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Dear Members of the Sleep Medicine Community:

The American Board of Medical Specialties (ABMS) and its Member Boards greatly appreciate your commitment to the discipline of Sleep Medicine and to the high standards that physicians practicing in this subspecialty maintain for certification.

Recently, a number of discussions have been held in the community regarding a continuing certification pilot for Sleep Medicine diplomates that was approved by the ABMS Committee on Continuing Certification (3C). The details of this pilot are explained later in this communication. We understand there has been some confusion and misunderstanding surrounding this pilot and would like to take this opportunity to clarify some key information to help constructively move our community toward processes that will achieve our shared goal of helping Sleep Medicine physicians provide high-quality patient care.

In July 2019, the ABMS 3C, which includes representation from all 24 ABMS Member Boards as well as public members, unanimously approved a proposal for a continuing certification pilot involving the use of longitudinal assessment. The proposal was submitted by the American Board of Otolaryngology-Head and Neck Surgery (ABOHNS) for its diplomates with subspecialty certification in Sleep Medicine. The pilot, which is centered on a core plus modular practice-relevant-content approach, was structured for ABOHNS diplomates to participate in quarterly online assessments. It offers diplomates immediate response feedback and provides relevant references and key learning objectives for additional self-study. Subsequent to the pilot's approval, concerns were voiced in the community that continuing certification assessments for all certified Sleep Medicine physicians should be identical, regardless of prior training or certifying board.

In October 2019, the leadership of ABMS and the six co-sponsoring Sleep Medicine boards, all of which are signatories to this letter, met in person to discuss the pilot, address any concerns regarding its approval, and propose constructive next steps for its consideration. As a result of this meeting, ABMS and the six co-sponsoring boards agreed to the following:

 All parties publicly acknowledge that ultimate policy and decision-making authority with respect to certification in Sleep Medicine resides with the Chief Executive Officers (CEOs) of the co-sponsoring boards (although this authority may be delegated to the Sponsoring Committee described in the current memorandum of understanding between the Sleep Medicine boards). Such authority does not reside with Test Writing Committees.

- 2. Existing memoranda of understanding between the co-sponsoring boards should be clarified and rewritten to reflect the above understanding and to highlight the more clearly defined role of the Sleep Medicine Sponsoring Committee in policy development, communication, and decision-making.
- 3. ABMS and the six co-sponsoring Sleep Medicine boards have committed to hosting a stakeholder Summit during which the ABOHNS pilot can be discussed. Invitees to the Summit, which will include representation from all stakeholders, including professional associations and affected patient populations, will be agreed upon by the undersigned. Good faith stakeholder input will be necessary as the Sleep Medicine community thinks through the details of how a pilot could be appropriately implemented and validly assessed. It is anticipated that the Summit will provide an opportunity for the community to discuss the development of standardized Sleep Medicine content for longitudinal assessment that would be relevant to the clinical practice of board certified Sleep Medicine physicians; maintain the integrity of the Sleep Medicine discipline; and promote high quality, patient-centered care for people who have sleep disorders.
- 4. While final decisions regarding certification issuance and implementation of approved pilots rest with the Member Boards, ABOHNS has agreed to delay implementation of its approved pilot until the Summit has taken place. As an approved pilot, ABOHNS has the authority to decide after the Summit whether to proceed forward. ABOHNS has indicated that it will reconsider the pilot details and its decision to move forward if serious and legitimate concerns are identified, and reconsideration is broadly supported by the Sleep Medicine co-sponsoring ABMS Member Boards. Should the pilot be successful, the other co-sponsoring boards of the Sleep Medicine subspecialty certification could apply to the ABMS 3C to join it.

To help clearly define the details of the proposed pilot, ABOHNS has shared the following information to help correct any miscommunications that have been publicly circulated.

## **Rationale**

ABMS and its Member Boards acknowledge that continuing certification examinations must be more practice relevant, both in terms of the examination content as well as the format, in order to reflect how physicians access and use information in clinical practice. The need for content that relates specifically to a physician's practice was a significant theme in the final report and recommendations of the Continuing Board Certification: Vision for the Future Commission, and there has been an emerging focus across the Member Boards involved with the 20 ABMS cosponsored certificates on tailoring continuing certification examinations to clinical practice while ensuring that physicians maintain currency in the broad domain of the specialty. In this context, a core plus practice relevant modular approach appropriately preserves the foundational relevance of core content within the discipline while also assessing the physician's knowledge relevant to his/her specific practice. An otolaryngologist-head and neck surgeon who is subspecialty certified in Sleep Medicine is one example where this concept particularly applies. These physicians are expected to be uniquely expert in both the medical and surgical aspects of the discipline. A core-

plus modular format would assure that the medical and surgical aspects are being longitudinally assessed for these physicians.

## Longitudinal Assessment Pilot for Continuing Certification in Sleep Medicine

The ABOHNS pilot would be voluntary and is expected to last approximately two years. The pilot's innovative format offers a formative longitudinal assessment using an online platform. Participating diplomates will be required to engage quarterly by answering multiple choice questions online or using a tablet app that is already being used by seven ABMS Member Boards, including ABOHNS. After answering each question, the diplomate will receive immediate feedback regarding whether the response was correct, and additionally will receive a "Key Learning Point", an explanation of the answer choices, and relevant references for further self-study. Spaced repetition, an evidence-based approach to facilitating learning and retention, is incorporated into this pilot. When a diplomate incorrectly answers a question, he/she will receive a clone question six to I 2 months later to determine if learning has occurred after originally answering incorrectly (and subsequently receiving feedback on the question and answer). Each participant will have access to an interactive performance dashboard to help identify knowledge gaps that need to be closed. Participants also can track their overall performance as compared to peers in the program.

The assessment blueprint will include both core (information that all Sleep Medicine specialists need to know regardless of their primary specialty) as well as modular content that is tailored to the individual physician's current practice as a Sleep Medicine certified physician. The practice relevant content for ABOHNS Sleep Medicine diplomates would include the surgical aspects related to the evaluation and management of these patients. An inclusive, multidisciplinary group of Sleep Medicine diplomates representing the diversity within the discipline will define what is core; the percentage of core needed for the assessment to still be considered a bona-fide Sleep Medicine assessment; and the modular content. The pilot will be conducted and governed within the confines of the Sleep Medicine co-sponsoring Member Boards community. The Sleep Medicine Test Committee, specialty societies, and the Sleep Medicine community will be engaged throughout the pilot to ensure that key elements incorporate input from those with broad knowledge of the discipline.

In a broader context, it is anticipated that this pilot will inform the wider ABMS community and external stakeholders about the viability and value of a core-plus practice relevant modular approach for the 19 other co-sponsoring certification programs and participating specialties. There are already several Member Boards that successfully use a core-plus-practice relevant content approach for continuing certification in their specialty or subspecialty continuing certification programs. Upon conclusion of the pilot and analysis of its outcomes, the ABMS 3C Committee will make a decision about the future of the ABOHNS pilot.

We hope this communication helps to better define the issue and outline the next steps in our process. Additional details regarding the planned Summit will be communicated as they become available. In the meantime, we encourage you to contact your specialty board or ABMS at president@ABMS.ORG if you have specific questions or would like to provide input, and we thank you in advance for your engagement with this important issue.

## Sincerely,

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