



AAIM Response to InCUS Recommendations

www.im.org/InCUS

July 31, 2019



Welcome!

Moderator
Chris Williams, MPH
Education and Research Manager

Welcome!

AAIM's response to InCUS recommendations at im.org/InCUS

All attendees will be muted for the duration of the webinar.

Please submit your questions using the Q&A box. We will answer them at the end.

A recording of today's webinar will be available on im.org in mid-August.

Presenters



Lisa L. Willett, MD, FACP

Professor of Medicine, Program Director and Vice Chair for Education, Department of Medicine, University of Alabama at Birmingham School of Medicine

AAIM Roles

Member, AAIM Board of Directors
President, APDIM Council
Past Chair, APDIM Survey Committee
Member, AAIM InCUS Response Group



Jeffrey LaRochelle, MD, MPH

Assistant Dean of Medical Education
Associate Professor of Medicine,
Department of Medical Education
UCF College of Medicine
Health Science Campus at Lake Nona

AAIM Roles

Member, AAIM InCUS Response Group
Member, CDIM Council
Chair, CDIM Survey and Scholarship Committee
Member, AAIM Research Committee

Presenters



Katherine Chretien, MD

Associate Dean for Student Affairs
Professor of Medicine
George Washington University
School of Medicine and Health
Sciences

AAIM Roles

Member, AAIM Board of Directors
President, CDIM Council
Member, CDIM Program Planning
Committee
Member, AAIM InCUS Response
Group



Steven V. Angus, MD

Associate Professor of Medicine,
Assistant Dean for Graduate Medical
Education, and Designated Institutional
Official at University of Connecticut School
of Medicine, Farmington, CT

AAIM Roles

Chair, AAIM Medical Student to Resident
Interface Committee
Chair, APDIM USMLE Scenario Work Group
Member, Competency-Based Education and
Training Task Force

Today's Topics

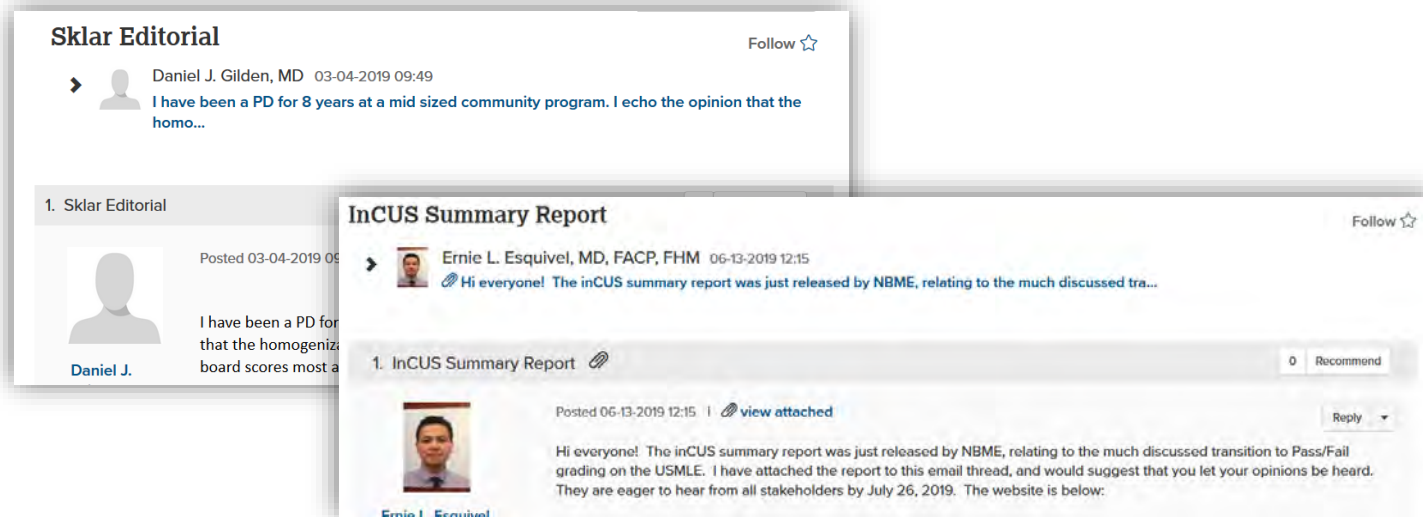
- I. Review Invitational Conference on USMLE Scoring (InCUS) timeline
- II. Discuss development and highlights of AAIM's response
- III. Discuss APDIM and CDIM USMLE work groups
- IV. Discuss AAIM's initiatives on transition issues
- V. Q&A

Review of InCUS Timeline

- **February 2019** - AAIM submits statement during comment period
- **March 2019** - InCUS takes place
- **April 2019** – AAIM hosts NBME at Academic Internal Medicine Week
- **June 2019** - NBME releases preliminary recommendations
- **July 2019** - AAIM responds to InCUS recommendations

Review of InCUS Timeline

Alliance members engaged in robust online discussion throughout the process



Sklar Editorial Follow ☆

> Daniel J. Golden, MD 03-04-2019 09:49
I have been a PD for 8 years at a mid sized community program. I echo the opinion that the homo...

