

AGA proposes alternate pathway to recertification

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Frustrated by a maintenance of certification process that doesn't improve patient care, the American Gastroenterological Association (AGA) this week released a proposed alternate pathway to recertification that is based on established learning theory. 1,3 It eliminates the high-stakes examination and replaces it with active, adaptive, self-directed learning modules that allow for continuous feedback.

AGA shared the proposed pathway with the American Board of Internal Medicine (ABIM), which runs the current maintenance of certification (MOC) process that has drawn ire from the medical community for not meeting physician needs. AGA welcomes feedback and comment by ABIM, AGA members and leaders of other medical societies.

"There is now a greater emphasis than ever before on disease pathways, clinical guidelines and quality improvement, making it important for physicians to remain current with newer recommendations and practice standards," said Michael Camilleri, MD, AGAF, president, AGA Institute. "Maintaining certification should be a process of active learning, not high-stakes testing. AGA supports continuous education and professional development that enhances patient care. We want to work with ABIM and other partners to improve the recertification process."

Four things to know about AGA's alternate pathway called The Gastroenterologist: Accountable Professionalism in Practice or G-APP:



- Individual self-assessment pathways allow physicians to demonstrate a high level of competency in one or more areas, while maintaining a more general level of competency in other areas.
- Individualized self-assessment activities provide constant feedback and opportunities for learning and replace the secure high-stakes exam now required every 10 years.
- Physicians get credit for activities they are already doing in practice, research or teaching.
- G-APP is based on principles of competency that are the same as those used to train gastroenterology fellows to independently care for patients.

"AGA does not expect the recertification process to change overnight, but we are getting the conversation started in a substantial, meaningful way that's based on solid precepts of adult learning theory," says Suzanne Rose, MD, MSEd, AGAF, councillor to the AGA Institute Governing Board and chair of AGA's Task Force on MOC. "Adults learn best when education is individualized, tailored to their needs and problem based—which in active medical practice translates to patient-centered. AGA embraces an ideal pathway of continuous professional development within these paradigms as an alternative to the current recertification process."

G-APP was developed by an AGA <u>task force</u> on MOC charged with defining a recertification process based on educational theory and designed to meet the needs of physicians struggling to meet the demand brought about by monumental changes in health care. After a scholarly review and consideration of these factors, the task force developed G-APP, their vision of the ideal pathway for recertification of gastroenterologists.

More information: Read the full proposal, Bridging the G-APP:



Continuous Professional Development for Gastroenterologists: Replacing MOC with a Model for Lifelong Learning and Accountability, at www.gastrojournal.org/article/...-5085(15)01177-4/pdf, and the editorial, An Alternative to MOC?, at www.gastrojournal.org/article/...-5085(15)01178-6/pdf. Provide feedback to AGA at www.surveymonkey.com/s/gappfeedback.

Provided by American Gastroenterological Association

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