

Official #ENTSignaling program for applicants

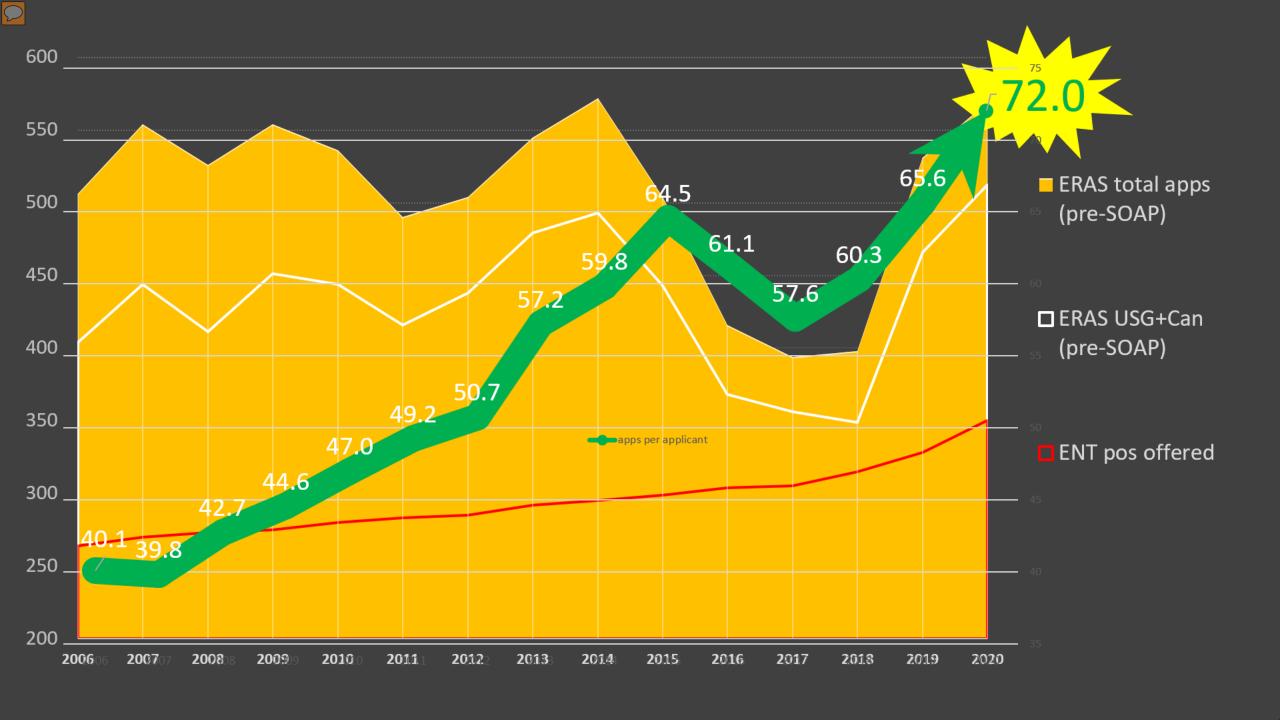
Developed by

Otolaryngology Program Directors Organization (OPDO)

Society of University Otolaryngologists (SUO)

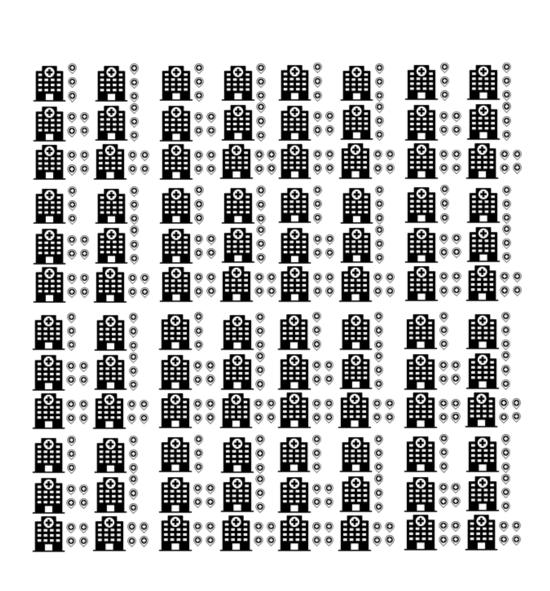
Association of Academic Departments in Otolaryngology (AADO)

