Annual Report 2020



American Board of Psychiatry and Neurology, Inc.

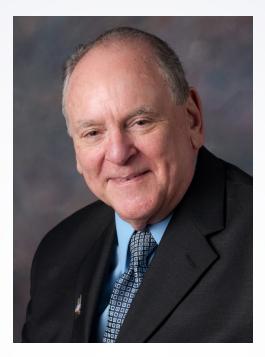
A Member Board of the American Board of Medical Specialties (ABMS)



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IN MEMORIAM



Stephen C. Scheiber, MD

It is with sadness and regret that I announce the death of Dr. Stephen C. Scheiber who passed away on June 20, 2020. Steve was the first full-time CEO of the ABPN, and he served in that role from 1986 to 2006. Steve made many important and lasting improvements to the structure and function of the ABPN. Prior to joining the ABPN, Steve had a distinguished career in academic psychiatry, including his work with the U.S. Public Health Service, and serving many years as a training director and professor at the University of Arizona. He had close personal and professional friends and colleagues in virtually every state in the country, and across the globe. While Steve will certainly be remembered for his dedication to psychiatry and the ABPN, his professional integrity, and his warm and engaging personality, I believe he would agree that his most important achievements were as a loving husband, father, grandfather and great grandfather. He will be sorely missed by all who had the good fortune to know him.

Sincerely,

Lary R Faulhun

Larry R. Faulkner, MD

2020 ABPN Board of Directors

Executive Committee

Board Chair Paramjit T. Joshi, MD

Board Vice Chair J. Clay Goodman, MD

Board Secretary John B. Bodensteiner, MD

Board Treasurer Christopher R. Thomas, MD

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Board Member-at-Large Allison Brashear, MD, MBA

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Terrence L. Cascino, MD Rochester, MN

Jaffar Khan, MD Atlanta, GA

Steven L. Lewis, MD Allentown, PA

Nina F. Schor, MD, PhD Bethesda, MA



Front row left to right: Drs. Allison Brashear, Andrea G. Stolar, J. Clay Goodman (Vice Chair), Larry R. Faulkner (President/CEO), Robert Golden (2019 Emeritus Director), Paramjit T. Joshi (Board Chair), and John B. Bodensteiner. *Second row left to right:* Drs. Jaffar Khan, Robert J. Boland, Josepha A. Cheong, Steven L. Lewis, Jeffrey M. Lyness, Terrence L. Cascino, Christopher R. Thomas, Nina F. Schor, Joan M. Anzia, Imran I. Ali and Sheldon Benjamin. *Not pictured:* Dr. Amy Brooks-Kayal



The American Board of Psychiatry and Neurology in the Time of COVID-19

By Larry R. Faulkner, MD, ABPN President and CEO

The year 2020 will certainly go down

as one of the most disruptive and difficult in world history. Not since 1918 has the globe been rocked by a pandemic as deadly as COVID-19. Due to a tragic combination of social and political forces, the U.S. has been one of the hardest hit countries. As I write this statement on January 12, 2021, to date there has been more than 22.7 million cases and 376,000 deaths reported in the U.S. While vaccines have thankfully been developed, their introduction into the U.S. population has been slow due to a series of logistical problems. No one knows for sure how many more cases and deaths will occur before the pandemic is finally brought under control. The effects of the pandemic on the U.S. population and economy have been devastating, and minority populations have suffered disproportionately.

The American Board of Psychiatry and Neurology (ABPN) has not been immune to this terrible event. While there have thankfully been no deaths so far among ABPN Directors and staff, several have been infected and virtually everyone knows a colleague, friend, or loved one who has had the illness. All members of the ABPN family have had their personal and professional lives upended in a manner few would have predicted at the beginning of 2020. Travel ground to a halt; shelter in place orders were issued, rescinded, and reissued; work and social calendars were disrupted; and everyone became far too familiar with masks, hand sanitizers, social distancing, GoToMeeting, Webex, and Zoom.

Perhaps most distressing during this time has been the pervasive sense of uncertainty and stress swirling throughout our society made even worse by the unfortunate politicization of the pandemic by certain sectors of the public. And as if this was not bad enough, the past year also saw several terrible attacks against black citizens, one of the most contentious presidential elections in history, and a riot that ran rampant through the U.S. Capitol.

During such times of upheaval, special care is required for organizations like the ABPN to maintain their focus on important strategic goals and activities. Fortunately enough, the ABPN has a long history of careful strategic planning and has taken specific steps to protect itself from the occurrence of a "black swan event" like COVID-19. Thus, when the pandemic struck, the issue for the ABPN was not to decide what it needed to do but rather how it might best continue to accomplish its strategic ends and help its candidates and diplomates through the crisis.

Five words capture the essence of the ABPN's ongoing response to the COVID-19 pandemic: **determination**, **adaptation**, **flexibility**, **collaboration**, and **communication**.

Determination. The ABPN remains committed to fulfilling the key objectives of its strategic plan. To that end, all ABPN staff have been retained and all crucial programs, including those for initial and continuing certification, are operating effectively.

Adaptation. Protecting its Directors, staff, and volunteers is a primary responsibility of the ABPN. In March 2020, the ABPN closed its office, ceased all travel, converted on-site meetings to virtual formats, and enabled staff to do their work from home. While doing normal business virtually can be somewhat challenging at times, ABPN Directors, staff, and volunteers are adapting remarkably well and all activities continue on schedule. The current virtual approach will continue until it is deemed safe to reopen the ABPN building.

Flexibility. Recognizing the disruption that is taking place in the lives of its candidates and diplomates, the ABPN understands that business as usual may not be possible. Therefore, all candidates and diplomates have been given the opportunity to delay any 2020 certification and continuing certification deadlines until 2021. The ABPN has also made it clear that residents will not be penalized for any reasonable changes in training as a result of the pandemic. If the pandemic continues well into 2021, additional modifications may be made to ABPN requirements and deadlines.