1. Sklar Editorial

Posted 03-04-2019 09:49

I have been a PD for 8 years at a mid sized community program. I echo the opinion that the homogenization of board scores most a

Daniel J.

InCUS Summary Report Follow ☆

> Ernie L. Esquivel, MD, FACP, FHM 06-13-2019 12:15
Hi everyone! The inCUS summary report was just released by NBME, relating to the much discussed tra...

1. InCUS Summary Report 0 Recommend

Posted 06-13-2019 12:15 | view attached Reply

Hi everyone! The inCUS summary report was just released by NBME, relating to the much discussed transition to Pass/Fail grading on the USMLE. I have attached the report to this email thread, and would suggest that you let your opinions be heard. They are eager to hear from all stakeholders by July 26, 2019. The website is below:

Ernie L. Esquivel

How Did the Alliance Respond to InCUS?

The Alliance formed three work groups with distinct charges

- AAIM response group, APDIM USMLE work group, and CDIM USMLE work group

AAIM Response Group

- Composed of board and council leaders
- Drafted response that became AAIM statement
- Integrated perspectives from discussion forums, USMLE work groups, and members

AAIM Response Group – Deliberation

- **Deliberation**
 - Weekly calls from 6/18 – 7/17
 - Early agreement
 - Support that changing USMLE in isolation and without something in place will be detrimental
 - USMLE is not optimal
 - More data points needed
 - International medical school engagement is crucial
 - Discussion/challenges
 - Acceptability of specific proposals
 - Engaging international medical schools
 - Validated tools/assessments

AAIM USMLE Response Group

Donna J. Astiz, MD
D. Craig Brater, MD
Shobhina Chheda, MD
Katherine Chretien, MD
Harley P. Friedman, MD
Jeffrey LaRochelle, MD
Marty Muntz, MD
Debra L. Simmons, MD
Emily A. Stewart, MD
Lisa L. Willett, MD

Highlights - AAIM Response

1. InCUS Recommendation #1 – Reduce USMLE overemphasis

AAIM Response

- Areas of consensus
 - USMLE Step 1 not an optimal tool
 - Overemphasis detracts from other vital learning
 - Lack of alternative objective metrics
 - Patients and society most important stakeholders

- Member group perspectives
 - Clerkship directors and other student educators
 - Residency and fellowship program directors

Highlights - AAIM Response

2. InCUS Recommendation #2 – Accelerate USMLE research

AAIM Response

- Limited data about USMLE scores & residency performance, clinical outcomes
- Further research in isolation not useful
- Need to explore alternative metrics beyond medical knowledge alone

3. InCUS Recommendation #3 – Minimize racial differences

AAIM Response

- Agreed, assess racial bias and access to test prep
- More research need involving socioeconomic factors

Highlights - AAIM Response

4. InCUS Recommendation #4 – Convene cross-organizational panel

AAIM Response

- Comprehensive plan is imperative, innovation needed
- Alternative match strategies
- Validated metrics for other core competencies
- More standardized options to enable holistic review in ERAS
- Non-disclosure of remediation and failures erodes trust
- Direct observation of students needed but challenges
- Explore competency-based standards for MSPE
- Revision and standardization of the IM DOM letter
- International graduates require special consideration

APDIM USMLE Scenario Work Group

Charge

- Identify anticipated consequences to IM residency programs due to a change to a non-numeric score for USMLE reporting
- Propose modifications to current tools or development of new tools assuming some change in non-numeric USMLE score reporting

APDIM USMLE Group

Richard L. Alweis, MD
Steven Angus, MD, *Chair*
Denise M. Keyser
Stephen J. Knohl, MD
Sapna Patel Kuehl, MD
Anne G. Pereira, MD
Jaya M. Raj, MD

APDIM USMLE Scenario Work Group

Unintended Consequences of Pass/Fail Score Reporting

- Increased resource utilization
- Increased levels of stress and burnout among students, PDs and program administrative staff
- Limits diversity
- Disadvantages IMGs
- Disenfranchises basic science educators
- Negative impact on patients

Working on fully developing recommendations that include: changes to the Match, enhancing ERAS, exploring IM-specific assessments, and developing IM competency-based handoff

Final report to AAIM Board in August 2019

CDIM USMLE Scenario Work Group

Charge

- Assess impact to IM clerkships & subinternships
- Identify standardized metrics to share with IM PDs as part of the student application process for IM residency
- Identify barriers to sharing information
- Assess how to increase internal and external collaboration