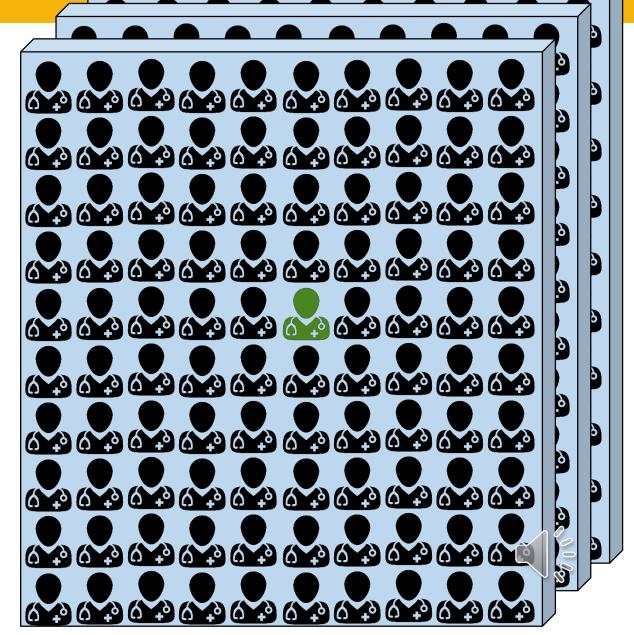
# The Problem





#### Application "arms race"





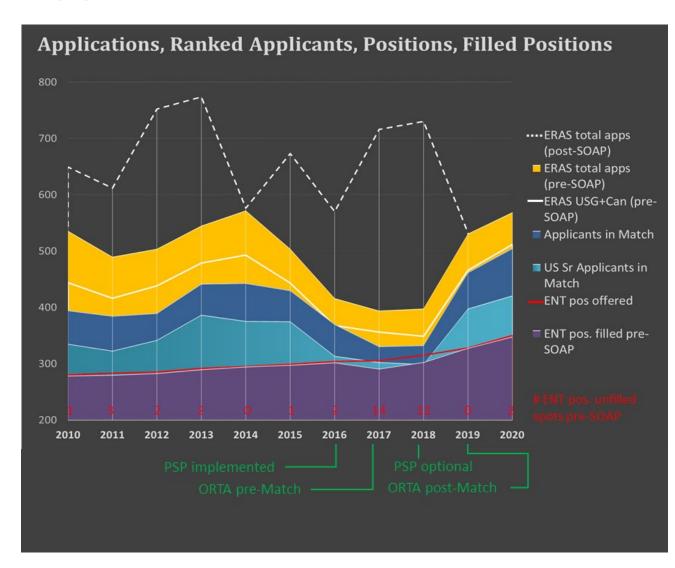
# More Applicants + More Difficulty in Distinguishing Applicants

- Academic
  - Schools moving to Pass/Fail grading systems
  - Fewer Schools with AOA
  - Not reporting class rank
- Pandemic Challenges
  - Loss of Visiting Rotations
  - Concern for Interview Hoarding
- If applicants are applying to every program in the country, how do we know who's really interested in us?



#### History of Otolaryngology Application "Innovations"

- Program-specific paragraph
  - Implemented in 2016
  - Late introduction, burden on applicants without clear benefit
  - Not embraced by GME community
- Otolaryngology Resident Talent Assessment (ORTA)
  - Aims to measure the non-cognitive aspects of individual's success
  - Automated phone interview with third-party scoring/interpretation
  - Implemented in 2017, made postmatch & voluntary in 2018/19, abandoned in 2021



#### Signaling – Proposals and Advocacy

Opinion



#### A Novel Approach to the National Resident Matching Program—The Star System

JAMA Otolaryngology-Head & Neck Surgery May 2018 Volume 144, Number 5

A Computer Simulation Model to Analyze the Application Process for Competitive Residency Programs

Mark E. Whipple, MD, SM Anthony B. Law, MD, PhD Randall A. Bly, MD Journal of Graduate Medical Education, February 2019

Not the Last Word: Want to Match in an Orthopaedic Surgery Residency? Send a Rose to the Program Director

Joseph Bernstein MD @

Clin Orthop Relat Res (2017) 475:2845-2849 /

# Signaling – Implementation and Analysis

# The Job Market for New Economists: A Market Design Perspective

Peter Coles, John Cawley, Phillip B. Levine, Muriel Niederle, Alvin E. Roth, and John J. Siegfried

