How Diplomate Feedback Can Boost Certification Satisfaction

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Outline

• Introduction: objectives & overview of data collection
• Data collection standardization process—history
• Feedback survey instruments—present
• Analytic strategy
• Key findings
• Board activity improvements & conclusions
• Wrap up / Q&A
Introduction

Objectives

Overview of Data Collection
Objectives

• Learn about the survey instruments the ABFM uses to collect feedback from Diplomates about Family Medicine Certification activities.
• Understand the analytic process applied to the survey data.
• Discuss how Diplomate feedback has been used to inform changes in ABFM Family Medicine Certification activities.
Data Collected in Continuous Certification Stages

Requirements

• Part I: Professionalism (Licensure & Personal Conduct)
• Part II: Self-Assessment & Lifelong Learning (KSA, CSA & CKSA)
• Part III: Cognitive Expertise (Exam)
• Part IV: Performance Improvement (PI Activity)

Data collected

• Performance
• Feedback on each activity (quantitative ratings and qualitative responses)
  • Satisfaction
  • Value
  • Practice relevance
  • Function of activity
  • Changes in practice due to activity
Post-ABFM Activity Diplomate Feedback Surveys

• Part II: Self-Assessment & Lifelong Learning
  • 16 SAMs (Self-Assessment Modules—2 parts; no longer offered)
  • 18 KSAs (Knowledge Self-Assessment)
  • 14 CSAs (Clinical Self-Assessment)
  • CKSA (Cognitive Knowledge Self-Assessment)

• Part IV: Performance Improvement
  • 7 PPMs (Performance In Practice Modules—phasing out)
  • 7 PI Activity (Performance Improvement Activity)
Data Collection Standardization Process

A Little History
History

10 years of data!
Analysis problematic…

- Survey instruments
  - Variable administration over time
  - Different questions

- Closed questions
  - Unclear constructs (stems)
  - Different scales for same questions (response options)

- Open text questions
  - Not targeted
  - Redundant
  - Produced large quantity of meaningless data
    (almost 450,000 comments!)
Please rate the following aspects of this activity (6 = strongly agree, 1 = strongly disagree):

9. Content is appropriate for my practice. *
   - 1
   - 2
   - 3
   - 4
   - 5
   - 6
   Comments:

10. Content was presented at an appropriate level. *
    - 1
    - 2
    - 3
    - 4
    - 5
    - 6
    Comments:

11. Did you feel there was any bias toward a particular product or service? *
    - Yes
    - No
    If so, please elaborate:

12. Suggestions for modifications to this activity:

13. After completing this module, what 1-3 things might you implement in practice that could help you improve your care of patients with diabetes?

We are also very interested in any informal comments you might have regarding the current system and changes you would like to see. Please type any comments you have into the box below. When you are finished with the questions and your comments, please hit the "Submit" button at the bottom to save your responses and comments. Thanks!
Please rate the following aspects of this activity (4 = strongly agree, 1 = strongly disagree):

9. Content is appropriate for my practice. *
   - 1  2  3  4  5  6
   Comments:

10. Content was presented at an appropriate level. *
    - 1  2  3  4  5  6
    Comments:

11. Did you feel there was any bias toward a particular product or service? *
    - Yes  No
    If so, please elaborate:

12. Suggestions for modifications to this activity:

13. After completing this module, what 1-3 things might you implement in practice that could help you improve your care of the well child?

We are also very interested in any informal comments you might have regarding the current system and changes you would like to see. Please type any comments you have into the box below. When you are finished with the questions and your comments, please hit the "Submit" button at the bottom to save your responses and comments. Thanks!
Please rate the following on a scale of 1 to 6, with 6 being the highest rating:

<table>
<thead>
<tr>
<th>Rating</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>1-6</td>
<td>Relevance of topic to my practice</td>
</tr>
<tr>
<td>1-6</td>
<td>Currency of clinical information</td>
</tr>
<tr>
<td>1-6</td>
<td>Usefulness of clinical information in my practice</td>
</tr>
<tr>
<td>1-6</td>
<td>Overall rating</td>
</tr>
</tbody>
</table>

