

# How new residents can ID learning gaps caused by COVID-19

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Even in typical times, the transition from medical student to resident physician is a challenging one. But, with physician training heavily disrupted for well over a year, the process is even more complicated than usual.

The topic of filling gaps that learners have experienced in order to smooth the transition between medical school and residency—with a fresh batch of residents weeks into their training—was recently addressed on an episode of the "AMA Moving Medicine" video-and-podcast series. Here are some key takeaways.

## Missing skills?

While the incoming class of residents did have portions of their clinical training disrupted early in the pandemic, medical schools worked to create valuable patient experiences to replace that time away from the clinical realm. Honing in on any missing competency requires deliberate review and open conversation.

"It is not about trying to uncover weaknesses or expose performance deficits," said Kimberly Lomis, MD, the AMA's vice president of undergraduate medical education innovations. "It's really talking about the variation in experience that is true from the clinical learning environment and helping the learner identify those areas and make a plan."

That said, panelists in the conversation did offer some anecdotal observations.

"They are really just lacking confidence that they've had enough experience to hit the ground running," said Meg Wolff, MD, MHPE, associate program director of the University of Michigan pediatrics residency program. "They have it. They have all the experience they need but, honestly,

the confidence is the big thing.”

## Resident reflection

Each resident's pandemic experience is going to differ. So too will their perceived gaps in experience. Considering that, the AMA Accelerating Change in Medical Education Consortium has worked on a pilot program involving resident self-direction. The program is called the Personal Priorities in Transitions pilot.

The aim is "to really establish a conversation between the learner and their receiving residency program," Dr. Lomis said. "So temporarily, we actually haven't involved the school. This is an informed self-assessment and that 'informed' word is important because it encourages the learner to reflect on the feedback that they've gotten—not just thinking off the top of their head, [but] looking at the comments from certain experiences, feedback they've gotten from their faculty, to really identify for themselves where they stand in certain areas that we know are critical at this time of transition.”

The process of self-reflection and identifying gaps could be beneficial for residency programs, Dr. Wolff said.

"From a program perspective, it would be so nice to have had a learner who has had time to reflect on where they've been in their training and where they want to go, and really come to the table with a sense of where their areas are that they want to develop on and where they feel like their strengths are," she said.

"AMA Moving Medicine" highlights innovation and the emerging issues that impact physicians and public health today. You can catch every episode by subscribing to the AMA's YouTube channel or the audio-only podcast version, which also features educational presentations and in-depth discussions.