Mayo Clinic Manages MOC Self-Assessment Growth

Peggy Paulson, M.S., Barbara Baasch Thomas, RN, M.A.
Division of Mayo Clinic School of Continuous Professional Development
Mayo Clinic, Rochester, MN

Abstract

Background: Since 2009 Mayo Clinic has been working with ABMS boards to create learning opportunities and credit for MOC Self-Assessments. In the past few years changes to board requirements and demand have increased the number of modules and subsequently credits offered.

Objective:
• Learn why there has been a growth in MOC modules for credit
• Comprehend assessment of workload for CPD and MOC teams
• Identification of the processes and efficiencies

Methods: Used PDSA cycles to determine process efficiencies and improvements. Pre-post measurement and analysis to determine volumes and turn around times.

Results: Increased workload without increasing staffing. Significant process changes to allow for better workflow leading to increased productivity.

Conclusions: Review of workload, increased demand led to greater throughput with the same amount of FTE. This was accomplished because of process improvements.

Objectives

Learn why there has been a growth in MOC modules for credit
Comprehend assessment of workload for CPD and MOC teams
Identification of the processes and efficiencies

Methods

• Many of the boards opened up requirements to allow for CME=MOC with assessment, e.g. ABIM
• Boards joined ACCME/PARS e.g. ABIM, ABPeds, ABA, more coming
• Creation of standard submission forms along with communication to clinical departments
• PDSA Cycles of Improvement (e.g. Standard intake form (Fig. 2), shared MS Excel tracking sheet)
• Use of data warehouse reports for submission
• Tied activity approval application to MOC application (Fig. 2)
• Staff training and role clarification

Results

• Increased throughput (Fig. 1)
  • 22% increase in modules
  • Increase physician attendance by 10,000 (Fig. 3)
• Decreased processing time
  2.0 FTE to 1.56 FTE for module processing
• Increased staff satisfaction

Discussion

• Maintenance of Certification (MOC) may be changing but it is not going away
• Change is necessary to keep up
• Centralization of support in an academic medical center for MOC creates efficiencies
• Continuous review of processes is critical to maintaining balance

Conclusions

• Through PDSA cycle improvements it is possible to increase throughput without negatively impacting FTE
• Make sure to include stakeholders, e.g. Staff inside and outside of MOC team

Contact

Disclosures

Nothing to disclose