Will you change your care of patients with *DISEASE/CONDITION X* as a result of participating in this educational activity? (Yes/No)

If yes, please explain with specific examples: (Free text)

Do you plan to continue conducting quality assessment and improvement activities in your practice? (Yes/No)

Please indicate how the data collection portion of this educational activity could be improved: (Free text)

Please indicate how the intervention wizard and plan design component of this activity could be improved: (Free text)

Please indicate how the feedback regarding performance indicators and peer comparisons could be improved: (Free text)
Improvements to Surveys

To better meet business needs & to elicit more meaningful responses:

• Ask better/more targeted **questions**
• Provide better **response** options
• Align and standardize:
  • Within parts (SAM: KSA to CSA)
  • Across activity topics (i.e., HTN to DM)
  • Between open text and closed questions
  • Between MOC Activity Parts (Part 2 and Part 4)
• Ensure longitudinal analysis possible
Ongoing Process

- Survey design research
- Redesign surveys to maintain ability for longitudinal analyses
- Pilot surveys
- Release and monitor with changing Part 2 and 4 offerings
- Ongoing analyses, monitoring, and modifying of survey instruments
Feedback Survey Instruments

A Little Present
IF YES: Please elaborate.
IF YES: What 1-3 things might you implement in practice that could help you improve your care of patients?

IF NO or N/A: Please clarify.
14. Of the other self-assessment activities, you have taken, which topic has been most useful to your practice? *
   - Asthma
   - Depression
   - Diabetes
   - Hypertension
   - Mental Health in the Community
   - Preventive Care

15. Of the different types of self-assessment activities, you have completed, which assessment type did you prefer? *
   - SAM (2-component self-assessment module, including 60-question knowledge assessment and clinical simulation)
   - KSA (stand-alone 60-question knowledge self-assessment activity)

In the final set of questions, please think about how the 60-question Knowledge Self-Assessment activity contributed to your acquisition of competencies.

15. How much did this activity improve your knowledge about pharmacologic management of diabetes? *
   - Greatly Improved
   - Very Much Improved
   - Somewhat Improved
   - Not Improved At All

16. How much did this activity improve your knowledge about non-pharmacologic management of diabetes? *
   - Greatly Improved
   - Very Much Improved
   - Somewhat Improved
   - Not Improved At All

17. How much did this activity improve your knowledge about preventing type 2 diabetes mellitus? *
   - Greatly Improved
   - Very Much Improved
   - Somewhat Improved
   - Not Improved At All

18. How much did this activity improve your knowledge about diagnosing type 2 diabetes mellitus? *
   - Greatly Improved
   - Very Much Improved
   - Somewhat Improved
   - Not Improved At All

19. How much did this activity improve your knowledge about recognizing the clinical implications of insulin-resistance syndromes? *
   - Greatly Improved
   - Very Much Improved
   - Somewhat Improved
   - Not Improved At All
Analytic Strategy

Making sense of the feedback data
Response Rates

- CSA: 48% (6,005 / 12,456)
- KSA: 45% (21,646 / 48,573)
- CKSA: 71% (5,430 / 7,655)
- PPM: 66% (25,150 / 38,201)
Quantitative Items (Excel & SAS)

• Descriptive statistics
• Cross-sectional analyses

Why did you select this topic this time?

Percentage of Diplomates Rating SAM KA and CS Highly in 2013 and 2014

- Highly relevant to practice: 66% Diplomate, 69% Resident
- To brush up on this topic: 45% Diplomate, 40% Resident
- See patients with this issue: 44% Diplomate, 43% Resident
- Easy to get through: 6% Diplomate, 7% Resident

Categories: Knowledge Assessment, Clinical Simulation
Will you change your care of patients? (KSA & CSA, July-Dec 2016)
Open-text Qualitative Items (Excel & MAXQDA)

• Clean/remove nonsense (LEN, sorting, filtering, macro)
• Data immersion
  • Review for patterns & themes
  • Identify meaningful keywords
  • Create codebooks
• Coding comments
  • Apply keywords (conditional formatting)
  • Conduct context checks
  • Calculate frequencies
Will you change your care of patients...?  NO

