



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



AMA Reimagining Residency Initiative: *NYU Transition to Residency Advantage*

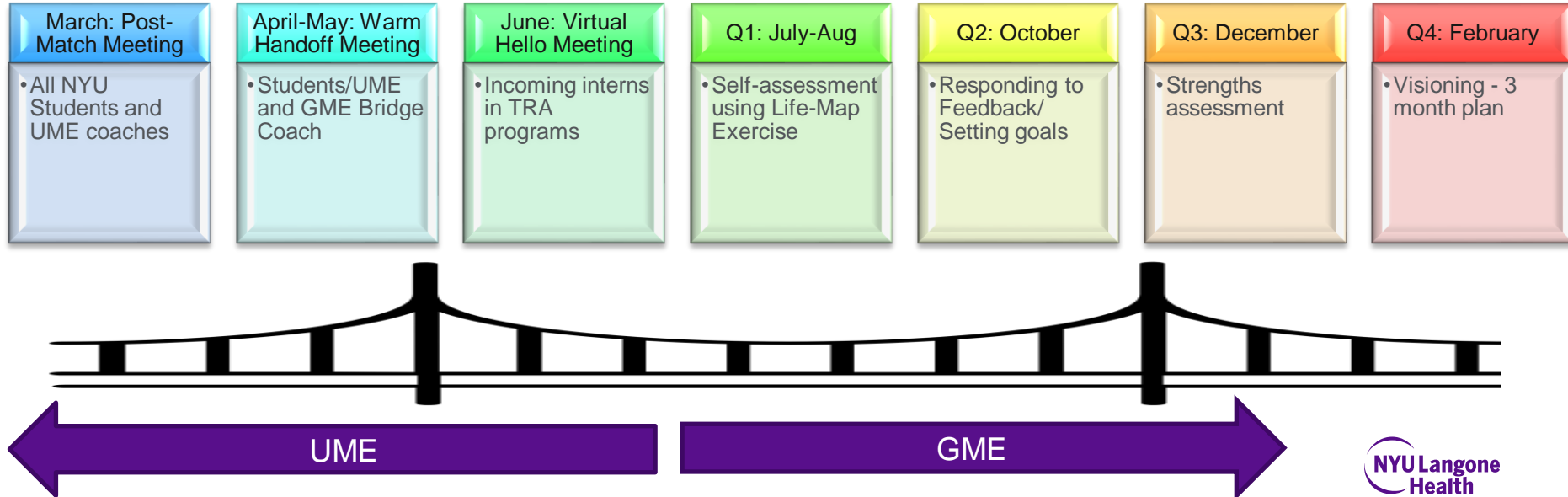


NYU Transition to Residency Advantage Goals

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



- *“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

COMPADRE: California Oregon Medical Partnership to Address Disparities in Rural Education and Health



School of
MEDICINE

George Mejicano, MD, MS

Senior Associate Dean for Education

Joyce Hollander Rodriguez MD

Program Director, Cascades East Family Medicine Residency

Regional Associate Dean Rural Campus @ Klamath Falls

**UCDAVIS
HEALTH**

**SCHOOL OF
MEDICINE**

Tonya Fancher, MD, MPH

Associate Dean Workforce Innovation and Community Engagement

Mark Henderson MD

Associate Dean of Admissions

Mark Servis MD

Vice Dean of Education



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SCHOOL OF MEDICINE



UNC
HEALTH CARE

Fully Integrated Readiness for Service Training (FIRST):

Enhancing the Continuum from Medical School to Residency to Practice

M.D. Program

UC Davis Health / School of Medicine / M.D. Program / Accelerated Competency-based Education in Primary Care - ACE-PC

Community Health Scholars

Program Comparison

Admissions

Curriculum

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Tribal Health Program -

COMPADRE

Related Resources

Admissions

Curriculum

Financial Aid

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 (UJM) and 80% self-identify as disadvantaged on their AMCAS application.

Local News Features ACE-PC





Facilitating Effective Transitions Along the Medical Education Continuum

A HANDBOOK FOR LEARNERS AND FACULTY DERIVED FROM CORPORATE COACHING

Sara Lamb, MD
Senthil Kumar Rajasekaran, MD, MMHPE

Accelerating Change in Medical Education Consortium



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Physicians' powerful ally in patient care