Improving Transitions to Residency: An AAMC Update on Select Focus Areas

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OPDA Meeting, November 10, 2023
The UME to GME Transition to Residency (TTR)

Transition to residency is a “complex ecosystem involving many individuals and organizations.” The transition begins during the preclinical phase of medical school and extends until new residents enculturate into their GME context – new program and sponsoring institution.
AAMC Data & Programs Support the Advancement of Academic Medicine

**Advocacy**
- More GME positions
- Dobbs SCOTUS
- Race conscious admissions SCOTUS
- Student Financial Aid
- Pathway Programs
- DACA

**Medical Education Initiatives**
- Foundational Competencies for UME
- QIPS, Telehealth & DEI Competencies
- Transition to Residency & MSPE
- Pedagogy
- Interprofessional Education
- Faculty Development

**Data & Reports**
- SCOPE
- AAMC Resident Readiness Survey Program
- Year Two Questionnaire (Y2Q)
- Matriculating Student Questionnaire
- Physician Specialty Data Report
- Report on Residents
- Specialty Workforce
- GMETrack
- Faculty Roster
- Faculty Salary Report
- Graduation Questionnaire

**Service Programs**
- Medical College Admissions Test (MCAT)
- American Medical College Application Service (AMCAS)
- Visiting Student Learning Opportunities (VSLO)
- Electronic Residency Application Service (ERAS)

**Publications**
- Academic Medicine Journal
- MedEdPORTAL Journal
- Curriculum Reports
- Data Snapshots
- Various Topical Reports

**Student Resources & Programs**
- Careers in Medicine (CiM)
- Residency Explorer (with 8 other organizations)
- FIRST (financial guidance)
- Virtual medical school & specialty fairs

**Diversity in Medicine**
- Summer Health Professions Education Program
- K-12 Educational Initiatives and Summit
- Pathway Programs and Outreach
- Disability in Medical Education
- Specialty-specific demographic reporting across the continuum
AAMC Strategic Action Plans

1. Strengthen the Medical Education Continuum for Transformed Health Care and Learning Environments
2. Extend the AAMC’s Leadership Role in Helping Students Progress Through Their Medical Professional Journey
3. Equip Medical Schools and Teaching Hospitals and Health Systems to Become More Inclusive and Equitable Organizations
4. Increase Significantly the Number of Diverse Medical School Applicants and Matriculants
5. Strengthen the Nation’s Commitment to Medical Research and the Research Community
6. Enhance the Skills and Capacity of People in Academic Medicine
7. Improve Access to Health Care for All
8. Advance Knowledge Through the AAMC Research and Action Institute
9. Position the AAMC as a National Leader in Health Equity and Health Justice
10. Adapt the AAMC to the Changing Needs of Academic Medicine
The AAMC’s Guiding TTR Principles

- Balance the needs of key stakeholder groups
- Provide learners with a positive, personalized experience as they navigate the transition to residency, recognizing their investment and vulnerability in this process.
- Ensure reliable, efficient solutions and intuitive experiences for residency programs, as they are the primary driver in determining both the criteria and processes by which learners will be evaluated.
- Analyze the underlying and proposed structures, systems, and processes of each innovation effort to ensure that it promotes positive impacts for stakeholders.
- Focus on improving the process for learners, programs, and schools to strengthen well-being and minimize their financial burden in the transition to residency process.
Equitable and effective transition to residency that ensures optimal, culturally responsive, and safe patient care for all patient populations

- Improved learner development
- Innovative and intuitive selection and application tools
- Analytics and program/specialty data
- Safe, equitable, and inclusive training environments
Area 1: Improve Learner Development

All entering residents are better prepared for day 1 of US ACGME accredited GME; Program leaders, faculty and staff are better prepared to welcome their new residents and provide optimal training to meet the need of all learners.
UGRC Theme: Outcome Framework and Assessment Processes

- Jointly define and implement a common framework and set of outcomes (competencies) to apply to learners across the UME-GME transition (UGRC-9)
  - Develop common assessment tools for progression of the competencies
  - Train faculty in assessment practices
- Recognize and mitigate bias (race, ethnicity and gender) in grading and assessment within the clinical learning environment (UGRC-10)
Defining & Aligning Foundational Competencies: Project Aim

Through an inclusive and iterative process, we will create a common set of national foundational competencies for use in undergraduate medical education programs in the U.S. that align horizontally among UME programs and vertically across the continuum of medical education.
Timeline

**Phase 1**

The three sponsoring organizations plan for the competency initiative and convene the multi-institutional advisory committee.

