



American College of
Preventive Medicine

Instructions: Diplomate Practice Assessment Plan

INTRODUCTION

The accompanying document is the summary document for the Diplomate Practice Assessment Plan (DPAP) for Maintenance of Certification (MOC) Part IV in the specialty of General Preventive Medicine/Public Health. This manual is intended to provide step-by-step instructions for the DPAP process and completion of the DPAP booklet.

It is suggested that diplomates initiate their DPAP at approximately the middle of the ten year reaccreditation cycle (years 5-6), as the process may take twelve to eighteen months to complete. It is furthermore suggested that diplomates complete an additional DPAP following a significant change in professional environment or responsibilities, although the American Board of Preventive Medicine (ABPM) does not require this additional review. **Note: ABPM diplomates due to recertify in 2022 and later are required to complete two Improvement in Medical Practice Projects, one during the first five years of their certification cycle and another during the last five years of their certification cycle. For more information, please go to http://www.theabpm.org/moc/moc_requirements.cfm**

Upon completion of the cycle, the diplomate sends the booklet and supporting documents (which will be specified on the assessment tools) to the American College of Preventive Medicine.

All Electronic Materials Can be Sent to: MOC@acpm.org

If you are unable to submit your materials electronically, please mail your application to 455 Massachusetts Avenue, NW, Suite 200-Washington, DC 20001.

INSTRUCTIONS

DEMOGRAPHIC INFORMATION (DPAP page 4)

Please supply all requested information in the spaces provided.

PRACTICE INFORMATION (DPAP page 4)

1. Select the single practice setting that best describes your current job site; if none of these settings is accurate, select “Other” and provide a brief description.
2. Indicate the percentage of professional time you dedicate to the listed competency areas.
3. For physicians who practice a medical specialty *in addition to* preventive medicine, fill in the name of that specialty, the date your certification expires if you are boarded in that specialty, and the percentage of professional time spent practicing that specialty.

PERFORMANCE ASSESSMENT

STEP ONE: SELECTION OF EVALUATION TOOL FOR PERFORMANCE ASSESSMENT (DPAP page 5)

Select the one tool (e.g. 360 Degree Evaluation or Report Card or Clinical Practice Evaluation or Portfolio Evaluation) that you feel is **most appropriate** for your **practice setting** with which you will assess your practice of preventive medicine/public health, and indicate your choice by marking an “X” in front of the selected tool (**please select only 1 of the 4 available tools**). Each MOC Part IV tool is a separate document and process. You will assess your practice using only the tool you selected. Copies of the selected evaluation tool must accompany the Diplomate Assessment Plan (DPAP). **Note:** If greater than **ten** percent of your professional time is spent providing direct patient care, you **MUST** select the Clinical Practice Evaluation (CPE) for Adults or Pediatrics.

The available tools are:

- **Clinical Practice Evaluation (CPE) I & II:** This tool is a chart-review based evaluation of application of USPSTF and other accepted standard of care for preventive screening and population health within clinical practice AND clinical systems review.
- **360-Degree Feedback Evaluation:** This tool is a compilation of feedback regarding fulfillment of selected competencies in a rating scale format from self, superiors, peers and subordinates.
- **Report Card Evaluation:** This tool is a narrative-style self-assessment and feedback from supervisor regarding fulfillment of selected competencies. *Note: If you would prefer to use your workplace evaluation, please choose the portfolio-style assessment and include as evidence.*
- **Portfolio Evaluation:** This tool is a compilation of CV and diplomate-selected products/examples from practice representing fulfillment of selected competencies.

STEP TWO: PREPARING FOR THE EVALUATION (DPAP page 5-6)

2A. Clinical Practice Evaluation (CPE) I & II (*If you have chosen the 360 or Report Card or Portfolio evaluation tools, please skip to **STEP 2B***)

1. CPE I - Medical Record Review

a. Adult Patient Population: After making 10 copies of the “Clinical Practice Evaluation I: Medical Record Review (Adult Patient Population)” form, use a separate form to review ten charts of adult patients for whom you provide preventive care. After reviewing all ten charts, note the date of completion on the DPAP. Please refer to the Medical Record Review (Adult Patient Population) Instruction Manual for details.

b. Pediatric Patient Population - After making 10 copies of the “Clinical Practice Evaluation I: Medical Record Review (Pediatric Patient Population)” form, use a separate form to review ten charts of pediatric patients for whom you provide preventive care. After reviewing all ten charts, note the date of completion on the DPAP. Please refer to the Medical Record Review (Pediatric Patient Population) Instruction Manual for details.

