

## AMERICAN MEDICAL ASSOCIATION RESIDENT AND FELLOW SECTION

Report: D  
(I-20)

Introduced by: RFS Governing Council

Prepared by: Committee on Long Range Planning (CLRP)

Subject: Decreasing Financial Burdens on Residents and Fellows

Referred to: Reference Committee

---

### INTRODUCTION

At the 2018 AMA-RFS Interim Meeting, the AMA-RFS assembly referred Resolution 007, "Decreasing Financial Burdens on Residents and fellows," the resolved clauses of which state:

RESOLVED, That our AMA partner with the ACGME and other relevant stakeholders to encourage training programs to reduce financial burdens on residents and fellows by providing subsidized access to day care facilities and other basic necessities such as on-call meal allowances for residents taking in-house call, and free parking onsite, and be it further

RESOLVED, That this resolution be forwarded to AMA-HOD at A-19.

Upon further study, the Committee on Medical Education reported back to the AMA-RFS assembly at the 2019 AMA-RFS Annual Meeting and recommended:

That our AMA include expanded information on employee benefits in the AMA FREIDA database, such as, but not limited to: subsidized access to day care facilities, on-call meal allowances for residents taking in-house call, and free parking on site.

This Report F was then referred for study by the AMA-RFS assembly and assigned to the AMA-RFS Committee on Long Range Planning by the Governing Council for report back at the 2020 AMA-RFS Annual Meeting.

Current AMA Policy includes:

H-215.985 "Child Care in Hospitals":

Our AMA: (1) strongly encourages hospitals to establish and support child care facilities; (2) encourages that priority be given to children of those in training and that services be structured to take their needs into consideration; (3) supports informing the AHA, hospital medical staffs, and residency program directors of these policies; and (4) supports studying the elements of quality child care and availability of child care on a 24-hour basis.

H-310.912 "Residents and Fellows' Bill of Rights":

5. Our AMA encourages teaching institutions to explore benefits to residents and fellows that will reduce personal cost of living expenditures, such as allowances for housing, childcare, and transportation...

7. Our AMA adopts the following 'Residents and Fellows' Bill of Rights' as applicable to all resident and fellow physicians in ACGME-accredited training programs:

#### RESIDENT/FELLOW PHYSICIANS' BILL OF RIGHTS

Residents and fellows have a right to:

E. Adequate compensation and benefits that provide for resident well-being and health.

(3) With Regard to Benefits, Residents and Fellows Must Be Fully Informed of and Should Receive: a. Quality and affordable comprehensive medical, mental health, dental, and vision care for residents and their families, as well as professional liability insurance and disability insurance to all residents for disabilities resulting from activities that are part of the educational program; b. An institutional written policy on and education in the signs of excessive fatigue, clinical depression, substance abuse and dependence, and other physician impairment issues; c. Confidential access to mental health and substance abuse services; d. A guaranteed, predetermined amount of paid vacation leave, sick leave, family and medical leave and educational/professional leave during each year in their training program, the total amount of which should not be less than six weeks; e. Leave in compliance with the Family and Medical Leave Act; and f. The conditions under which sleeping quarters, meals and laundry or their equivalent are to be provided.

## DISCUSSION

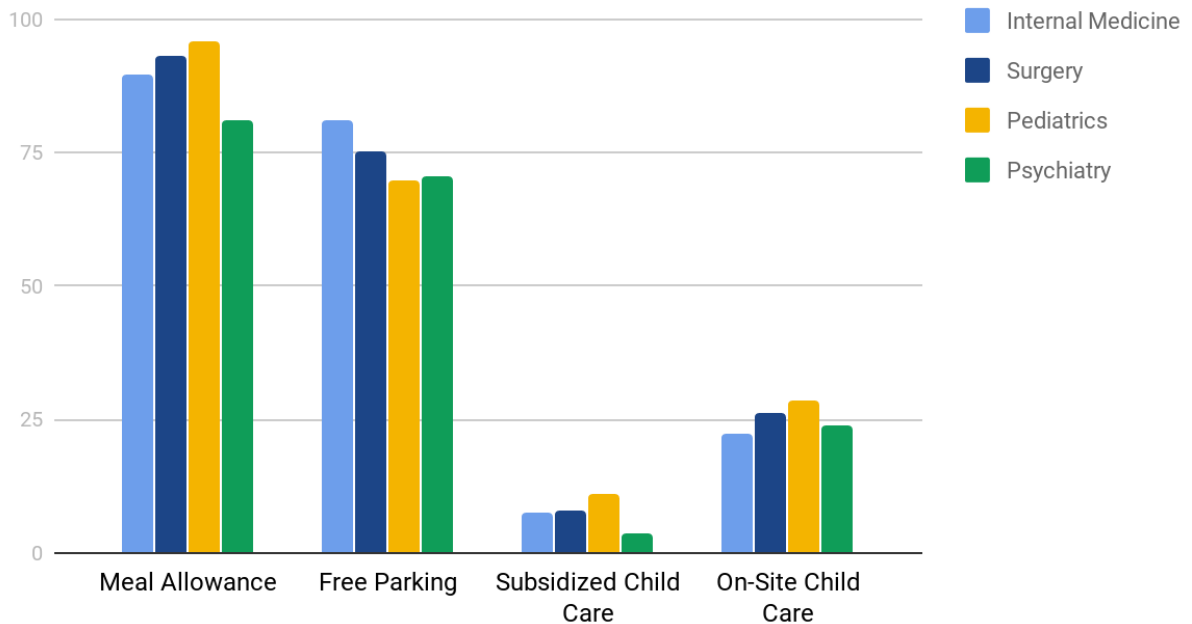
Upon completion of medical school, trainees are often faced with significant financial burdens. According to the annual AAMC Graduation Questionnaire, 52.6% of medical students who graduated in 2019 had a combined premedical and medical school debt of \$150,000 or more, with 26.2% reporting \$200,000-299,000.<sup>1</sup>