Support. The ABPN decided to use some of its resources in 2020 to support diplomates, professional societies, academic departments, and front line healthcare workers. The ABPN provided \$2M educational grants to both the American Psychiatric Association (APA) and the American Academy of Neurology (AAN) so that all diplomates could receive self-assessment and CME activities free of charge. Grants of \$100K were provided to each of nine subspecialty societies so that all diplomates could receive self-assessment and CME activities at the same rate as members of those societies. Additional \$1M grants were made to support the registries

under development by both the APA and the AAN. New Innovation in Education Grants of \$400K and Research Grants of \$400K were made to support academic faculty in departments of psychiatry and neurology. Finally, in order to provide a measure of support to crucial front line healthcare workers, the ABPN also gave a \$100K grant to getusppe.org. The ABPN has decided to make additional educational, registry, and academic grants in 2021.

Communication. The ABPN has redoubled its efforts to send clear messages to candidates, diplomates, and Program Directors that it will be as supportive as possible during this difficult time. The ABPN wants its candidates and diplomates to know that their certification status will not be negatively impacted by the healthcare crisis no matter how long it lasts.

While 2020 has been a difficult year that seems to have brought out the worst in some of us, I believe it is also a year that has brought out the best in most of us. That is certainly the case for those associated with the ABPN. The dedication being demonstrated by ABPN Directors, staff, and volunteers is impressive. Even more impressive is the devotion to service of tens of thousands of ABPN diplomates all across the country who are providing care to their patients often under horrendous and dangerous circumstances. It is the support of colleagues like these that has enabled the ABPN to move ahead with its objectives and programs in 2020 even during a pandemic. With their continued support, I am confident that we will surely meet whatever challenge comes our way in 2021.

Pilot Project Approved as a Permanent Alternative to 10-Year Continuing Certification Examination

In October 2020, the ABPN announced that the American Board of Medical Specialties (ABMS) approved the ABPN Article Assessment Pathway -- currently called the Pilot Project -- as a permanent alternative to the secure, proctored 10-year Continuing Certification (CC/MOC) examination.

"It will now be easier than ever for our diplomates to meet CC/MOC program requirements with the new Article Assessment Pathway," said Larry R. Faulkner, MD, ABPN President and CEO.

ABPN will offer the Article Assessment Pathway to all diplomates beginning with the 2022 assessments and exams, including ABPN subspecialties.

Since its introduction in 2019, the Pilot Project has offered greater flexibility to ABPN diplomates for meeting their CC/MOC Part III program requirements.

In surveys of all Pilot Project participants, more than 90 percent of the responders rated the articles as easy to access and helpful to their practice. These results are based on approximately 250,000 completed article assessment mini exams.

Feedback from more than 15,000 Pilot Project participants includes:

- "I found it really interesting, fun, worthwhile, and a valuable experience. It was also very convenient. The test questions were by and large fair and appropriate." – A.D., psychiatry
- "A great and very educational alternative to traditional exam. Most of the articles selected were very highly relevant to clinical practice and the questions were very fair. I hope ABPN implements this pilot program in lieu of the traditional exam, or at least as an option." – D.C., neurology
- "The pilot process was a more convenient and effective way to complete my
 recertification. Overall, the articles were relevant to my work. The freedom to choose
 articles allow me to customize the process, again making this more relevant and
 effective." *R.B., child neurology*
- "I was leery at first, but after doing a couple I believe that this was a good experience and a better substitute for the 10-year test. ..." *L.F., child and adolescent psychiatry*

The Article Assessment Pathway will be offered to all ABPN diplomates beginning in 2022. More details will be available in 2021.

2020 Computer Examination Results

- The ABPN administered 29 computer-based specialty and subspecialty certification and continuing certification/maintenance of certification (CC/MOC) examinations in 2020. (Most CC/MOC examinations had two forms, as well as two administrations.)
- In addition, 18 combined CC/MOC examinations (specialty and specialty, specialty and subspecialty, or multiple subspecialties) were administered to 68 ABPN diplomates of whom 64 (94%) passed.
- About 5,000 ABPN computer-based examinations were administered at Pearson VUE testing centers.
- The CC/MOC examination in Neurodevelopmental Disabilities was administered to five examinees from the American Board of Pediatrics examinee (0 from ABPN).

- The certification examination in Neuromuscular Medicine was administered to 116 ABPN and six American Board of Physical Medicine and Rehabilitation examinees.
- The CC/MOC examination in Neuromuscular Medicine was administered to 17 ABPN and five American Board of Physical Medicine and Rehabilitation examinees.
- Three additional subspecialty examinations and three additional subspecialty CC/MOC examinations were administered by other ABMS boards.
 - The American Board of Anesthesiology administered certification and CC/MOC Pain Medicine examinations.
 - The American Board of Internal Medicine administered certification and CC/MOC Hospice and Palliative Medicine examinations and CC/ MOC Sleep Medicine examinations.

Examination Type	Examination	Number Passing	Number of Candidates	Percent Passing
Specialty Certification	Psychiatry Certification	1504	1885	80%
Specialty Certification	Neurology Certification	790	927	85%
Specialty Certification	Child Neurology Certification 128 165		165	78%
Subspecialty Certification	Child and Adolescent Psychiatry 395 477		477	83%
Subspecialty Certification	Addiction Psychiatry	ddiction Psychiatry 141 146		97%
Subspecialty Certification	Brain Injury Medicine*	44	51	86%
Subspecialty Certification	Epilepsy 199 213		213	93%
Subspecialty Certification	Geriatric Psychiatry	81	87	93%
Subspecialty Certification	Hospice and Palliative Medicine*	16	18	89%
Subspecialty Certification	Neuromuscular Medicine*	110	116	95%
Subspecialty Certification	Pain Medicine*	12	15	80%
Subspecialty Certification	Vascular Neurology	223	232	96%
CC/MOC	Psychiatry	303	328	92%
CC/MOC	Neurology	144	166	87%
CC/MOC	Child Neurology	11	13	85%
CC/MOC	Addiction Psychiatry	27	32	84%
CC/MOC	Child and Adolescent Psychiatry	59	64	92%
CC/MOC	Clinical Neurophysiology (General, EEG, EMG)	33	41	80%
CC/MOC	Consultation-Liaison Psychiatry	19	22	86%
CC/MOC	Forensic Psychiatry	25	29	86%
CC/MOC	Geriatric Psychiatry	44	46	96%
CC/MOC	Hospice and Palliative Medicine*	6	6	100%
CC/MOC	Neurodevelopmental Disabilities*	0	0	0%
CC/MOC	Neuromuscular Medicine*	17	17	100%
CC/MOC	Pain Medicine*	6	9	67%
CC/MOC	Sleep Medicine*	55	65	85%
CC/MOC	Vascular Neurology	31	39	79%

