



American Board of Psychiatry and Neurology, Inc.

A Member Board of the American Board of Medical Specialties (ABMS)

How to complete an: Improvement in Medical Practice (PIP) Unit

Diplomates choose ONE Clinical Module OR ONE Feedback Module activity to complete the PIP Unit.

Each Module consists of three steps to complete within a 24-month period:

- Step A: Initial Assessment
- Step B: Identify and Implement Improvement
- Step C: Reassessment

Clinical Chart Review Module

Diplomates demonstrate their involvement in quality improvement by choosing one of the following options:

- Select a Clinical Module from the ABPN Approved Products List
- Participate in your institution's quality improvement (QI) effort that is approved by the ABMS Portfolio Program
- Participate in an approved registry such as the Axon Registry from the American Academy of Neurology or the PsychPRO Registry from the American Psychiatric Association
- Participate in a Joint Commission Certified Primary or Comprehensive Stroke Center
- Participate in a Joint Commission accredited, specialty-specific Ongoing Professional Practice Evaluation (OPPE). Individual preapproval is no longer required.
- Complete a quality improvement effort under the auspices of an International Certification Organization (e.g. RCPS-C) that meets the ABPN MOC requirements; submit for preapproval
- Seek [individual preapproval](#) (at no charge) for your own developed Clinical Module, or your institution's quality improvement efforts.

How to Complete a PIP Clinical Module

Step A: Initial assessment of five patient charts

- Collect data from at least five of your own patient charts in a specific category (diagnosis, type of treatment, or treatment setting) obtained from your practice over the previous three-year period.
- Compare the data from the five patient cases with published best practices, practice guidelines, or peer-based standards of care (e.g., hospital QI programs, standard practice guidelines published by specialty societies), using a minimum of four quality measures.

Step B: Identify and Implement Improvement

- Based on results from chart reviews, develop and carry out a plan to improve effectiveness and/or efficiency of your medical practice.
- If no areas for improvement are determined based on initial assessment, then maintenance of performance in medical practice should be reassessed in Step C.

Step C: Reassessment of five patient charts

- Within 24 months of initial assessment, collect data from another five of your own patient charts (may use same or different patients).
- Use the same category and practice guidelines for the initial assessment and reassessment steps.

Patient or Peer Feedback Module

Diplomates obtain personal feedback regarding their own clinical performance.

How to Complete a PIP Feedback Module

Step A: Initial assessment of patient or peer feedback

A diplomate can collect feedback using one of the following options:

- Patient* feedback forms from five patients
- Peer** feedback forms from five peers
- Resident evaluation feedback forms from five residents
- Supervisor evaluation feedback form from one supervisor
- 360-Degree evaluation feedback forms from five respondents.

Step B: Identify and implement improvement

- Based on results from feedback, identify opportunities for improvement to the effectiveness and/or efficiency in practice as related to the general competencies and take steps to implement improvements as needed.
- If no areas for improvement are determined based on initial assessment, then maintenance of performance in medical practice should be reassessed in Step C.

Step C: Reassessment of patient or peer feedback

- Within 24 months of initial assessment, collect data from another set of the same or different patients or peers.
- Use the same feedback option for the initial assessment and reassessment steps.

Preapproval is not needed if the questionnaire/survey addresses these six competencies: interpersonal and communication skills, medical knowledge, patient care, practice-based learning and improvement, professionalism and system-based practices.

ABPN feedback forms are available on the [Approved Products List](#) at no cost.

* Patients may include those for which the diplomate supervises the care of another provider (e.g., resident)

** Peers may include other professional healthcare staff such as counselors, nurses, physicians, psychologists, and social workers

General PIP Information

- Diplomates who are clinically active and/or engaged in consultative care will need to complete the PIP Unit. See the [Clinical Activity Status page](#) on the website for how to update your clinical status.
- Please allow ample time to complete the PIP Unit (Steps A, B and C).
- For the 10-year program, one PIP Unit is required and for the C-MOC program, one PIP Unit is required every 3 years.
- ABPN does not collect patient or peer data. If audited, ABPN will require that diplomates explain how they carried out the Improvement in Medical Practice Unit and submit information about their process and improvement plan. See the [ABPN Diplomate Audit section](#) of the website for more information about audits.

See the [Improvement in Medical Practice \(PIP\) section](#) of the website for more detailed information.

Questions on MOC?

- Email us at questions@abpn.com.
- Or call the MOC Helpline at 847.229.6512
- Office hours M-F 8:30 a.m. to 5 p.m. CST
- Visit www.abpn.com or your Folios account at www.abpn.com/folios to learn more.