Focus on Maintenance of Certification

Update on ABR Online Longitudinal Assessment

2017;10[1]:9-10

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Last May, the ABR announced that it would develop a pilot to establish a new MOC Part 3 assessment. This new product, known as ABR Online Longitudinal Assessment (ABR OLA), will replace the secure, proctored MOC Examination that was previously required every 10 years. ABR OLA will continue to support a meaningful credential, ensuring diplomate competence for patients and the public. It will also have many advantages for ABR diplomates:

- A continuous online process with much greater flexibility
- Elimination of travel expenses and time away from family and work
- Increase in the relevance of MOC Part 3 to diplomate practice
- Immediate feedback so diplomates can eliminate any gaps in knowledge

In the last issue of The BEAM, Dr. Milton Guiberteau described current plans for ABR OLA in detail [1]. Briefly, the process will be as follows:

- Diplomates will receive an email alert each week advising them of their available online question opportunities and their current progress.
- After answering a question, diplomates will be given immediate feedback, including the correct answer, rationale, and at least one reference so they can explore the topic in greater depth if desired.
- ABR OLA also will allow diplomates to give valuable feedback to the ABR regarding the relevance of the material provided, which will be used to continuously improve the ABR’s Part 3 assessment of knowledge, judgment, and skills.

The ABR is currently forming item-writing committees for each specialty and subspecialty area and is also developing the software to facilitate delivery of the weekly question opportunities and other aspects of OLA. We have a great deal of work to do to make ABR OLA a reality but are confident that we will develop an excellent product for our diplomates. Our intent is to begin a limited pilot in the latter part of 2018 to test the functionality of the product with a subset of our diagnostic radiology diplomates. Based on pilot feedback, modifications, and completion, the ABR anticipates a full launch for all diagnostic radiology diplomates in 2019.
Launch dates for radiation oncology, medical physics, and interventional radiology diplomates will be announced in the future. The ABR’s move to online longitudinal assessment is consistent with other American Board of Specialties (ABMS) member boards. The ABMS is developing a platform called Certlink for online longitudinal assessment, which will be used by eight of the smaller boards that are currently developing their pilots. A few of these will launch in 2017. In addition to the ABR, three other ABMS member boards are developing independent longitudinal assessments, including the Boards of Allergy and Immunology, Pediatrics, and Anesthesia. The American Board of Anesthesia has led the way in the movement to longitudinal assessment for MOC Part 3. They developed their initial pilot in 2014 and have engaged all their MOC diplomates in the ABA “MOCA Minute” pilot since January 2016. Each board is using a slightly different process for their online longitudinal assessment, but the ABMS is establishing a collaborative group to evaluate these programs and to research their impact on MOC and physician professional development.

Longitudinal assessment tools have been studied in other areas of adult education and have demonstrated utility not only in the assessment of knowledge, but also for improvement in learning. The immediate feedback provided by ABR OLA will assist our diplomates in guiding their continuing education (MOC Part 2), and being able to re-test areas of weakness will allow them to measure their learning over time. On a larger scale, ABR OLA will help us identify potential knowledge gaps common among groups of radiologists. This information can be given to our specialty societies, which can then develop educational tools to further benefit the field.

The ABR trustees and governors are very excited about ABR OLA and believe it will help us continue to make MOC more relevant and useful for our diplomates as we work together to assure the public that radiology is fulfilling its obligation to stay current in its various specialties.

Reference