<table>
<thead>
<tr>
<th>Code</th>
<th>Code definition</th>
<th>key words included</th>
<th>sample quotes</th>
</tr>
</thead>
<tbody>
<tr>
<td>KSA</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
| don't do | do not practice; don't see kids, don't do maternity, etc. | don't, not | "I don't provide prenatal care" (maternity care)  
"I rarely do well child visits" (well child) |
| already | already doing in practice, already follow current guidelines | already, current*, continue | "already part of practice" (childhood illness) |
| specialty | not relevant because specialize: do urgent care, emergency care, sports med, etc. | hospital, hospice, urgent, emergency, ed, sports | "I work in the ED" (asthma)  
"Practice Occupational medicine" (preventive) |

N=4508

<table>
<thead>
<tr>
<th>frequency</th>
<th>% comments</th>
</tr>
</thead>
<tbody>
<tr>
<td>1521</td>
<td>34%</td>
</tr>
<tr>
<td>1247</td>
<td>28%</td>
</tr>
<tr>
<td>409</td>
<td>9%</td>
</tr>
</tbody>
</table>
Internal Use & Dissemination

• Created standardized reports for Board of Directors
  • Rotating annual analyses
  • Exceptions: more frequent analyses when:
    • New activity released
    • Significant changes to existing modules

• Working on internal dashboard for continuous monitoring by staff
Key Findings

What have our analyses shown so far?
Findings!

• Part II feedback analyses
  • MC-FP SAM (2004-June 2016)
  • CSA/KSA (July 2016- )
  • CKSA (Jan 2017- )

• Part IV feedback analyses
  • PPM feedback and practice change (2005-2014)
  • Performance feedback in QI activities (2004-2014)
MC-FP SAMs received favorable ratings in the first year (2004)

<table>
<thead>
<tr>
<th>Evaluation</th>
<th>Currency</th>
<th>Relevance</th>
<th>Usefulness</th>
<th>Overall value</th>
</tr>
</thead>
<tbody>
<tr>
<td>Diabetes (n=4,047)</td>
<td>&gt;90%</td>
<td>&gt;90%</td>
<td>&gt;80%</td>
<td>&gt;75%</td>
</tr>
<tr>
<td>Hypertension (n=2,317)</td>
<td>&gt;90%</td>
<td>&gt;90%</td>
<td>&gt;80%</td>
<td>&gt;80%</td>
</tr>
</tbody>
</table>

- The diplomates provided very substantive and helpful suggestions that have served to improve the process. The board has
  - Streamlined the process for accessing reference materials
  - Provided earlier access to critiques in knowledge assessment
  - Improved simulation performance for users with dial-up connections
MC-FP SAMs 10-year feedback review (2004-2013)

A total of 440,000 SAMs were taken, with 320,500 completed surveys by family physicians who completed a SAM.

<table>
<thead>
<tr>
<th>SAM Module</th>
<th>% Top ratings ('6,5,4' for 6, '3,4' for 4 scales)</th>
<th>% Positive free-text comments</th>
</tr>
</thead>
<tbody>
<tr>
<td>Asthma</td>
<td>88%</td>
<td>82%</td>
</tr>
<tr>
<td>Care Vulnerable Elderly</td>
<td>63%</td>
<td>72%</td>
</tr>
<tr>
<td>Cerebrovascular Disease</td>
<td>81%</td>
<td>66%</td>
</tr>
<tr>
<td>Childhood Illness</td>
<td>71%</td>
<td>55%</td>
</tr>
<tr>
<td>Coronary Artery Disease</td>
<td>86%</td>
<td>81%</td>
</tr>
<tr>
<td>Depression</td>
<td>86%</td>
<td>82%</td>
</tr>
<tr>
<td>Diabetes</td>
<td>86%</td>
<td>81%</td>
</tr>
<tr>
<td>Health Behavior</td>
<td>78%</td>
<td>69%</td>
</tr>
<tr>
<td>Heart Failure</td>
<td>90%</td>
<td>83%</td>
</tr>
<tr>
<td>Hospital Medicine</td>
<td>80%</td>
<td>57%</td>
</tr>
<tr>
<td>Hypertension</td>
<td>87%</td>
<td>82%</td>
</tr>
<tr>
<td>Maternity Care</td>
<td>72%</td>
<td>50%</td>
</tr>
<tr>
<td>Mental Health</td>
<td>80%</td>
<td>67%</td>
</tr>
<tr>
<td>Pain Management</td>
<td>79%</td>
<td>72%</td>
</tr>
<tr>
<td>Preventive Care</td>
<td>85%</td>
<td>80%</td>
</tr>
<tr>
<td>Well Child Care</td>
<td>72%</td>
<td>46%</td>
</tr>
</tbody>
</table>

