THE RESIDENCY TRAINING CYCLE: ADVICE FOR A **SUCCESSFUL YEAR**

CHAPTER OVERVIEW:

- Residency training is cyclical in nature.
- Key themes and considerations are offered in an easy-to-reference timeline.

Residency training occurs in a cyclical fashion, beginning and ending at the same time each year. This chapter will distill the cycle and its recurring themes down to key points, which are organized by month. These tips should help the program leadership anticipate the most common or recurring issues.

BEFORE JULY

Get Organized

An organized approach is critical. Since many programmatic issues occur predictably each year, creating a detailed calendar helps the program director avoid starting projects late and may inform change based upon the previous year's experiences. Also consider keeping separate program director and program administrator calendars to provide checks and balances and ensure important deadlines are not missed.

Teach Residents the "Morale Cycle" of Physicians-in-Training

The resident morale cycle (Figure) is predictable. A residency program's "honeymoon" period usually lasts 2 to 3 months, fueled by resident energy, excitement about the current year, and desire to succeed and excel in a new role. As the year progresses and fatigue ensues, physician-in-training morale may begin to wane in the fall and winter months. Diminishing daylight hours and worsening weather patterns may compound this morale decline.

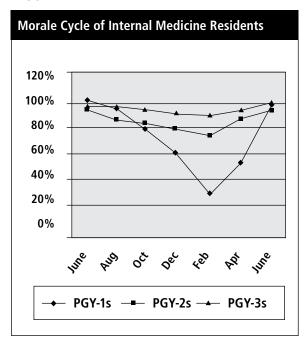
Internal medicine residents have little control over their lives because they have relatively fixed, busy schedules. Admission days and clinic days are hectic and unpredictable, further compounding a sense of lack of control. Morale may reach its lowest point during the most important phase of a residency's life cycle, the recruiting season. Some residents have minimal dips in morale depending upon their maturity, stability, quality of their personal lives, and level of support they receive

from colleagues, chief residents, and program faculty and staff.

To deal with this expected decline in morale, the program director must first educate residents about the morale cycle. Knowing what to expect will provide residents with some sense of control. Post-graduate year (PGY)-1 residents arriving in June may expect the first day to reflect the remainder of the year and, in particular, that the high morale and excitement will persist throughout the year. Most PGY-1s have never dealt with the rigors of training and may have never held a full-time job. Educating residents about the "big picture" may improve their ability to cope with their new situation, ultimately allowing the program to run more smoothly.

Of course, poor resident performance may be beyond the normal morale decline. When a resident is struggling more than his or her peers, the program

FIGURE



director should consider possible personal factors, such as marital problems, family illness, or underlying depressive disorders, that may be impacting the resident's performance (see "A Systematic Approach to Residents with Problems" in Section IV for further information). A resident will not often raise these "external" factors, as he or she may view them as irrelevant to clinical performance or may be embarrassed by their implications.

Programs may want to provide opportunities for residents to feel more in control of their training. Possibilities include inviting residents to participate in curriculum planning; scheduling group feedback sessions with chief residents, faculty, and program directors; holding annual retreats focused on programmatic improvement; and conducting anonymous surveys of residents to monitor morale and identify areas for improvement. Residents' suggestions and complaints should be treated with respect, and due consideration should be given to each issue brought to the program leadership.

JULY

Build Community

The program director should plan to be out on the wards, intensive care units, or in clinics at least one-half the time. This time of year is good to fulfill ward attending responsibilities or follow different teams each day on work rounds. The visibility of the program director, associate program directors, chief residents, and program administrators helps build a sense of community and reinforces the concept that performance is being closely and supportively monitored.

AUGUST

Observe Resident Performance and Consider Remediation

As residents with varying skill levels begin the year, problems often arise. Some residents simply need time to adjust to their new responsibilities; however, others require remediation. Many residents will struggle with the challenges of transitioning to physician leader and manager. Some PGY-1 residents may need additional time to complete standard processes, such as seeing a stable patient or writing an appropriate progress note. Avoid initiating remediation too early and without a methodical investigation because the sense of being closely scrutinized can undermine a resident's self-confidence, sometimes making matters worse. The

program director should encourage chief residents to supportively coach residents through these times, becoming directly involved only if it becomes clear that the resident's performance is outside the norm.

Monitor the Fellowship Application Process

As more fellowships move their application process to a common form (ERAS Fellowships), program directors should remain up-to-date about changes to the process by monitoring the ERAS Fellowships website (www.aamc.org/students/erasfellow/start.htm).

Take a Vacation

The "honeymoon" period is probably the best time for the program director to slip away for a vacation.

SEPTEMBER

Begin Planning the Program's Recruitment Season

It is never too early to start planning for the most crucial time for every residency program—recruitment season. The program director should begin by meeting with the program administrator to carefully review the program's website for accuracy and aesthetic value. In addition, the program director should survey PGY-1 residents for their feedback about the most recent recruitment process.

