

Update on the planning process to collaboratively review the transition from UME to GME

Background

Graduate medical education (GME) allows medical school graduates to pursue specialization in their area of interest, and through residencies and fellowships, prepares them for practice in that specialty area. Because the current number of residency applicants and the number of desired training positions are not evenly matched, the residency match process, which originated in the early 1950s, has become increasingly competitive for US and international applicants. The current system, while functional, has created a variety of unintended consequences, raised questions about how medical students should be compared and selected, and increased concern about over-dependence on the summative scores produced by the COMLEX and USMLE sequence.

The Invitational Conference on USMLE Scoring (InCUS) took place on March 11-12, 2019 in Philadelphia and was jointly sponsored by: American Medical Association (AMA); Association of American Medical Colleges (AAMC); Educational Commission for Foreign Medical Graduates (ECFMG); Federation of State Medical Boards (FSMB); and National Board of Medical Examiners (NBME). The expressed goals of InCUS were to collaboratively review the USMLE program's practice of numeric score reporting within the context of its primary use of licensure and to discuss any secondary uses and the broader regulatory and educational environments in which USMLE exists.

InCUS produced the following recommendations, drafted by representatives of the five co-convening organizations (the InCUS Planning Group).

1. Reduce the adverse impact of the current overemphasis on USMLE performance in residency screening and selection through consideration of changes such as pass/fail scoring.
2. Accelerate research on the correlation of USMLE performance to measures of residency performance and clinical practice.
3. Minimize racial demographic differences in USMLE performance.
4. Convene a cross-organizational panel to create solutions for challenges in the UME-GME transition.

Regarding the fourth recommendation, the InCUS participants and the American Association of Colleges of Osteopathic Medicine (AACOM) UME-GME Task Force, which conducted a similar discussion, observe that the current UME-GME transition system is flawed and not meeting the needs of various stakeholders and that unilateral change to COMLEX-USA and USMLE alone will not "fix" the overall system. However, the recommendation to convene a cross-organizational panel is not fully within the purview of either the USMLE or COMLEX-USA programs or their parent organizations. InCUS participants also expressed a sense of urgency for movement on this issue, concerned about the possibility that "no one group will take ownership or feel empowered to carry on the broader conversation necessary to bring about appropriate change." Accordingly, the five InCUS co-sponsors submitted a proposal to the Coalition requesting that it quickly and collaboratively address Recommendation 4. The Coalition for Physician Accountability brings together the national organizations responsible for the oversight, education and assessment of medical students and physicians throughout their medical careers. The membership includes representatives from the American Association of Medical Colleges (AAMC), American Association of Colleges of Osteopathic Medicine (AACOM), American Board of Medical Specialties (ABMS), Accreditation Council for Continuing Medical Education (ACCME), Accreditation Council for Graduate Medical Education (ACGME), American Medical Association (AMA), American

Osteopathic Association (AOA), Council of Medical Specialty Societies (CMSS), Educational Commission for Foreign Medical Graduates (ECFMG), Federation of State Medical Boards (FSMB), Liaison Committee on Medical Education (LCME), National Board of Medical Examiners (NBME), National Board of Osteopathic Medical Examiners (NBOME), and members of the public.

The Coalition membership discussed the proposal on September 16, 2019. In general, the discussion highlighted the complexity of the issues related to numeric score reporting for USMLE and recognized them as a symptom of the larger challenges in the transition from undergraduate medical education (UME) to GME. The discussion at the Coalition meeting echoed themes heard at InCUS. There was also general support for the Coalition to convene a group of its representatives to develop a plan to collaboratively review the transition from UME to GME, consistent with the proposal of the InCUS Planning Group.

Planning Committee

The Coalition Management Committee has convened a Planning Committee to establish the process to review the UME to GME transition and make recommendations for improvement. The Planning Committee is charged with the following:

- Identify the construct and membership of a UME-GME Review Committee (UGRC) to engage stakeholders in the UME to GME transition in a collaborative, inclusive process that is data-driven, high quality and expeditious.
- Develop a process for selecting UGRC members and select its members, including identification of two co-chairs.
- Identify key questions for consideration by the Committee and the deliverables that are anticipated from this review, including milestones, timeline and budget.
- Determine an appropriate communication plan to update stakeholders on the process and timeline.

The Planning Committee is comprised of organizational and individual representatives:

Organizational

1. AACOM: Bob Cain
2. AAMC: Alison Whelan
3. AOGME: Thomas Mohr
4. ECFMG: Craig Brater
5. NBME: Michael Barone
6. NBOME: John Gimpel
7. OPDA: Deborah Spitz

Individual

1. Three representatives from national student and/or resident organizations
 - a. DaShawn Hickman
 - b. Lianna Goetz
 - c. Juhee Patel
2. One additional residency program director

- a. Amit R.T. Joshi
3. Two medical education representatives (i.e., Deans of Student Affairs and/or Curriculum)
 - a. Karen Hauer
 - b. Susan Enright
4. One public member
 - a. Linda Edmondson

The deliverables from the Planning Committee will be submitted to the Management Committee for discussion and endorsement at the next meeting of the Coalition – April 7, 2020. The Planning Committee will be retired once its recommendations are accepted by the Coalition.

UME-GME Review Committee

The UME-GME Review Committee will be responsible for executing on the charge from the Planning Committee and the subsequent deliverables of a review process to identify changes to improve the transition from UME to GME. The final product will result in a set of recommendations to the Coalition. The final recommendations of the UGRC will be submitted to the Coalition for discussion and endorsement at its meeting in April 2021.