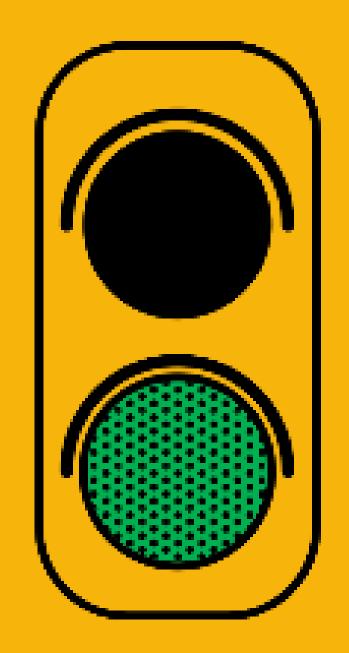
Journal of Economic Perspectives—Volume 24, Number 4—Fall 2010—Pages 187–206

### Goals of Signaling

- Provide applicants with special attention at programs of particular interest
- Remove inappropriate perception of disinterest
  - Geography bias
- Improve efficiency of the interview process
- Improve distribution of interviews

"Brought to you by the AEA"

**Applicant friendly** 



Goal: to put interested applicants with interested programs

#### Signaling Program Design

- 5 Signals per applicant
- All signals with equal weight
- Programs only see list of applicants that have sent them signals
- No signaling to home program or program with in-person clinical rotation (visiting Subl)
  - Interest assumed in these scenarios
  - Avoid conflict with home institution
- Opt-out option for Programs, optional for applicants



Welcome to the otolaryngology interview preference signaling program. This is the official preference signaling program developed by academic otolaryngology organizations:

- Otolaryngology Program Directors Organization (OPDO)
- Society of University Otolaryngologists (SUO)
- Association of Academic Departments in Otolaryngology (AADO)

Development input was also done in conjunction with key stakeholder organizations:

- Association of American Medical Colleges (AAMC)
  - Group on Student Affairs (GSA) the Committee on Student Affairs (COSA)
  - · Electronic Residency Application Service (ERAS)
- National Resident Matching Program (NRMP)

This process is completely voluntary for applicants. We hope applicants will find the program useful to facilitate putting interested applicant with interested programs. If there are any questions, please feel free to inquire using the "contact us" link. Explore this website for more information about the process.

#### Learn More



How Does Signaling Work?
Watch our video to learn more about the signaling process



How Do You Submit Signals

Watch our video to learn how to submit signals



Guidance

Applicant and program considerations on signaling



requently Asked Questions

Get answers to frequently asked questions



Applicants
Submit Your Signals

Programs
Attest to the Code of Conduct

Programs
Opt-Out of the Signaling Program

Contact Us
Submit Questions or Feedback

#### Program Code of Conduct:

- Programs shall NOT disclose identification of applicants who have signaled.
- Programs shall NOT ask interviewees where they have signaled.
- Programs shall NOT disclose the number of signals they have received

# Signaling Messages

- Lack of a Signal is not a Signal
- Signals should be used for making interview decisions, NOT making rank list decisions
- Programs should not overvalue signals do not completely substitute applicant preference for program preference
- Applicants should target programs at which they will be competitive

# Signaling Implementation Process – Stakeholder Engagement

- Groundswell of support Prior OPDO Chairs and PD colleagues
- Approval from the "Boss" AADO meetings
  - Discussion of legal and practical impacts of implementation
- Development of signaling process and rules
- Student focus groups and forums
- AAMC, NRMP, ERAS engagement and approval
- GME Community Med School Deans