Brooks et al. What family physicians really think of maintenance of certification Part II activities. Journal of Continuing Education in the Health Professions. [in press]
Overall Ratings of Content Appropriateness by Age Group and Number of Knowledge Assessment Completed

- under 40 years old
- 40-50 years old
- 50-60 years old
- 60 and older

Number of Knowledge Assessment Completed

Ratings
6,005 CSA and 21,662 KSA feedback surveys were analyzed.

- How relevant was the content?
- How current was the clinical information?
- How useful was the clinical information?
- How useful was this activity as an educational tool?
- How favorable was your overall impression?
- Will you change your care of patients?
- What did you like best about this activity?
- Noticed any problems with the content?
- Felt any bias toward a product or service?
- Had any technical problems?
- How long did it take you to complete this activity?
- Why did you select this topic this time?
CKSA Quarterly Feedback (2017 Q1)

5,430 CKSA Evaluation Surveys were completed in the first quarter of its offering as a Part II activity.

Please tell us how the CKSA activity could be improved.

<table>
<thead>
<tr>
<th>Example Quote</th>
<th>N</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>&quot;Immediate feedback on why it is right or wrong&quot;</td>
<td>522</td>
<td>31.0%</td>
</tr>
<tr>
<td>&quot;more extensive explanations&quot;</td>
<td></td>
<td></td>
</tr>
<tr>
<td>&quot;give reason why correct answer is correct for clarification and improve our knowledge.&quot;</td>
<td></td>
<td></td>
</tr>
<tr>
<td>&quot;Questions too esoteric&quot;</td>
<td>494</td>
<td>29.4%</td>
</tr>
<tr>
<td>&quot;More difficult questions.&quot;</td>
<td></td>
<td></td>
</tr>
<tr>
<td>&quot;There weren't many peds or gyn questions&quot;</td>
<td></td>
<td></td>
</tr>
<tr>
<td>&quot;recommend providing little more detail on cases.&quot;</td>
<td></td>
<td></td>
</tr>
<tr>
<td>&quot;using questions that more closely follow current practices and guidelines.&quot;</td>
<td></td>
<td></td>
</tr>
<tr>
<td>&quot;Asking after every question if I got help is redundant and annoying.&quot;</td>
<td>182</td>
<td>10.8%</td>
</tr>
<tr>
<td>&quot;Offer specialty based questions to enable docs to improve where needed.&quot;</td>
<td>90</td>
<td>5.3%</td>
</tr>
<tr>
<td>&quot;Please give me reminders close to the deadline if I haven't completed this.&quot;</td>
<td></td>
<td></td>
</tr>
<tr>
<td>&quot;make it in mobile format too&quot;</td>
<td>89</td>
<td>5.3%</td>
</tr>
</tbody>
</table>
**Part IV Satisfaction and Practice Changes**