*ABPN only

Total and Active Certifications as of December 31, 2020

Specialty/Subspecialty	First Exam	All Certificates Awarded	Estimated Number of Active Certificates	Estimated Number (%) of Active Lifetime Certificates***	Estimated Number (%) of Active Time-limited Certificates****
Psychiatry	1935	66,295	40,093	9,108 (of 9,315 awarded) (98%)	30,985 (of 34,785 awarded) (89%)
Neurology	1935	22,247	16,414	2,730 (of 2,764 awarded) (99%)	13,684 (of 14,595 awarded) (94%)
Child Neurology	1968	3,129	2,451	365 (of 367 awarded) (99%)	2,086 (of 2,186 awarded) (95%)
Child and Adolescent Psychiatry	1959	11,748	9,022	1,824 (of 1,852 awarded) (99%)	7,198 (of 7,883 awarded) (91%)
Neuropsychiatry	1935	824	0		
Addiction Psychiatry	1993	2,806	1,300		1,300 (46%)
Brain Injury Medicine**	2014	206	196		196 (95%)
Clinical Neurophysiology	1992	3,261	2,102		2,102 (64%)
Consultation-Liaison Psychiatry	2005	1,706	1,183		1,183 (69%)
Epilepsy	2013	2,045	1,990		1,990 (97%)
Forensic Psychiatry	1994	2,532	1,330		1,330 (53%)
Geriatric Psychiatry	1991	3,638	1,457		1,457 (40%)
Hospice and Palliative Medicine**	2008	160	128		128 (80%)
Neurodevelopmental Disabilities*	2001	96	53		53 (55%)
Neuromuscular Medicine*	2008	976	828		828 (85%)
Pain Medicine**	2000	398	256		256 (64%)
Sleep Medicine**	2007	1,654	1,330		1,330 (80%)
Vascular Neurology	2005	1,969	1,596		1,596 (81%)

Notes: 1. The "All Certificates" columns reflect the total number of certificates issued, including diplomates known to be deceased and/or those whose certificates are no longer active.

2. The "Active Certificates" columns reflect the number of active (not expired or not revoked) certificates held by diplomates who were certified in their primary specialty in 1986 or later (assuming a 35-year career post initial primary certification) and known not to be deceased.

3. Joint board examinations administered by the ABPN are noted with a single asterisk (*). The numbers in this table reflect ABPN diplomates only.

4. Joint board examinations administered by another ABMS board are noted with a double asterisk (**). The numbers in this table reflect ABPN diplomates only.

5. ***Lifetime Psychiatry, Neurology, and Child Neurology certificate holders obtained primary certification between 1985 and September 1994. Lifetime Child and Adolescent Psychiatry (CAP) certificate holders obtained primary certification in 1986 or later and CAP certification before 1995.

6. ****All subspecialties, except for Child and Adolescent Psychiatry, Hospice and Palliative Medicine, Pain Medicine, and Sleep Medicine must maintain primary certification.

The ABPN Vision 20/20 Strategic Plan Report

The ABPN implemented its first ten-year strategic plan, Vision 20/10, in July 2000, and before it was completed in July 2010, work began on the second plan, Vision 20/20. The first step in the process, led by the ABPN Directors and staff, was to craft a Vision and an Ends Statement that defined what the ABPN aspired to be. Next, a Mission Statement was formulated that clarified what the ABPN intended to do to achieve its Vision.

Based on these guiding principles, Strategic Issues were then identified, and strategies and tactics were developed to address each Strategic Issue. Finally, Key Results Areas and Annual Benchmarks were established for each Strategic Issue in order to monitor the development and implementation of Vision 20/20. From October 2013 through February 2015, the Board reviewed and updated Vision 20/20, and the revised plan was approved by the Board in May 2015.

A mission-driven and collaborative strategic planning process is central to the ABPN achieving new levels of success in advancing leading-edge programs of excellence and ensuring lifelong learning opportunities for America's psychiatrists and neurologists," said Allison Brashear, MD, MBA, Chair, ABPN Strategic Planning Committee. "This is critical to supporting optimal psychiatric and neurologic care that will improve the health of communities nationwide.

A Strategic Planning Committee was appointed to monitor implementation activities and develop programs for strategic planning retreats which were held at every Board meeting. In addition to presentations by representatives from other organizations, discussions and debates were held to clarify the issues facing the Board. The "book club" format, which had started during Vision 20/10, remained a consistent feature with the discussion leaders emphasizing the relevance of the works to the ABPN. The Committee also reviewed the annual implementation plans and oversaw development of the next strategic plan, Vision 20/30. In October the full Board reviewed each year's "report card" for accomplishments as well as shortfalls.

Ten strategic issues were identified, and the major accomplishments in each area are summarized below. At the end of Vision 20/20, the ABPN Directors and staff concluded that it had had a significant positive impact on the organization. It provided a structure for continuous evaluation of the Board's activities in light of its mission to promote and assess the competence of psychiatrists and neurologists to provide high quality patient care.

Vision Statement

To promote high quality patient care for the public through the initial and continuing certification of psychiatrists and neurologists.

Ends Statement

In order to support high quality psychiatric and neurologic care for the public, the ABPN develops, promotes, and advances (1) programs of excellence, efficiency, integrity, and fairness for candidates and diplomates, and (2) effective training and lifelong learning for psychiatrists and neurologists.