Between these financial restraints and 80-hour work weeks, trainees often struggle with having the time and budget for necessities, such as childcare, meals, and transportation to and from the hospital. When residency and fellowship programs provide benefits to assist with these needs, it can significantly improve trainee wellbeing.

For trainees looking at residency and fellowship programs, information on benefits offered by individual programs are essential to informed residency ranking. The recent 2019 expansion of the FREIDA database now includes the information requested in the RFS I-19 Report F recommendation.<sup>2</sup> Programs may report their employment policies and benefits, such as on-site child care, on-call meal allowance, free parking, and housing stipend. This data is collected through an AAMC survey of residency and fellowship programs, which has approximately a 95% response rate.

Of the total 11,949 active residency and fellowship programs, 11,296 responded to the survey. Of these, 7,566 (67%) indicated that they provide a meal allowance, 6,932 (61%) provided free parking, 798 (7%) subsidized child-care, and 3,330 (29%) on-site childcare. The number of programs offering each benefit varies widely between specialties, as can be seen in the below graph. Summary reports with this data are published by the AAMC every year.<sup>3</sup>

## Percentage of Residency and Fellowship Programs Offering Benefits



While strides have been made in providing more resources to trainees and increasing transparency, there is clearly still much room for improvement in decreasing the financial burden on residents and fellows.

Though the ACGME has extensive institutional requirements regarding work hours, educational standards, and the provision of mental health resources, there are no standardized guidelines for GME programs on policies like child care or transportation assistance.<sup>4</sup> It is up to individual programs to decide what services to provide, leading to significant variance between specialties, institutions, and programs.

### RECOMMENDATIONS

Based on the recent FREIDA expansion, and based on the report and recommendations prepared by the AMA-RFS Committee on Long Range Planning, your AMA-RFS Governing Council recommends that the following be adopted in lieu of GC Report F (A-19) and the remainder of the report be filed:

- 1) That our AMA work with ACGME, AAMC, and other relevant stakeholders to advocate that medical trainees not be required to pay for essential amenities including, but not limited to on-site parking, scrubs, and white coats.
- 2) That our AMA work with relevant stakeholders including the AAMC to define “access to food” for medical trainees to include 24-hour access to fresh food and healthy meal options within all training hospitals.
- 3) That our AMA work with relevant stakeholders to ensure that medical trainees have access to on-site and subsidized child care.
- 4) That the Residents and Fellows’ Bill of Rights be prominently published online on the AMA website and be disseminated to residency and fellowship programs.

- 5) That the Residents and Fellows' Bill of Rights (H-310.912) be amended by addition and deletion to read as follows:

5. Our AMA partner with ACGME and other relevant stakeholders to encourages training programs to reduce financial burdens on residents and fellows by providing employee benefits including, but not limited to, on-call meal allowances, transportation support, relocation stipends, and child care services. ~~teaching institutions to explore benefits to residents and fellows that will reduce personal cost of living expenditures, such as allowances for housing, childcare, and transportation.~~

---

## REFERENCES

1. <https://www.aamc.org/system/files/2019-08/2019-gg-all-schools-summary-report.pdf>
2. <https://freida.ama-assn.org/Freida/#/>
3. <https://www.aamc.org/system/files/reports/1/2018stipendsurveyreportfinal.pdf>
4. <https://www.acgme.org/Portals/0/PFAssets/InstitutionalRequirements/000InstitutionalRequirements2018.pdf?ver=2018-02-19-132236-600>