### TABLE 3.
Reported Changes in Practice, Participation in QI Activities, and Feedback on the ABFM PPM

<table>
<thead>
<tr>
<th>Condition</th>
<th>Will Change Patient Care as a Result of Completing PPM</th>
<th>Will Continue Quality Improvement activities</th>
<th>Relevance of Topic to My Practice</th>
<th>Currency of Clinical Information</th>
<th>Usefulness of Clinical Information</th>
<th>Overall Rating</th>
</tr>
</thead>
<tbody>
<tr>
<td>Asthma ( (n = 1264) )</td>
<td>1080 (85.4)</td>
<td>1155 (91.4)</td>
<td>1109 (87.7)</td>
<td>1084 (85.8)</td>
<td>1046 (82.8)</td>
<td>1023 (80.9)</td>
</tr>
<tr>
<td>Coronary artery disease ( (n = 921) )</td>
<td>636 (69.1)</td>
<td>809 (87.8)</td>
<td>785 (85.2)</td>
<td>772 (83.8)</td>
<td>684 (74.3)</td>
<td>667 (72.4)</td>
</tr>
<tr>
<td>Comprehensive care ( (n = 1339) )</td>
<td>966 (72.1)</td>
<td>1229 (91.8)</td>
<td>1106 (82.6)</td>
<td>1027 (76.7)</td>
<td>906 (67.7)</td>
<td>807 (60.3)</td>
</tr>
<tr>
<td>Depression ( (n = 1672) )</td>
<td>1313 (78.5)</td>
<td>1483 (88.7)</td>
<td>1475 (88.2)</td>
<td>1379 (82.5)</td>
<td>1245 (74.5)</td>
<td>1156 (69.1)</td>
</tr>
<tr>
<td>Diabetes ( (n = 10,606) )</td>
<td>8561 (80.6)</td>
<td>9777 (92.2)</td>
<td>9838 (92.8)</td>
<td>9469 (89.3)</td>
<td>8910 (84.0)</td>
<td>8574 (80.9)</td>
</tr>
<tr>
<td>Heart failure ( (n = 443) )</td>
<td>357 (80.6)</td>
<td>405 (91.4)</td>
<td>386 (87.1)</td>
<td>382 (86.2)</td>
<td>365 (82.4)</td>
<td>334 (75.6)</td>
</tr>
<tr>
<td>Hypertension ( (n = 8873) )</td>
<td>6861 (77.3)</td>
<td>7799 (87.9)</td>
<td>8053 (90.8)</td>
<td>7594 (85.6)</td>
<td>7050 (79.5)</td>
<td>6755 (76.0)</td>
</tr>
<tr>
<td>Total ( (n = 25,117) )</td>
<td>19,774 (78.7)</td>
<td>22,657 (90.2)</td>
<td>22,752 (90.5)</td>
<td>21,707 (86.4)</td>
<td>20,206 (80.5)</td>
<td>19,317 (76.9)</td>
</tr>
</tbody>
</table>

ABFM PPM indicates American Board of Family Medicine Performance in Practice Module; QI, quality improvement.
Comments about Physician and Peer Comparison Feedback (n=3,480)

- “Would be interested to see results stratified by patient demographics (e.g. age, gender, co-morbidities to be able to understand variation in care)”  
  (Hypertension)

- “I did not understand the circular graphs fully. I think a written statement would be better”  
  (Depression)

- “I'd really like to see additional data from my colleagues who also did this module. I'd love to see how they did, what they tried, what did and didn't work.”  
  (Hypertension)
## Dissemination & Reporting

| Internal Management | • Annual BoD reports for each activity  
<table>
<thead>
<tr>
<th></th>
<th>• Dashboard in the works for staff</th>
</tr>
</thead>
</table>
| Inform policy       | • Peer reviewed journal articles  
|                     | • Policy briefs                    |
| Diplomate-centered  | • Quarterly Diplomate newsletter  
|                     | • Website news                     |
Board Activity Improvements

What have we done lately?
Ch-ch-ch-ch-ch-changes…

• SAM Split!
  • KSA / CSA
  • A few CSAs mothballed.. Until we can improve them

• CSA
  • complete re-do of interface, extensive incorporation of formative feedback

• PI Activity
  • Keep measure groups (comprehensive lowest rated)
  • Guided tutorial

• CKSA
  • Eliminate “did you get help” question
Conclusions

• Collecting and analyzing Diplomate feedback helps…
  • Improve MOC activities offered by the Board
  • Engage Diplomates in their MOC participation
  • Understand the value or burden of MOC activities

• Q&A
Thank you!

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