Mission Statement

The mission of the ABPN is to promote and assess the competence of psychiatrists and neurologists to provide high quality patient care by:

- Establishing standards and requirements for initial and continuing certification;
- Implementing state-of-the-art testing methods to evaluate candidate and diplomate competencies;
- Encouraging and assessing diplomate involvement in lifelong learning;
- Applying available technologies and information to collect and analyze pertinent data;
- Communicating and collaborating with training programs, residents, candidates, diplomates, professional and health care organizations, and the public;
- Supporting innovative educational and research programs relevant to psychiatrists and neurologists; and
- Operating internal programs and services effectively and efficiently.

Strategic Issue #1: Governance and Administration

- Constructed ABPN office building and held celebration in May 2018 with current and emeritus Directors
- Developed Board self-evaluation and orientation and evaluation processes for new Directors
- Revised ABPN by-laws, policy manual, and conflict-of-interest policies and forms
- Developed a professionalism statement for ABPN diplomates
- Established a Diversity Task Force
- Reviewed and endorsed the ABMS Governance Plan and Vision Commission Report

Strategic Issue #2: Strategic Financial Management

- Annually reviewed certification and maintenance of certification fees and significantly reduced them
- Maintained a balanced budget and fiscal ratios within desired ranges

Strategic Issue #3: Communications

- Redesigned the ABPN website
- Developed and implemented communications plan with focus on recertification/MOC/continuing certification requirements
- Participated in leadership meetings with stakeholder organizations
- Presented and staffed booths at annual meetings of stakeholder organizations
- Communicated with candidates and diplomates and other stakeholders during COVID-19 crisis

Strategic Issue #4: Research and Education

- Held Crucial Issues Forums with wide representation from the fields of psychiatry and neurology:
 - > Subspecialties in Psychiatry and Neurology (2014)
 - > Psychiatry, Neurology, and Child Neurology Resident Competence Requirements (2015)
 - > Innovations in the Requirements for MOC (2016)
 - > Physician Wellness and Burnout (2017)
 - > Future Directions for the ABPN (2019)
- Established award/fellowship programs
 - > Faculty Innovation in Education Award
 - > Research Award
 - > Senior resident administrative fellowship
 - > ABPN Community of Scholars Task Force
- · Research and development
 - > Developed research strategic plan
 - > Funded study on the relationship between certification and quality of care provided by psychiatrists and neurologists; Bentson McFarland, MD, PhD, principal investigator
 - > Funded study on resilience of psychiatrists and neurologists; Tait Shanafelt, MD, principal investigator
 - > Provided financial support to AAN and APA for registry development
- Established Combined Program Oversight Committee

Strategic Issue #5: Technology and Information

- Established Technology and Information Committee
- · Launched revised website
- Approved plan to redesign ABPN IT support systems

Strategic Issue #6: Core Competencies and Milestones

 Developed subspecialty core competencies: addiction psychiatry, child and adolescent psychiatry, clinical neurophysiology, forensic psychiatry, geriatric psychiatry, neurodevelopmental disabilities, neuromuscular medicine, psychosomatic medicine, and vascular neurology

Strategic Issue #7: Computerized Examinations

- Engaged in continuous quality improvement activities
 - > Ongoing review of psychometric properties of examinations
 - > Ongoing review of content outlines
 - > Pre-testing of multiple-choice items when feasible
 - > Ongoing review of examination passing standards
 - > Convened ad hoc committees to reclassify pool questions
- Established committee to develop professionalism multiple choice questions
- Developed/reviewed test committee policies and procedures

Strategic Issue #8: Subspecialties

- Approved new subspecialties/focused areas of practice
 - > Epilepsy
 - > Neurocritical care (multispecialty)
 - Central nervous system endovascular surgery (multispecialty)
- Reviewed policies/procedures for recognition of new subspecialties

Strategic Issue #9: Maintenance of Certification (MOC) and MOC Product Development

- · Continued to refine MOC program as ABMS requirements evolved
 - > Approved continuous MOC program
 - > Maintained requirement that diplomates have to maintain certification/MOC in a primary specialty to participate in MOC in a subspecialty (except for child and adolescent psychiatry)
 - > Decided to require other ABMS member Board MOC activities to be completed for ABPN credit
- Developed article-based pilot project for MOC Part III for neurology, child neurology, psychiatry, and child and adolescent psychiatry
- MOC communications
 - > Informed diplomates about MOC requirements through direct mailings, presentations at professional meetings, and postings on web site
 - > Informed stakeholder organizations about MOC requirements through presentations and meetings
 - > Approved communication plan for lifelong learning component of MOC

Strategic Issue #10: International Initiatives and Alternative Pathways

- Approved Singapore certification examination project; administered examinations 2014-2020
- Decided to accept PGY-1 training that is accredited by the Royal College of Physicians and Surgeons of Canada and that meets ABPN rotation requirements and extended the RCPS-C reciprocity agreement to CAP diplomates of the RCPS-C
- Decided to accept AOA-accredited training of residents graduating from ACGME-accredited training programs

New ABPN Diversity, Equity and Inclusion Committee

The ABPN has established a new Diversity, Equity and Inclusion Committee to supervise all diversity, equity, and inclusion activities for the Board.

The new committee is charged with developing a diversity, equity and inclusion policy and plan.

The following directors are included in the inaugural committee:

- Allison Brashear, MD, MBA, Co-Chair
- Andrea Stolar, MD, Co-Chair
- Joan Anzia, MD
- Terrence Cascino, MD
- Jaffar Khan, MD
- · Jeffrey Lyness, MD

The ABPN will post its Diversity, Equity and Inclusion Statement on its website and report the results of other DEI activities in annual updates.

American Board of Psychiatry and Neurology Statement on Racism and Health Disparities

The American Board of Psychiatry and Neurology (ABPN) is very disturbed by the disproportionately severe effect of the COVID-19 pandemic on Americans of color and the reports of Black Americans being killed by the very people who are sworn to protect them. These and other events have drawn attention to longstanding health disparities in our country and the many ways in which our society and its institutions have failed to uphold the highest ideals of equity, justice, and inclusion. Now is the time for tangible action at an individual, organizational, and societal level.