2. CPE II – Clinical Systems Review

Complete an assessment of your practice using the “Clinical Practice Evaluation II: Clinical Systems Review.” After completing your clinical systems review, note the date of completion on the DPAP. Please refer to the Clinical Systems Review Instruction Manual for details.

2B. 360-Degree Feedback/Report Card/Portfolio

Please select a **total of ten** competencies which you will use to perform your practice evaluation – **four** from the “Competencies that are Common to all Content Areas,” **four** from the “Content Area Specific Competencies,” and **two** from the “ACGME General Physician Competencies.” **The complete list of competencies is located in Appendix A at the end of the DPAP.** The competencies with which you will complete the practice assessment are the same regardless of the tool chosen. Each diplomate will select a total of **ten** competencies for assessment, according to the following specifications.

1. Under the category in **Appendix A** entitled “Competencies That Are Common To All Content Areas” and labeled numbers 1-7, select **four** that you will use for assessment and indicate your choices by marking an “X” in front of those competencies. Circle the corresponding numbers on the DPAP.
2. The content area-specific competencies encompass the areas of biostatistics/epidemiology, management and administration, medical management, clinical preventive medicine, and occupational and environmental health. From among these content area-specific competencies labeled numbers 8-27, select **four** that you will use for assessment and indicate your choices by marking an “X” in front of those competencies. Circle the corresponding numbers on the DPAP. It is **not** necessary to choose these four competencies from within a single content area. **For example**, you might select one from biostatistics/epidemiology, two from medical management, and one from clinical preventive medicine or any combination of four competencies that you feel best reflects your scope of practice.
3. The category entitled “ACGME General Physician Competencies,” includes patient or community-oriented care, medical knowledge, practice-based learning and improvement, interpersonal and communication skills, professionalism, and systems-based practice. From among these competencies labeled numbers 28-33, select **two** that you will use for assessment and indicate your choices by marking an “X” in front of those competencies. Circle the corresponding numbers on the DPAP.

IMPORTANT: Please indicate the **ten** competencies you have chosen for evaluation by checking the check box in front of each corresponding competency on the evaluation tool you have selected (360/Report Card/Portfolio) **prior to distribution to your evaluators. You will not assess yourself or be assessed on the remaining 23 competencies on the tool.**

STEP THREE: COMPLETION OF SELECTED EVALUATION TOOL (DPAP page 6)

Using the assessment tool that you specified in step one, complete a self-assessment by evaluating your own performance on the ten competencies you selected in step two of this document. Follow the instructions that correspond to that specific tool. Distribute a copy (copies) of the instrument to your evaluator(s) for completion according to the directions for that tool. Retain all evaluations for submission at the end of the completed DPAP cycle.

STEP FOUR: IDENTIFY TARGET AREAS FOR IMPROVEMENT (DPAP page 6-7)

4A. Clinical Practice Evaluation (CPE) I & II

1. If you completed a **clinical practice evaluation** in step two, select **at least one** aspect of your practice in which to seek improvement. You may choose to use the evaluation results of your clinical practice evaluation for practice improvement, **and/or** you may select a novel aspect of clinical practice that you intend to pursue for professional development in a new area. Please note that you may use the results of *either* CPE I or CPE II and you are not required to select an area of improvement from each. Identify your chosen area in the lines provided.
2. In the lines provided, describe briefly why you selected this area of clinical practice as your target area for improvement.

4B. 360-Degree Feedback/Report Card/Portfolio

1. Select **at least one** competency from the complete list of competencies in **Appendix A** in which to seek improvement or professional development. You may choose to use the evaluation results of the competencies you selected for assessment in step two for practice improvement, **and/or** you may select one of the other listed competencies that you intend to achieve for professional development in a new area. Please specify the competency selected in the lines provided.
2. In the lines provided, describe briefly why you selected this competency as your target area for improvement.

