Transitions Pilots

OPDA Fall Meeting
October 22, 2021
Transforming the UME to GME Transition for Obstetrics and Gynecology
“Right Resident, Right Program, Ready Day One”
Personal Priorities in Transition

- Informed self-assessment
  - EPAs, milestones, program input
- Individualized learning plan
- Educational resources via GCEP
- Conversation with residency program
- Readiness
- Safety
- Generalizable lessons for programs
NYU Transition to Residency Advantage Goals

To improve the transition to residency through self-directed, learner-specific support accelerates the path to competence and mastery, and address factors that contribute to stress and burnout.

1. Train a **cadre of skilled GME Bridge Coaches** who will oversee the transitional period and eliminate the discontinuous silos of UME and GME.

2. Create a **learner-driven transition across the UME-GME continuum** that supports aspirational goal-setting and focuses on individual growth.

3. Assess the impact of TRA **at the individual learner, GME program, and health system levels**.
NYU Transition to Residency Advantage: A Learner-Driven Transition from UME to GME Supported by Coaching

March: Post-Match Meeting
• All NYU Students and UME coaches

April-May: Warm Handoff Meeting
• Students/UME and GME Bridge Coach

June: Virtual Hello Meeting
• Incoming interns in TRA programs

Q1: July-Aug
• Self-assessment using Life-Map Exercise

Q2: October
• Responding to Feedback/Setting goals

Q3: December
• Strengths assessment

Q4: February
• Visioning - 3 month plan
• “I had a great experience with an incoming intern and using the life timeline- I got to some strengths of hers I don't think I would have without the exercise.”

• “Recently I met with a medical student who is struggling to decide which field of medicine to go into. Even though I had a definite opinion on which of the two fields she was deciding on would be better I really really tried not to give my opinion at all and instead asked leading questions to have her come up with what it was in her future career that would be helpful and also identify what are her strengths and how would those best be used in each of the fields.”

• “Several of my housestaff have really taken me up on becoming more intentional in how they approach developing their own curriculum through their residency. Watching them push themselves through residency helping to keep their mindset on their learning, education and growth has been very rewarding.”

• “I feel that a great use of coaching in the transition is really about building the relationship so that the new interns are comfortable reaching out for help.”
Dedicated pathways
To reduce health disparities by transforming the workforce – to be better prepared, more equitably distributed and more deeply connected to underserved communities.
Fully Integrated Readiness for Service Training (FIRST):  

Enhancing the Continuum from Medical School to Residency to Practice
About ACE-PC

In partnership with Kaiser Permanente Northern California, and with support from the American Medical Association's Accelerating Change in Medical Education Initiative, the UC Davis School of Medicine offers an innovative three-year MD pathway for students committed to primary care careers, the Accelerated Competency-based Education in Primary Care (ACE-PC) program. Rather than the traditional seven-year pathway to primary care practice (four years of medical school followed by three years of residency training), ACE-PC students complete their MD in 3 years equipped with the knowledge and skills to directly progress into a partner PC residency and enter primary care practice one year earlier than traditional students.

The development of ACE-PC has been guided by input from multi-disciplinary faculty representing undergraduate medical education, graduate medical education and employer perspectives. The program recruited its first class in 2014. Prospective students are evaluated using the same holistic review and Multiple Mini-Interview as traditional applicants. Once admitted to the traditional class at UC Davis, ACE-PC applicants complete a panel interview to assess fit, commitment to PC and academic readiness. The program is limited to 6-8 students of an entering class of 120. Each year there are 300-400 applicants. Historically over 60% of ACE-PC students are from communities underrepresented in medicine (URM) and 80% self-identify as disadvantaged on their AMCAS application.

Local News Features ACE-PC

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Facilitating Effective Transitions Along the Medical Education Continuum

A HANDBOOK FOR LEARNERS AND FACULTY DERIVED FROM CORPORATE COACHING

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Physicians’ powerful ally in patient care