As students of the mind and the brain, we at the ABPN are in a unique position to understand the devastating effects of racism on individuals and on society as a whole. With this understanding, the ABPN believes it is time to move beyond mere words that acknowledge what has occurred in the past and to take specific actions that may help ameliorate the problems that exist. To that end, in the last few years the ABPN has been reexamining its strategies for recruiting Directors and committee members so that every effort might be made to ensure that our volunteer psychiatrists and neurologists were truly representative of our workforce and the patients they serve. Those efforts will continue and be increased. We will also continue to do everything we can to ensure that racism as well as conscious and unconscious bias do not make their way into our examinations and programs. Ensuring inclusiveness and upholding the highest standards of fairness are not only our responsibility. These directives are the just and right things for us to do for our colleagues, our patients, and our profession.

Test Development Committee Names and Members

The ABPN acknowledges the many contributions made by the following test committee members during this difficult year. Committee members worked tirelessly through virtual meetings to keep ABPN exam and assessment development ongoing and on schedule during less than ideal circumstances. Thank you for your valuable input, time, and dedication.

Addiction Psychiatry

Grace Hennessy, MD, Chair James Berry, DO, Vice Chair Olubunmi Asana, MD Nicholas Athanasiou, MD Stuart Gitlow, MD, MPH Brian Hurley, MD Vicki Kalira, MD

Child and Adolescent Psychiatry Certification

Lee Ascherman, MD, Chair Janice Forster, MD, Vice Chair Peter Daniolos, MD John Duby, MD* Amanda Elliott, DO Ellen Heyneman, MD Jeffrey Hunt, MD Nathaniel Kouns, MD Clinton Martin, MD Adair Parr, MD Sandra Rackley, MD Kenneth Rogers, MD

Child Neurology Certification

John Bodensteiner, MD, Chair Nina Schor, MD, PhD, Vice Chair Tonya Balmakund, MD Nancy Bass, MD Daniel Bonthius, MD, PhD Clarimar Borrero-Mejias, MD Karen Keough, MD Phillip Pearl, MD

Clinical Neurophysiology

Devon Rubin, MD, Chair Mark Quigg, MD, MSc, Vice Chair Cynthia Bodkin, MD Jasvinder Chawla, MD Rebecca Fasano, MD Ioannis Karakis, MD John Kincaid, MD, FAAN Adriana Palade, MD Erik St. Louis, MD Jinny Tavee, MD

Consultation-Liaison Psychiatry

Madeleine Becker, MD, Chair Terry Rabinowitz, MD, Vice Chair Philip Bialer, MD Paul Desan, MD, PhD Lisa Rosenthal, MD Marie Tobin, MD Christina Wichman, DO

Epilepsy

Patricia Crumrine, MD, Chair Imran Ali, MD, FAAN, Vice Chair Ritu Bagla, MD Alica Goldman, MD, PhD Andres Kanner, MD Alison Pack, MD Rana Said, MD Jerry Shih, MD David Spencer, MD Alexandra Urban, MD

Forensic Psychiatry

Jeffrey Metzner, MD, Chair Jeffrey Janofsky, MD, Vice Chair Liza Gold, MD Martin Guerrero, MD Annette Hanson, MD Donald Meyer, MD Raymond Patterson, MD

Geriatric Psychiatry

Elizabeth Santos, MD, Chair Cindy Marshall, MD, Vice Chair David Belmonte, MD Jordan Karp, MD Uma Suryadevara, MD John Tran, MD Ipsit Vahia, MD

International Exam Committee -US

Josepha Cheong, MD, Chair Beth Ann Brooks, MD, MSA Jasvinder Chawla, MD George Keepers, MD Gail Manos, MD James Shore, MD Alan Teo, MD

Neurocritical Care

Alejandro Rabinstein, MD, Chair Vineeta Singh, MD, Vice Chair Thomas Bleck, MD Jordan Bonomo, MD**** Andrew Carlson, MD**** Brenda Fahy, MD*** Samuel Galvagno, DO*** Jesse Hemphill, MD Evadne Marcolini, MD**** Soojin Park, MD James Riviello, MD Jose Suarez, MD Alex Valadka, MD*****

Neurodevelopmental Disabilities

Bruce Shapiro, MD, Chair * Keith Coffman, MD, Vice Chair Peter Blasco, MD * Sandra Friedman, MD, MPH * Amy Newmeyer, MD * Max Wiznitzer, MD

General Neurology (Neurology Part A)

J. Clay Goodman, MD, Chair Terrence Cascino, MD, FAAN, Vice Chair Dane Chetkovich, MD, PhD Nestor Galvez-Jimenez, MD, MS Deborah Hall, MD, PhD Benn Smith, MD

Behavioral Neurology, Cognition, and Psychiatry (Neurology Part B)

And Psychiatry (Neurolog Steven Lewis, MD, Chair Jaffar Khan, MD, Vice Chair Anna Barrett, MD Daniel Fallon, MD Jonathan Howard, MD Michael Jaffee, MD

Clinical Neurology Adult

(Neurology Part Č) Robert Pascuzzi, MD, Chair Allison Brashear, MD, MBA, Vice Chair José Biller, MD Stephen Conway, MD Jaison Grimes, MD Sara Hocker, MD Jonathan Howard, MD Sarah O'Shea, MD

Neuromuscular Medicine

Janice Massey, MD, Chair Noor Pirzada, MD, Vice Chair William David, MD, PhD Rachana Gandhi, MD Shawn Jorgensen MD ** Craig McDonald, MD ** Lawrence Robinson, MD** John Sladky, MD Jayashri Srinivasan, MD, PhD Gil Wolfe, MD

Professionalism

Christopher Thomas, MD, Chair Nina Schor, MD, PhD, Vice Chair Joan Anzia, MD Patricia Crumrine, MD Andrea Leep Hunderfund, MD Kayla Pope, MD Deepak Prabhakar, MD, MPH Michele Reid, MD Madhu Soni, MD