Program directors recruit in an applicants' market, as student interest in internal medicine has declined (as compared to previous decades). Medical school graduates are savvier than ever, frequently taking the time to meticulously review program websites. Program websites often provide a first impression and portal of entry into prospective programs. The program director should encourage residents and faculty to review the program's website and provide suggestions for improvement. Never consider your program's website to be a finished product. The program's website is a reflection of the program itself. If the website is not easy to navigate or is outdated, prospective applicants may conclude that the program does not care about the applicants or, even worse, about its residents. Applicants appreciate a "Frequently Asked Questions" section, which should be updated early in the fall to reflect questions asked during the previous interview season. At a time when fellowships are quite popular, it is also important to list where residents have secured positions in previous years and where non-fellowship bound residents have obtained jobs. It may also be helpful to list the resident scholarly projects from recent years;

applicants want to know whether they will have an opportunity to perform research or publish.

OCTOBER

Hold the First of Two Meetings with Each Resident

Program directors should prepare a mental checklist of issues to cover with each resident, including reviewing evaluations and procedure logs, discussing career advice, and soliciting the resident's feedback on the program. To ensure a successful discussion with each resident, ample time should be allotted for these meetings. The program director should keep a list of feedback suggestions and try to follow up on them within 2 to 4 weeks. Residents appreciate the program director's interest and many of these ideas will help the program's future development.

Hold Resident Retreats

Retreats serve many purposes including a brief respite from the hospital; an opportunity for bonding with colleagues and program faculty and staff; and a time to participate in program development. At the very least, retreats are a way of expressing appreciation for the work residents do within the program.

If the program does not have adequate funds to rent space for a retreat, the program director should consider having a barbecue at a local park or faculty home followed by a group activity, such as bowling or hiking. In general, program directors should "disappear" at some point in the day so that the residents can relax and get to know each other better. While it is good for residents to spend time with the program director, the program director is still their "boss."

Survey the Residents

A formal, anonymous survey can provide critical feedback about the residency program, sometimes revealing potential "cracks" in program infrastructure. By using a formal survey, topics that would be difficult to discuss in person (e.g., how high the resident ranked the program in the match, overall level of satisfaction) can be addressed in confidence and provide an important vehicle for change.

Attend the APDIM Fall Meeting

APDIM fall meetings provide an invaluable opportunity to learn about new Review Committee for Internal Medicine requirements and a chance to meet other program directors. APDIM meetings also afford

program faculty and staff the time to reflect on the bigger picture issues in residency training. The program director should set a goal of returning from the meeting with at least 2 or 3 new ideas for improvements to the training program.

NOVEMBER

Be Prepared for Complaints from Residents and Faculty

By now the "honeymoon" period of the program has ended. From the perspective of residents, there is no "light at the end of the tunnel." The program director should not take complaints as a personal criticism, but instead listen respectfully to the comments.

When a faculty member complains about a resident, the program director should answer 2 questions before taking any action:

- » Has the faculty member given the resident feedback directly about the issue being raised?
- » Does the faculty member expect the program director to act on the complaint, or is he or she simply venting?

If the program director needs to meet with a resident as a result of a faculty complaint, it is important to remember that there are always 3 sides to every story—the faculty member's, the resident's, and what actually happened. It is the program director's duty to analyze the situation from every angle prior to drawing conclusions.

Download Deans' Letters and Begin Inviting Applicants for Interviews

Many programs wait until the dean's letters are available, but some programs offer interview invitations as early as October.

DECEMBER

Select Chief Residents

Based on the level of interest in these positions and number of residents applying for fellowships, the program director may choose to select the next year's chief residents. Each program has its own timeline and method for selecting chief residents. Some programs require residents to "apply" for the job and others simply invite the program director's nominee to take the job. Either way, the program director should take an anonymous poll of the residents and faculty prior to making this important decision.

Residents may have a different view of a potential candidate than the program director or the faculty. While a chief resident does not have to be the smartest resident, he or she should be a respected clinician, teacher, and leader.

JANUARY

Begin Rank Order List Entry

The general rule when ranking candidates is: "be very careful about those ranked at the bottom of your list." The program director should review his or her selections for a few days before final certification of the list.

Remember the Residents (Despite the Rigors of the Interview Season)

Winter is an especially difficult time in the morale cycle of the residency program. Residents are only halfway through the year, the weather is generally bad, and they often come to work before sunrise and leave after dark. While the program director is sequestered in his or her office interviewing applicants and reviewing files, residents may feel that their hard work is going unnoticed or that the program director does not care about them anymore. While a hectic schedule will prevent the program director from attending on the wards, the program director should try and drop in on noon conference or walk rounds through the hospital in the late afternoon. During this time, it is important that the program director take every opportunity to let residents know he or she is available; otherwise, they may let issues "fester" for fear of bothering the program director during the recruiting season.

FEBRUARY

Prepare for Programmatic Changes that will Occur in June

In general, even if changes are positive for residents, it is not a good idea to institute them during the middle of the academic year. While change may be good for a program, residents have trouble with changes that disrupt their expected routine, a routine that allows them to feel some small semblance of control over their lives. Whenever possible, programmatic changes should be implemented at the beginning of the new academic year.