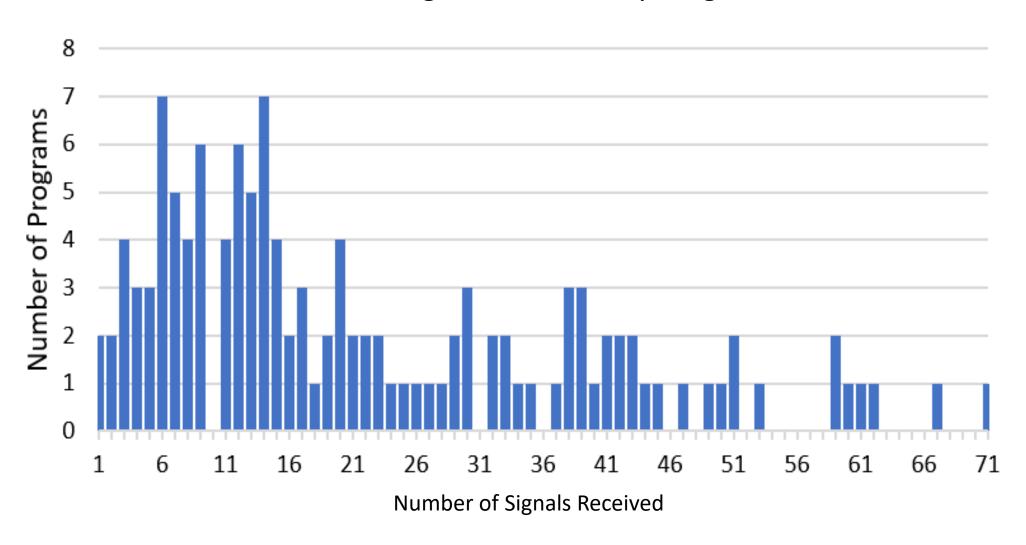
#### OTOMATCH2021

- 632 applicants
- 559 applicants in Match
- 454 US MD Srs in Match
- 350 positions
  - 0 unfilled

#### **ENTSIGNALING2021**

- 632 applicants
- 558 sent signals
- 100% program participation

#### Number of Signals Received By Programs

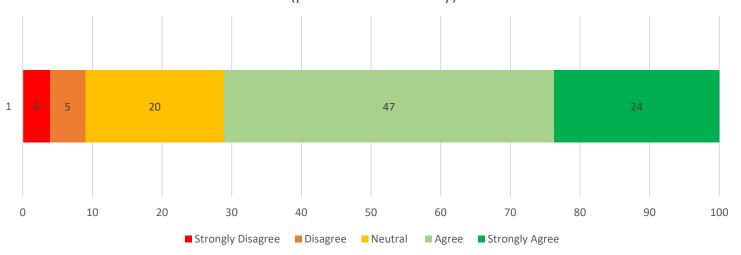


### Goals of Signaling

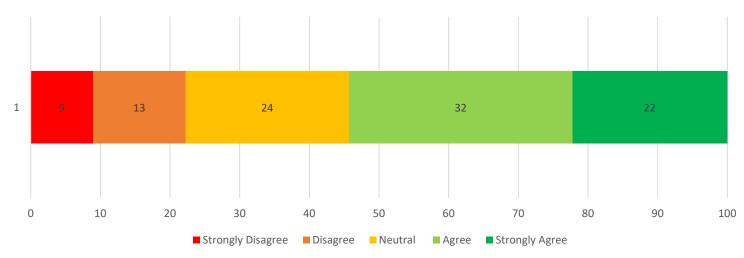
- Provide applicants with special attention at programs of particular interest
- Remove inappropriate perception of disinterest
  - Geography bias
- Improve efficiency of the interview process
- Improve distribution of interviews

	STRONGLY DISAGREE	DISAGREE	NEITHER AGREE NOR DISAGREE	AGREE	STRONGLY AGREE	TOTAL
Signaling allows applicants to be noticed by the programs in which they have the most interest.	2.16% 5	6.90% 16	12.07% 28	51.29% 119	27.59% 64	232
Signaling prevents programs from dismissing applicants due to a lack of perceived interest.	5 <b>.</b> 17% 12	8.19% 19	19 <b>.</b> 83% 46	40.09% 93	26 <b>.</b> 72% 62	232
Signaling promotes a more even distribution of interview offers to residency applicants.	6.90% 16	16.81% 39	46.98% 109	18.97% 44	10.34% 24	232
Signaling improves the efficiency of the application process	6.90% 16	12.50% 29	28.02% 65	35.78% 83	16.81% 39	232
Signaling is an equitable/fair process.	4.31% 10	6.03% 14	20.26% 47	44.83% 104	24.57% 57	232
Signaling lessened the anxiety of the application/interview process for me.	22.84% 53	25.86% 60	22.84% 53	19.40% 45	9.05% 21	232
Signaling benefits programs.	1.29% 3	3.02% 7	15.09% 35	45.26% 105	35.34% 82	232
Signaling benefits applicants.	5.60% 13	6.90% 16	24.57% 57	41.38% 96	21.55% 50	232
Overall, I was satisfied with signaling.	3.88% 9	5.17% 12	19.83% 46	47.41% 110	23.71% 55	232