*September 2021 - July 2022*

**Phase 2**

Early feedback is gathered from more than 1,000 medical professionals, learners, patients and caregivers about foundational competencies and the implications of adopting common outcomes across undergraduate medical education.

*August 2022 - February 2023*

**Phase 3**

Working group develops foundational competencies for undergraduate medical education that align with graduate medical education. Iterative drafts are shared for public review and feedback.

*March 2023 - Early 2024*

**Phase 4**

Foundational competencies are distributed broadly and the community is invited to engage in collaborative efforts to adopt the competencies and use in local educational programs.

*Early 2024 and Beyond*
UGRC Theme: Educational Continuity and Resident Readiness

- Specialty specific resident assessment data auto fed back to medical schools through standardized process to enhance accountability and inform CQI of UME programs (UGRC-25)
- Foster positive coaching relationships to support the transition to residency (UGRC-27)
- Provide equitable specialty-aligned knowledge and skills training during final year in medical school (UGRC-28)
- Improve orientation to GME (UGRC-29)
Medical school participation in the 2022 Resident Readiness Survey

Total number of participating MD and DO medical schools

168 (89% of 188 eligible)

Total number of participating residency programs

2,385 (77% of 3,659 invited)

Total number of residents covered

14,461 (65% of 22,242)

During the transition to GME (0-6 months of PGY-1 year), did this resident meet overall performance expectations?

- 29.8% “exceeded”
- 67.1% “met”
- 3.1% “did not meet”
Overall readiness by specialty

“Other specialties” includes, for example, dermatology and radiology

During the transition to GME (0-6 months of PGY-1 year), did this resident meet overall performance expectations?

<table>
<thead>
<tr>
<th>Specialty</th>
<th>Exceeded overall performance expectations (%)</th>
<th>Met overall performance expectations (%)</th>
<th>Did not meet overall performance expectations (%)</th>
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<tbody>
<tr>
<td>Urology</td>
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<td>Otolaryngology</td>
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<tr>
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<td>Other Specialties</td>
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<tr>
<td>Internal Medicine/Pediatrics</td>
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<tr>
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<td>Internal Medicine</td>
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<tr>
<td>Anesthesiology</td>
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<td>78</td>
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</table>

NOTE: N = 14,347
Area 2: Safe, Equitable and Inclusive Training Environments

All learners feel welcome, safe, and valued in clinical learning environments (and in transition processes); biases, racism, and inequities are mitigated to ensure optimal learning within GME (and in transition processes)
UGRC Theme: Diversity, Equity and Inclusion

• Develop and disseminate recruitment practices to increase diversity across the educational continuum (UGRC-4)
• Faculty complete training regarding anti-racism and bias mitigation (UGRC-5)
Numerous publications and collections dedicated to teaching and assessing DEI competencies, including:

- Implicit bias training
- Active bystander interventions to address microaggressions
- Blended Curriculum to Improve Resident Physical Exam Skills for Patients With Neuromuscular Disability
- And more…
COD Collective Action Initiative

The Power of Collective Action:
Assessing and Advancing Diversity, Equity, and Inclusion Efforts at AAMC Medical Schools
NOVEMBER 2022

Sexual Harassment in Academic Medicine

Understanding and Addressing Sexual Harassment in Academic Medicine
Curated collections of resources describing why community engagement is necessary for promoting health equity and to guide our member institutions on their anti-racism and DEI journey.

Join the AAMC virtual community to access our new resource bundles!