

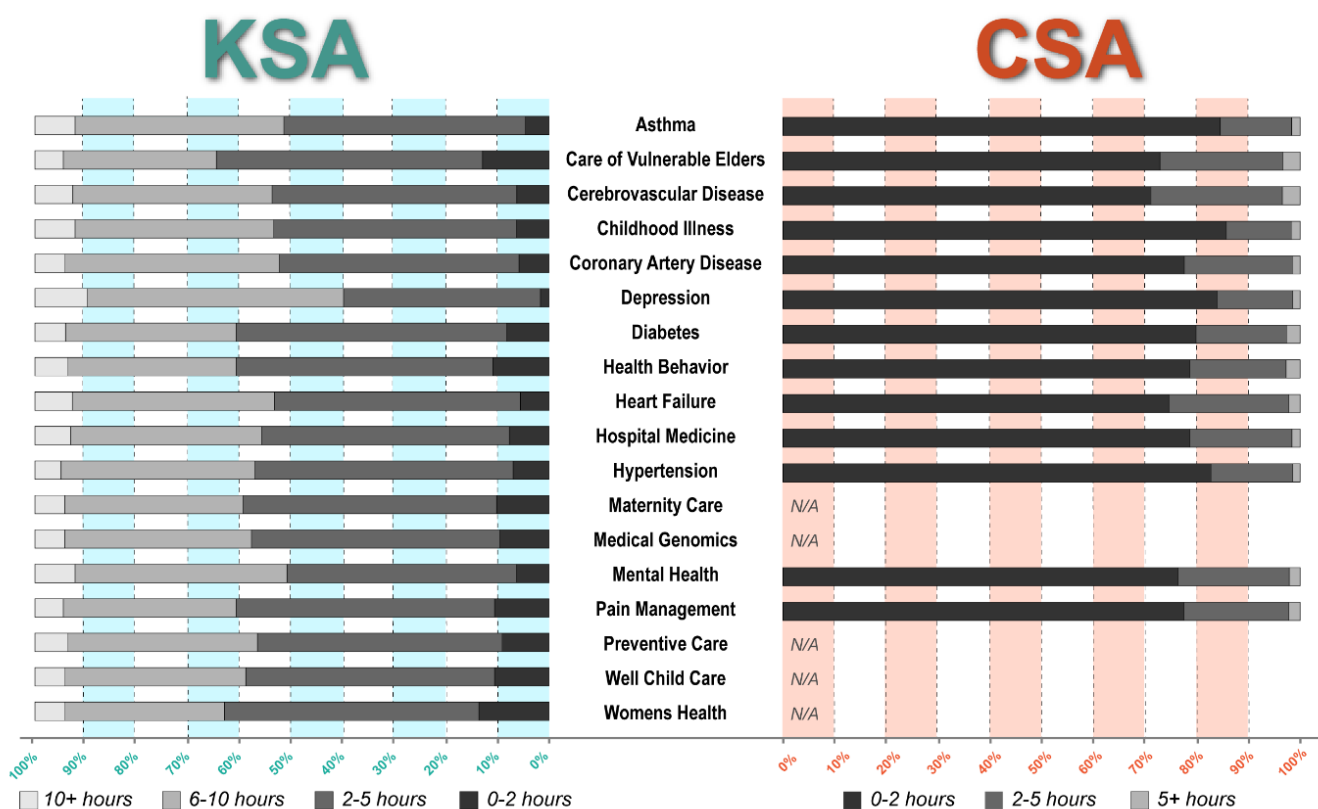
## Time Spent Completing American Board of Family Medicine

### Knowledge Self-Assessments (KSA) and Clinical Self-Assessments (CSA)

Evidence suggests that physicians often choose continuing medical education (CME) activities in areas of clinical strength rather than need.<sup>1,2</sup> Physicians who have identified their knowledge gaps, or have a perception of their limits in certain clinical areas, are more likely to show improvement from participating in CME.<sup>3</sup> However, physicians are poor at self-assessing their own competence compared to formal external assessment.<sup>4</sup>

The Self-Assessment component of the ABFM Continuous Certification process is designed to help physicians assess their knowledge and skills in a range of areas that are of greatest use in each Diplomate's practice. Physicians can earn CME credit for these activities and can use the results of feedback from the Knowledge Self-Assessment (KSA) and Clinical Self-Assessment (CSA) to pursue further education tailored to their needs.

From the launch of KSA's and CSA's in late 2016 to the end of 2017, the self-reported time to complete these activities for a majority of family physicians is less than 5 hours for a KSA and less than 2 hours for a CSA.



#### References:

1. Cantillon P, Jones R. Does continuing medical education in general practice make a difference? *BMJ* 1999;318:1276-9.
2. Peterson LE, Blackburn B, Bazemore A, et al. Do family physicians choose self-assessment activities based on what they know or don't know? *The Journal of Continuing Education in the Health Professions* 2014;34:164-170.
3. Davis DA, Thomson MA, Oxman AD, Haynes RB. Changing physician performance. A systematic review of the effect of continuing medical education strategies. *JAMA* 1995;274:700-5.
4. Davis DA, Mazmanian PE, Fordis M, et al. Accuracy of physician self-assessment compared with observed measures of competence: a systematic review. *JAMA* 2006;296:1094-102.