STEP FIVE: QUALITY IMPROVEMENT PLAN DEVELOPMENT (DPAP page 7)

5A. From the list titled “**Quality Improvement or Performance Assessment Program of Choice,**” please select the quality improvement (QI) program you will use and indicate your choice by marking an “**X**” in front of it. Use the selected method to develop and complete your quality improvement/performance assessment program. The purpose of this process is to identify the area in which you will improve your practice and the method you will use to improve it. Information on the “Plan-Do-Study-Act” (PDSA) method is available for your use, if desired, in **Appendix B**. Please maintain detailed records of your process in the event that you are selected for QI plan auditing.

5B. Indicate your target goal(s) for the selected QI plan. Goal/s should be *specific and measurable*. Please review the examples of target goal/s below (**NOTE: these are intended as stylistic examples only**)

Examples of target goals:

- **C1:** I will improve my oral/written (select one or both) ability to communicate risk to the media through clear and organized delivery of material and effective responses to audience question and comments so that in nearly all cases (>75%) of the time, I convey the level of risk accurately and appropriately.
- **C3:** I will develop the ability to use computers for communications through the Internet; reference retrieval; statistical analysis and computations; graphics and spreadsheets; database management (select one or more).
- **C9:** I will improve my ability to design/operate (select one or both) a surveillance system through development/ improvement of a surveillance tool.
- **C17:** I will improve my ability to manage fiscal and human resources by setting and meeting milestones/work plan objectives on time in nearly all cases (>75% of the time).
- **C22:** I will improve the percentage of patients whom I screen for smoking and document in the chart from my current percentage of ___ to a goal of ____% (as measured by chart review).
- **C26:** I will obtain and document an occupational history in 95% of my patient histories (as measured by chart review).

5C. After implementing your quality improvement or performance assessment program for a **minimum** of six months, you will complete a second review of your current practice to evaluate goal achievement, targeting the area you selected for practice improvement or professional development. Indicate by filling in the blank the projected date by which you will complete your second review.

STEP SIX: MEASUREMENT OF IMPROVEMENT (DPAP pages 7-8)

6A. Utilizing a blank copy of the tool selected for your first assessment, complete a targeted review **re-evaluating** your performance **on the clinical practice goal(s) or competency/competencies you selected for practice improvement or professional development** in step four. The reassessment should be performed at a minimum of six months following implementation of your QI plan, in order to have adequate time to assess its impact. Please note that is **not necessary to complete the evaluation for the remainder of the clinical areas or competencies you selected for your first assessment.**

- For the repeat Clinical Practice Evaluation (CPE), complete a focused chart review of **ten patients. They do not have to be the same ten patients from your initial review.** Using blank copies of the "Medical Record Review" form **or** complete a focused systems review (CPE II). You will reassess yourself *only* on the **clinical practice measure you selected for improvement or professional development.** On the DPAP, indicate the tool utilized by placing an "X" in the blank, write in the clinical improvement goal you re-evaluated, and fill in the date upon which your repeat assessment was completed. Please retain all documentation to submit after completing the DPAP cycle.
- For the repeat 360-Degree/Report Card OR Portfolio Evaluation, use a blank copy of the assessment tool to re-evaluate yourself and instruct your evaluators to re-evaluate you **on the one competency you selected for improvement or professional development.** On the DPAP, indicate the tool utilized by placing an "X" in the blank, write in the competency you re-evaluated, and fill in the date upon which your repeat assessment was completed. Please retain all documentation to submit after completing the DPAP cycle.

6B. Describe the outcome of your QI plan and indicate whether you met your target goal.

6C. Specify the part of your QI plan that you feel was most successful and the reason/s for the success.

6D. Indicate the element(s) of your QI plan which was/were less successful than you had anticipated and the reason/s for your lack of success.

6E. Describe your plan to further improve your practice in the area specified in “D”

6F. Indicate your plan for ongoing practice improvement and professional development.

SUBMISSION OF DOCUMENTATION

Upon completion of the Diplomate Practice Assessment Plan (DPAP), **please return the completed DPAP booklet and all supporting documents** to the American College of Preventive Medicine (ACPM) by **e-mail** at moc@acpm.org or by **mail** to 455 Massachusetts Avenue, NW, Suite 200-Washington, DC 20001-Attention: MOC Department. Use the checklist in **Appendix C** to assist you in compiling documentation for submission.

THANK YOU for completing your MOC Part IV with ACPM. Please complete the MOC Feedback Survey in **Appendix D**. Your feedback is appreciated as we continue to refine the assessment tools and process.