judgment & Skills

PART 4
Improvement in Medical Practice
## MOC Annual Review

<table>
<thead>
<tr>
<th>MOC Element</th>
<th>Compliance Requirement</th>
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<tbody>
<tr>
<td>Professionalism and Professional Standing</td>
<td>Valid, unrestricted state license (TX, FL, HI, NY) or professional standing attestation by one ABR certified diplomate</td>
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<tr>
<td>CME/CE</td>
<td>At least 75 Category 1 CME/CE credits in previous 3 years</td>
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<tr>
<td>Self-Assessment CME/CE (SA-CE)</td>
<td>At least 25 of the 75 Category 1 CME/CE credits must be SA-CE.</td>
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<tr>
<td>Assessment of Knowledge, Judgement and Skills</td>
<td>Pass most recent OLA performance evaluation or have passed a traditional exam in previous 5 years</td>
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<tr>
<td>Improvement in Medical Practice</td>
<td>Completed at least 1 PQI project or Participatory Activity in previous 3 years</td>
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<tr>
<td>Fees</td>
<td>Current with MOC fees</td>
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The Evolution of MOC
Evolution of MOC

- **1995**: ABR starts issuing time-limited certificates
- **2000**: Member board commitment to MOC
- **2002**: Four components of MOC established
- **2003**: All board volunteers commit to MOC participation
- **2007**: ABR's first full MOC program went live
- **2012**: ABR implements new MOC process known as Continuous Certification
- **2016**: ABR announced plans to move away from 10-year exam to OLA
Review, Assessment and Improvements to MOC
What sources does the ABR consult when considering changes to MOC?
MOC Program Assessment

- How does the ABR (BOG, BOT, Staff) assess the MOC program?
- How are areas of potential improvement brought to the attention of the ABR?

✓ Feedback from Diplomates is carefully reviewed
✓ Discussions at professional conferences and meetings
✓ Some surveys (ad hoc)
✓ Communications with staff, board members
MOC Program Improvement

- How are potential improvements to the MOC program reviewed?
- How are modifications determined?

- Discussions at trustee and governor levels
- Trustees have calls twice a month to discuss hot and routine topics and take immediate action where appropriate
- Board meeting twice a year
- Decisions made and approved
MOC Program Improvement

- How are modifications to the program communicated to diplomats?
- How are modifications implemented?

✔ Email, ABR website, blogs, The Beam (e-newsletter), social media, society publications, letter sent to appropriate organizations (AAPM, CAMPEP, SDAMPP)

✔ Typically a year or two later after announcement (for example, OLA – announced in 2016, implemented in 2019/2020)
When does the ABR change the MOC program?

- When improved ways to meet the standards become evident
- When equivalent but less burdensome methods to meet the standards become available
- When required by the ABMS
- When it will improve the quality of the process
- When it will simplify the process for diplomates
Evolution of MOC

- MOC Team Tracker 2013
- Expanded Part 2 options for SA-CME 2012
- Expanded Part 4 Qualifying Activities 2015
- ABR OLA launched for MP, RO, IR 2020
- ABR Customer Service Center launched 2015
- New ABR website launched 2017
- ABR OLA launched for DR 2019
- Simplified MOC annual attestation 2016
Advantages of OLA

• OLA eliminates the need for and the cost of travel
• It requires very little time away from your practice
• It offers immediate feedback with rationale and references
• It is more focused and relevant to your daily practice
• It is designed to be an ongoing, non-stressful experience
• It is flexible – Within broad guidelines you decide how often to engage with OLA
• Easy to participate as a question rater
OLA Enhancements
Implemented beginning 2020

• More time for selected questions

• Reduction in SA-CME requirements for OLA participation

• Ability to modify frequency of OLA emails

• Performance feedback
Early OLA Statistics

• Over 3,200 (94.2%) diplomates have answered at least one OLA question
• Over 46k OLA questions have been answered
• Less than 3% of all questions viewed have been declined
• 37% have volunteered to participate in the OLA question rating process
MOC Program Evolution

• In order to remain current and meaningful into the future, the ABR MOC program undergoes continual review and revision by the ABR board of governors and the ABR board of trustees.

• As professional standards and societal expectations regarding the competence of healthcare providers continue to evolve, further enhancements will be made to the ABR MOC program to enable it to continue to meet the needs of our patients and Diplomates into the future.

From “ABR Trustees' Opinion – The Value of MOC for Medical Physicists”, ABR Trustees
QUESTIONS?

Please contact an ABR Certification Manager at:

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or

(520) 790-2900