General Psychiatry (Psychiatry Part A)

Joan Anzia, MD, Chair Charlotte Ladd, MD, PhD Kenan Penaskovic, MD Lisette Rodriguez-Cabezas, MD Dawnelle Schatte, MD Roomana Sheikh, MD Andrea Stolar, MD

Basic Neurology and Neuroscience (Psychiatry Part B)

Robert Boland, MD, Chair Sheldon Benjamin, MD Alexis Cohen-Oram, MD Amelia Dubovsky, MD Jordan Eisenstock, MD Ashley Holland, DO David Kroll, MD Kathy Niu, MD

Clinical Psychiatry (Psychiatry Part C)

Jeffrey Lyness, MD, Chair Josepha Cheong, MD Crystal Clark, MD, MSc Patrick Fox, MD Anne Gross, MD Jerry Halverson, MD Roman Rodriguez, MD Marsal Sanches, MD Lisa Valentine, MD Mitzi Wasserstein, MD

Vascular Neurology

José Biller, MD, Chair Enrique Leira, MD, MS, Vice Chair Harold Adams, MD Bart Demaerschalk , MD, FRCPC Megan Leary, MD David Liebeskind, MD Fernando Testai, MD, PhD

Continuing Certification Article Assessment—Child and Adolescent Psychiatry

Christopher Thomas, MD, Chair Paramjit Joshi, MD, Vice Chair Valerie Arnold, MD Irena Bukelis, MD Regina Bussing, MD Linda Drozdowicz, MD Robert Harper, MD Thomas Matthews, MD Cynthia Santos, MD Oliver Stroeh, MD Eric Williams, MD

Continuing Certification Article Assessment—Child Neurology

Nina Schor, MD, PhD, Chair Elizabeth Bebin, MD, Vice Chair Joanna Blackburn, MD Patricia Crumrine, MD Lisa Emrick, MD Anthony Fine, MD Cary Fu, MD Lenora Lehwald, MD Timothy Lotze, MD Ann Tilton, MD

Continuing Certification Article Assessment—Neurology

Steven Lewis, MD, Chair Terrence Cascino, MD, FAAN, Vice Chair Zubair Ahmed, MD Sarah Benish, MD Barry Czeisler, MD Julie Hammack, MD Ann Killoran, MD MaryAnn Mays, MD Gauri Pawar, MD James Roberts, MD Nicholas Silvestri, MD

Continuing Certification Article Assessment—Psychiatry

Joan Anzia, MD, Chair Timothy Dellenbaugh, MD, Vice Chair Benoit Dubé, MD Marc Ettensohn, MD Ray Hsiao, MD John Kinzie, MD, PhD Nina Kraguljac, MD Margo Lauterbach, MD Martin Leamon, MD Adrienne Taylor, MD Arthur Walaszek, MD

Continuing Certification Subspecialty Article Assessment— Addiction Psychiatry

Robert Ronis, MD, MPH, Chair Marcia Verduin, MD, Vice Chair Kathleen Clegg, MD Karen Drexler, MD Brian Fuehrlein, MD Karen Hartwell, MD Julie Kmiec, DO Srinivas Muvvala, MD Rebecca Payne, MD Joji Suzuki, MD Roger Weiss, MD

Continuing Certification Subspecialty Article Assessment— Clinical Neurophysiology

Imran Ali, MD, FAAN, Chair Aatif Husain, MD, Vice Chair Dara Albert, DO Gloria Galloway, MD Jenna Klotz, MD Ruple Laughlin, MD Zabeen Mahuwala, MBBS Diana Mnatsakanova, MD Divya Singhal, MD Christopher Skidmore, MD Jonathan Smith, MD

Continuing Certification Subspecialty Article Assessment— Consultation-Liaison Psychiatry

Robert Boland, MD, Chair Catherine Crone, MD, Vice Chair Liliya Gershengoren, MD Filza Hussain, MBBS James Kimball, MD David Kroll, MD Jeanne Lackamp, MD Mallika Lavakumar, MD Michael Marcangelo, MD Philip Muskin, MD Sejal Shah, MD

Continuing Certification Subspecialty Article Assessment---Epilepsy

Amy Brooks-Kayal, MD, Chair David Dunn, MD, Vice Chair Debra Byler, MD Kevin Chapman, MD Cornelia Drees, MD Jong Lee, MD, PhD Katherine Noe, MD, PhD Sebastian Pollandt, MD Awais Riaz, MD, PhD Ignacio Valencia, MD Courtney Wusthoff, MD

Continuing Certification Subspecialty Article Assessment— Forensic Psychiatry

Andrea Stolar, MD, Chair Stephen Noffsinger, MD, Vice Chair Renee Binder, MD Kathryn Burns, MD Alan Felthous, MD Richard Frierson, MD Susan Hatters-Friedman, MD Joseph Penn, MD Jennifer Piel, MD, JD Ryan Wagoner, MD Robert Weinstock, MD

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Test Development Committee Names and Members

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Continuing Certification Subspecialty Article Assessment— Geriatric Psychiatry

Josepha Cheong, MD, Chair Shilpa Srinivasan, MD, Vice Chair Maria Caserta, MD, PhD Denise Feil, MD Erica Garcia-Pittman, MD Steven Huege, MD Arnaldo Moreno, MD Prasad Padala, MD Steven Starks, MD Sandra Swantek, MD Matthew Warren, MD

Continuing Certification Subspecialty Article Assessment— Neurodevelopmental Disabilities

John Bodensteiner, MD, Chair Marc Patterson, MD, MBBS, Vice Chair Nicole Baumer, MD Keith Coffman, MD Emily C. de los Reyes, MD Andrea Gropman, MD Eboni Lance, MD David Mandelbaum, MD, PhD John Mantovani, MD Sinan Turnacioglu, MD Max Wiznitzer, MD