Use the Results of the IM-ITE to "Light Fires"

The Internal Medicine In-Training Examination (IM-ITE) provides helpful objective data about a

resident's strengths and weaknesses within the medical knowledge domain. It also helps to identify residents in danger of failing the American Board of Internal Medicine (ABIM) certification exam. An individual will not always grasp the significance of IM-ITE results; therefore, the program director should review the results with each resident. Some programs administer this exam during all 3 years of training to monitor progress. Program directors should keep in mind that providing full day coverage for residents taking the exam can be complicated.

Take a Vacation

The other time of the year a program director should consider taking a regular vacation is immediately after submitting the rank list to the National Residency Matching Program (NRMP)—the misery of reviewing applicant files finally ends and the program's fate is cast into the winds of the match.

MARCH

Analyze Match Results and Consider Sending a Post-Match Survey

While post-match surveys can provide the program with vital information about the program, response rates from applicants tend to be low. An alternative method is an anonymous end-of-interview-day survey, which tends to have a high response rate. Results can be used in "real time" to improve the interview day process.

Re-Establish Rapport with Residents

Residents understand how hard the program director has been working the past several months; however, they still appreciate the program director's interest and attention. The program director should try to drop in on work rounds or attending rounds and try to attend noon conferences.

APRIL

Hold the Second of Two Meetings with Each Resident

The program director should spend time at this meeting carefully reviewing the anonymous evaluations from the previous 10 months and reviewing resident career plans. The program director should make sure that fellowshipbound residents understand the various deadlines. For residents applying for jobs, the program director should spend time discussing each job possibility in detail.

Attend the Annual APDIM Spring Conference

APDIM spring conferences are an excellent opportunity to learn about issues affecting academic medicine and all aspects of internal medicine training as well as an opportunity to network with fellow program directors. APDIM also offers a chief residents meeting as part of the spring conference. For physicians entering their chief residency year, this meeting offers workshops on subjects such as evidence-based medicine, giving effective feedback, teaching residents, and program administration.

Plan Graduation

Graduation from residency (or preliminary internal medicine internship) is a milestone in the lives of most physicians. The program director should ensure that graduation night is carefully choreographed and that he or she knows exactly what to say about each graduate in advance. The program administrator will likely be well ahead of the program director on location planning and catering, but the program director should check-in periodically with the administrator to make sure things are going as planned.

MAY

Know the Program Director's "Morale Cycle"

The program director should anticipate the time of year where his or her personal morale may dip. Working with overexerted and overtired residents is an intense but rewarding experience but a noticeable morale dip may occur in the mid- to late-spring. Senior residents have outgrown the training program and are looking forward to the next phase of their careers, interns are generally tired of being interns, and the program director has expended a great deal of energy navigating the grueling recruiting season. As with residents, program directors may feel an improved sense of control if they are familiar with their own morale cycle. However, sometimes these feelings cannot be understood until a program director has actually transitioned through them a few times. In other words, knowledge of the personal morale cycle comes from experience as a program director.

JUNE

Bring Closure to the Academic Year

In the midst of preparing for PGY-1 residents, June is the month to bring closure to the current year. Summative assessments and ABIM forms must be

completed. This month is the last chance to bring closure to the resident relationships that have formed over the past 1 to 3 years. The program director should make sure that each graduating resident has a plan for the coming year, whether it is fellowship, job, or travel.

The issue of terminal leave should be addressed in a clearly written program policy. Graduating residents will be leaving town for fellowships or jobs, and preliminary interns are anxious to start their chosen careers. Allowing residents to save vacation to the very end of the year to move sounds like a good idea; however, those residents left behind may resent having to cover for their departed colleagues. Some programs solve the problem by refusing all vacation requests in June; other programs limit the number and kind of rotations in which terminal leave is allowed. Few programs have the resources to grant unlimited requests for terminal leave. A program director should review the terminal leave policy with the residents early and often. As a means to limit the number of residents granted terminal leave, consider a lottery system or a resident-led working group to help mediate these requests.

Prepare for the New Academic Year

The program director should carefully plan welcoming comments for the new intern class. It is important to create a comfortable environment and articulate the program's leadership style as well as expectations at the outset.

CONCLUSION

Despite differences between internal medicine residency training programs, themes are cyclical. Although unexpected events occur throughout the year, anticipating the usual patterns will make a residency program run smoother and help improve job satisfaction for program faculty and staff.

AUTHOR

Paul B. Aronowitz, MD, Program Director Department of Medicine, California Pacific Medical Center

ACKNOWLEDGEMENT

The author is indebted to Lawrence G. Smith, MD, Henry J. Schultz, MD, and Mark A. Gennis, MD, for some of the ideas presented in this chapter. He is also greatly indebted to Mark C. Henderson, MD, for his mentorship, support, and thoughtful editing of this chapter.