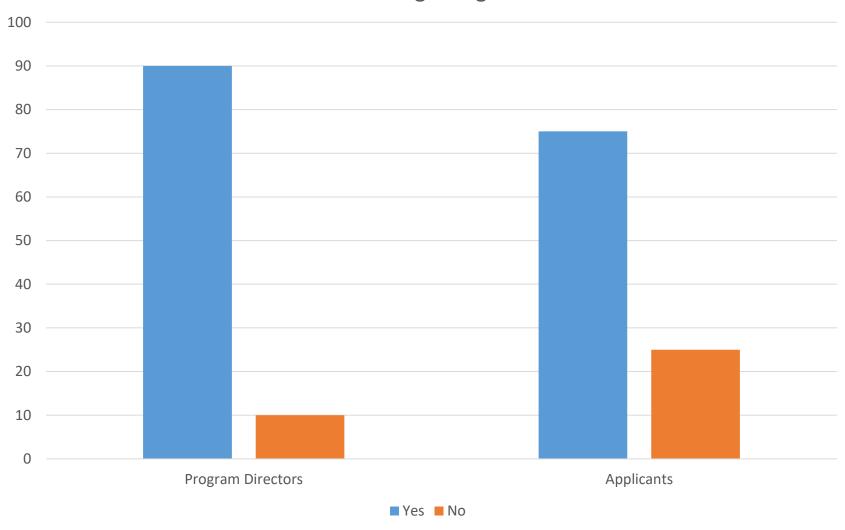
APPLICANT: Overall, I was satisfied with signaling (pre-interview survey)



APPLICANT: Overall, I was satisfied with signaling (post-interview survey)



#### Continue with Signaling Next Year?



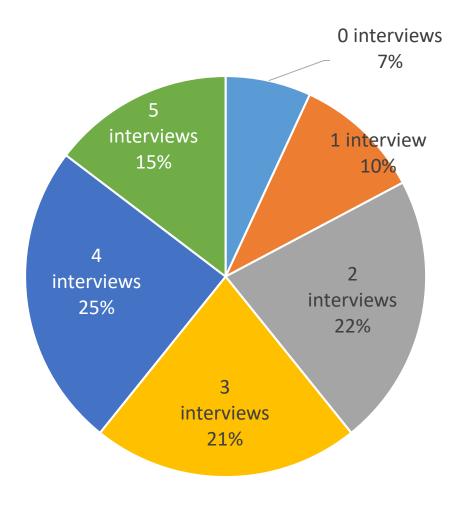
# How Did Programs Use Signals?

As a screening tool, before application review	26.09%
Incorporated into initial application review/algorithm	52.17%
Interview invitation sent to every applicant that signaled.	4.35%
Signal required for interview invitation	1.45%
As a tie breaker for interview list	46.38%
Used after interviews to develop rank list	15.94%
Did not use them	4.35%
Other (please specify)	8.70%

# Impact of Signals? (n=234)

- 93% of applicants received an interview offer from at least one program they signaled.
- 34 (15%) applicants received interviews at all 5 programs to which they signaled
  - Only 9 (26%) received interviews at the 6<sup>th</sup> program they would have, but were unable to, signal
- 57 (25%) applicants received interviews at 4 of 5 signaled programs
  - Only 16 (28%) received interviews at the hypothetical 6<sup>th</sup> program

#### Number of interviews received from signaled programs



#### Comments

- Great! Thanks! Love it!
- Don't know how programs use signals, if at all. There is no transparency; there is no uniform use of signals
- Worried about not getting an interview from un-signaled programs
- Too few, too many signals
- This is sham reform. Gaming of system. Benefits programs only.
- Would rather see application cap
- Would like to see an interview cap

### Future of Signaling

- Ideal Number of Signals
- Application or Interview Cap? In addition to or as a substitute?
- How can we better provide applicants with information to make signaling decisions?
  - Understanding competitiveness of your application
  - Learning about program culture, academics, clinical experience
  - Information about how Programs use Signals
- Incorporation into the formal application process?