Continuing Certification Subspecialty Article Assessment-Neuromuscular Medicine

Laurie Gutmann, MD, Chair Kerry Levin, MD, Vice Chair Eric Altschuler, MD, PhD ** Paloma Gonzalez-Perez, MD Lisa Hobson-Webb, MD Kwan Lau, MD Christopher Nance, MD Amanda Peltier, MD Seth Perlman, MD Andrew Skalsky, MD ** Eric Sorenson, MD

Continuing Certification Subspecialty Article Assessment– Vascular Neurology

Jaffar Khan, MD, Chair Andrew Southerland, MD, MSc, Vice Chair James Brorson, MD Shawna Cutting, MD Rima Dafer, MD Michael De Georgia, MD Amy Guzik, MD Brett Meyer, MD David Moore, MD, PhD, FAAN Brian Silver, MD Ken Uchino, MD

* Diplomate of the American Board of Pediatrics ** Diplomate of the American Board of Physical Medicine and Rehabilitation *** Diplomate of the American Board of Anesthesiology **** Diplomate of American Board of Emergency Medicine ***** Diplomate of American Board of Neurological Surgery

Ambassadors Communicate Continuing Certification Messages to Specialty and Subspecialty Groups

The ABPN CC/MOC Ambassador Program was developed in 2011 in anticipation of launching the Continuing Certification (CC)/MOC Program in 2012. With this program, trained volunteer diplomates communicate a consistent positive message about lifelong learning and continuing certification to our diplomates via presentations for professional organizations, group practice settings and other groups. Our goal is to work together with the CC/MOC Ambassadors to continue to keep the field informed about ABPN policies and programs.

Thank you to the following psychiatrists and neurologists:

Psychiatry Ambassadors:

Neurology Ambassadors:

Alexis Cohen-Oram, MD Melissa Buboltz, MD Kristen Dunaway, MD Richard Frierson, MD

Justin Abbatemarco, MD

Zubair Ahmed, MD

Kalea Colletta, DO

Anthony Fine, MD

Patricia Crumrine, MD

José Biller, MD

Rita Hargrave, MD Marc Ettensohn, MD Annette Matthews, MD Jonathan Morris, MD Marcia Verduin, MD Mitzi Wasserstein, MD

Charles Flippen, MD Aatif Husain, MD Avni Kapadia, MD John Kincaid, MD Enrique Leira, MD Tahseen Mozaffar, MD

Sarah O'Shea, MD Robert Pascuzzi, MD Marc Patterson, MD Mark Ross, MD Benn Smith, MD

Advisory Committee Provides Input on Continuing Certification Program Enhancements

The Continuing Certification (CC)/MOC Clinical Advisory Committee was developed at the end of 2015 to provide physician feedback and contributions towards potential improvements to the ABPN CC/MOC Program. The American Psychiatry Association and the American Academy of Neurology were solicited for names of committee volunteers. The group consists of practicing board certified psychiatrists and neurologists who provide input on how CC/MOC impacts their practice and potentially improves patient care.

Thank you to the following psychiatrists and neurologists:

Psychiatry

Valerie Arnold, MD J. Robert Batterson, MD Lama Bazzi, MD L. Russell Pet, MD

Neurology

Charlene Gamaldo, MD Elaine Jones, MD Eddie Patton, MD Michael Rosenbloom, MD

American Board of Psychiatry and Neurology, Inc.

ABPN Administrative Fellowship: Making a Bigger Impact



By Katherine Mun, MD, Vascular Neurology Fellow, Department of Neurology, University at California, Los Angeles

A few years ago, I read an article that discussed how working in a high earning job and donating resources had the potential to help more people than having a job helping people. The idea that there

might be ways to have a bigger impact stuck with me and I sought ways to do more than just practice clinical medicine. This desire to do more ultimately led me to apply for the ABPN Senior Resident Administrative Fellowship. When I started my fellowship in March 2020, I had no idea how valuable the experience would be.

What started off like any other fellowship, quickly turned into a very different experience when the COVID-19 pandemic was declared on March 11. As this dark gray swan* event descended upon the world, I remember how conversations with Dr. Faulkner ranged from administrative principles to history and current events. There is nothing more memorable than seeing the principles of the fellowship curriculum play out on local, national, and global stages. Even now, nearly a year later, I find myself analyzing decisions made by those in administrative roles within the context of the principles I learned.

Summarizing the wealth of curricular knowledge, the incredible exposure to inspiring leaders in psychiatry and neurology, and the one-on-one mentorship from Dr. Faulkner into a neat synopsis is impossible. I came away from my time at the ABPN with an enhanced understanding of what it means to lead. The pandemic has made evident how administrative decisions both past and present can have a significant impact on unanticipated events. I saw first-hand how prior decisions made at the ABPN under Dr. Faulkner's leadership meant that the ABPN would be able to weather the pandemic, while many other organizations struggled due to lack of funding and preparation.

I am incredibly grateful for my fellowship at the ABPN. I had the honor of working with Dr. Faulkner and the incredible senior staff during a critical time. Being part of such a well-run organization with great people taught me what the result of good administration and leadership looks like.

*If you have not already read Nassim Nicholas Taleb's book *The Black Swan: The Impact of the Highly Improbable*, the book is highly recommended and this reference will make more sense.

Awards and Honors

Current members of the ABPN Board of Directors and staff received several awards in 2020.

Joan Anzia, MD, ABPN director, has received the Gary A. Mecklenburg Distinguished Physician Award from Northwestern University for her work over the past 15 years as Physician Health Liaison.

Amy Brooks-Kayal, MD, ABPN director, was appointed professor and chair of the Department of Neurology for the University of California, Davis, School of Medicine.

Larry R. Faulkner, MD, ABPN President and CEO, assumed the role of President-Elect of The American College of Psychiatrists.

Jeffrey M. Lyness, MD, ABPN director, received the 2020 APA Vestermark Psychiatry Educator Award for excellence, leadership, and creativity in psychiatric education.

Nina F. Schor, MD, PhD, ABPN director, was awarded the Bernard Alpers Lectureship for the Department of Neurology at the Sidney Kimmel School of Medicine at Thomas Jefferson University in Philadelphia.

Publications

ABPN staff, Board members and a former administrative fellow contributed to several publications published in 2020.