CDIM USMLE Group

Sonia Ananthakrishnan, MD
Chayan Chakraborti, MD
Paul R. Chelminski, MD
Saumil M. Chudgar, MD
G. Dodd Denton, MD
Heather Harrell, MD
Andrew R. Hoellein, MD
Sherine Salib, MD

CDIM USMLE Scenario Work Group

Background

- Pre-clerkship attendance hovering at ~30%
 - Curriculum driven by Step 1 content
 - De-values competencies outside medical knowledge
- ~90% of CDs concerned the NBME distracts from patient care
 - ~50% are reducing contribution to final grade
 - Removing as criteria for Honors

Current Perspective

- Majority of CDs agree with need for a change in USMLE score reporting
 - No consensus on how
 - Should not occur in isolation
- Majority of CDs advocate for reporting individual assessment components
 - Agreement on standardized reporting formats
 - Open to developing new standardized assessments

CDIM USMLE Scenario Work Group

Next Steps

Developing recommendations for Board consideration
in August 2019

- Literature review of assessment tools
 - Clinical reasoning
 - Interpersonal and communication skills
 - H&Ps
 - Progress notes
- Curate validated assessment tools for competencies
- Explore passport for GME

AAIM Initiatives on Transition and Intern Preparedness

Medical Student to Resident Interface Committee (MSRIC)

- Pilot of revised sub-internship curriculum (*Journal of General Internal Medicine*, July 2019)
- Published & forthcoming research on PD screening practices; Accepted article in *Academic Medicine*
- AAIM Interview Scheduling Guidelines
- AAIM Interview and Post-Interview Communication
- Stakeholder Engagement

AAIM Perspectives

AAIM is the largest academically focused specialty organization representing departments of internal medicine at medical schools and teaching hospitals in the United States and Canada. As a consortium of five organizations, AAIM represents department chairs and chiefs; clerkship, residency, and fellowship program directors; division chiefs; and academic and business administrators as well as other faculty and staff in departments of internal medicine and their divisions.

Drivers of Application Inflation: A National Survey of Internal Medicine Residents



Steven V. Angus, MD,¹ Chris M. Williams, BA,² Brian Kwan, MD,³ T. Robert Vu, MD,⁴ Linda Harris,⁵ Marty Muntz, MD,⁶ Anne Pereira, MD, MPH⁷

¹Department of Medicine, University of Connecticut School of Medicine, Farmington, Conn; ²Alliance for Academic Internal Medicine, Alexandria, Va. and Master of Public Health student, George Washington University School of Public Health.

AAIM Residency and Fellowship Interview and Post-Interview Communication Guidelines

- Develop program policy
- Train faculty and staff annually
- Provide statement to interviews

AAIM Perspectives

AAIM is the largest academically focused specialty organization representing departments of internal medicine at medical schools and teaching hospitals in the United States and Canada. As a consortium of five organizations, AAIM represents department chairs and chiefs, clerkship, residency, and fellowship program directors, division chiefs, and academic and business administrators as well as other faculty and staff in departments of internal medicine and their divisions.

AAIM Guidelines for Interview and Post-Interview Communication for Graduate Medical Education Recruitment

Richard L. Alweis, MD^{1,3}, Christopher M. Williams, MPH^{1,3}, Vera P. Luther, MD⁴, Debra L. Simmons, MD⁵, Richard Kopelman, MD⁶, Steven V. Angus, MD⁷, Solomon Liao, MD⁸, Sri Nagalla, MD⁹, Elaine A. Muchmore, MD¹⁰

¹ Associate Chief Medical Officer for Medical Education, Rochester Regional Health, Department of Medicine, University of Rochester, NY; ² Education and Research Manager, Alliance for Academic Internal Medicine, Alexandria, Va.; ³ Associate Professor, Bowman Gray School of Medicine of Wake Forest University, Winston-Salem, NC; ⁴ University of Utah, Salt Lake City, UT; ⁵ Vice-Chair for Ed-

Includes training templates, faculty development tools, moderator guide, role playing, attestation form

AAIM Initiatives on Transition and Intern Preparedness

CDIM Council

- Prioritizing development and curation of UME assessments
- Revising clerkship curriculum

Resident to Fellow Interface Committee

- Standardized program letter of evaluation for fellowship applicant

CBET Task Force

- Assessing implementation of competency-based education
- Evaluate handoff between UME and GME

Stakeholder Engagement

- NBME
- Internal Medicine Education Advisory Board Meeting
- (next meeting August 7)

Question and Answer

Please type your questions in
the Q&A box

Thank you! Questions?
educationandresearch@im.org



DENVER, COLORADO

2019 APDIM Fall Meeting

October 17-19, 2019

Sheraton Denver Downtown Hotel



ALLIANCE
for ACADEMIC
INTERNAL MEDICINE

Even Better Together