Abbatemarco J; Juul D; Vondrak P; Mays MA; Willis MA; Faulkner LR: Clinical Skills Evaluation in Neurology, Child Neurology and Psychiatry: Program Directors' Perspective and Future Opportunities. <u>Medical Science Educator</u>. Published online 1 May 2020.

Albert D, Bass N, Bodensteiner JB, Spiciarich M, Urion DK, Edgar L, et al.: Developing a New Set of ACGME Milestones for Child Neurology Residency. <u>Pediatric Neurology</u> 2020. Published 23 October 2020.

Juul D; Gutmann L; Adams HP Jr.; O'Shea SA; Faulkner LR: Feedback from Practitioners about the Psychiatry Component of Residency Training. <u>Neurology</u>. Published online 10 September 2020.

Juul D; Levin KH; Gutmann L; Faulkner LR: Subspecialization in Clinical Neurophysiology: A Twenty-Five Year Retrospective. <u>Neurology</u> 2020;95:686-692.

Schor NF. Diversifying child neurology: Developing a workforce that reflects the patients and families for whom we care. <u>Pediatric Neurology</u> 112:22-24, 2020.

Schor NF. Towards a smoother rocky road. <u>JAMA Neurology</u> 77:1481, 2020.

ABPN Participation in American Board of Medical Specialties Committees and Groups

The ABPN continues its active involvement with the ABMS. The following ABPN, directors, emeritus directors, and staff served on ABMS committees and other groups in 2020:

Joan M. Anzia, MD: Committee on Continuing Certification

Josepha A. Cheong, MD: Board Member, Accreditation Council for Graduate Medical Education

Larry R. Faulkner, MD: ABMS Board of Directors

Jeffrey M. Lyness, MD: Chair, Health Policy and Strategy Committee

Barbara S. Schneidman, MD, MPH: Awards Committee

Christopher R. Thomas, MD: Chair, Ethics and Professionalism Committee; Professionalism Task Force

ABPN Staff:

Amanda Bishop and Patti Vondrak: MOCNet

Kevin Fitzpatrick: TechNet

Jessica Rogers: ProNet

Cathy Szmurlo and Patti Vondrak: ComNet

Professional Society Meeting Participation

The ABPN values the importance of attending meetings of our professional society partners. Participating with display tables or booths in order to meet with and answer questions from our candidates and diplomates remains a priority.

Due to the pandemic, most professional societies either cancelled their meeting or provided a virtual version of it in 2020.

The ABPN participated in one meeting in 2020 -- the American Association of Directors of Psychiatric Residency Training (AADPRT) Annual Meeting in early March in Dallas, TX.

Presentations

During 2020, ABPN directors, MOC ambassadors, diplomates and staff contributed their knowledge of both the psychiatry and neurology specialties and subspecialties and the importance of initial certification and continuing certification through engaging in presentations to various groups. Most presentations were limited to a virtual format in 2020 and, therefore, fewer presentations took place than usual.

February

ABPN Subspecialty Certification in Neurocritical Care, presented by S. Lewis, Society of Critical Care Medicine, Orlando, FL.

March

Update on the ABPN, presented by L. Faulkner, American Association of Directors of Psychiatric Residency Training, Dallas, TX.

ABPN Continuing Certification Update, remote presentation by T. Cascino, South Carolina Neurological Association.

ABPN Continuing Certification Update, presented by J. Morris, Department of Psychiatry, US Naval Hospital, Guam.

April

Clinical Skills Evaluation in Neurology, Child Neurology and Psychiatry: Program Directors' Perspective and Future Opportunities, poster presented by J. Abbatemarco, D. Juul, P. Vondrak, M. Mays, M. Willis and L. Faulkner, American Academy of Neurology Annual Meeting.

Мау

Equity, Diversity, and Inclusion in Academic Medicine and Leadership, presented by N. Schor, Clinical Center Neuroscience Grand Rounds, National Institutes of Health, Bethesda, MD.

July

The ABPN Continuing Certification (CC) Program: Current Status and Tips for Success, Zoom presentation by L. Faulkner, Ohio Psychiatric Physicians Association.

August

The ABPN Continuing Certification (CC) Program: Current Status and Tips for Success, Zoom presentation by L. Faulkner, Grand Rounds at the Greer Psychiatry Residency Program, University of South Carolina School of Medicine.

October

ABPN MOC Program: Lifelong Learning for Neurologists, presented by J. Bodensteiner, American Neurological Association Virtual Annual Meeting.

November

Teaching in Turmoil: The Role of the Consultation Liaison Educator During the COVID-19 Pandemic, virtual workshop by R. Boland, Academy of Consultation Liaison Psychiatry Annual Meeting.

December

Moving to the Future: Advancing Quality Through Continuing Certification Programs, panelist presentation with L. Faulkner, ABMS Symposium on The Next Generation of Board Certification: Improving Health and Health Care.

Our Mission

The mission of the ABPN is to promote and assess the competence of psychiatrists and neurologists to provide high quality patient care by:

- Establishing standards and requirements for initial and continuing certification;
- Implementing state-of-the-art testing methods to evaluate candidate and diplomate competencies;
- · Encouraging and assessing diplomate involvement in lifelong learning;
- Applying available technologies and information to collect and analyze pertinent data;
- Communicating and collaborating with training programs, residents, candidates, diplomates, professional and health care organizations, and the public;
- Supporting innovative educational and research programs relevant to psychiatrists and neurologists; and
- Operating programs and services effectively and efficiently.

Statement on Professionalism

Professionalism forms the basis of medicine's contract with society. The ABPN is concerned with those aspects of professionalism that are demonstrated through a physician's clinical competence, commitment to lifelong learning and professional improvement, interpersonal skills, and ethical understanding and behavior. In its credentialing, certification, and MOC programs, the ABPN seeks to assess and document that its candidates and diplomates possess and maintain these aspects of professionalism.



American Board of Psychiatry and Neurology, Inc. A Member Board of the American Board of Medical Specialties (ABMS)