

# What Is a “Responsive” Residency Program?

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## INTRODUCTION

- **Organizational interventions** are known to be more effective at reducing burnout than individually focused interventions, as various aspects of the learning environment are associated with burnout.
- While autonomy and flexibility are core elements of wellness, the unique structural issues inherent to surgical training have not supported conceptualizing residency as a time for flexibility
- **How programs can be responsive to residents to address concerns and allow flexibility is poorly understood**

## OBJECTIVES

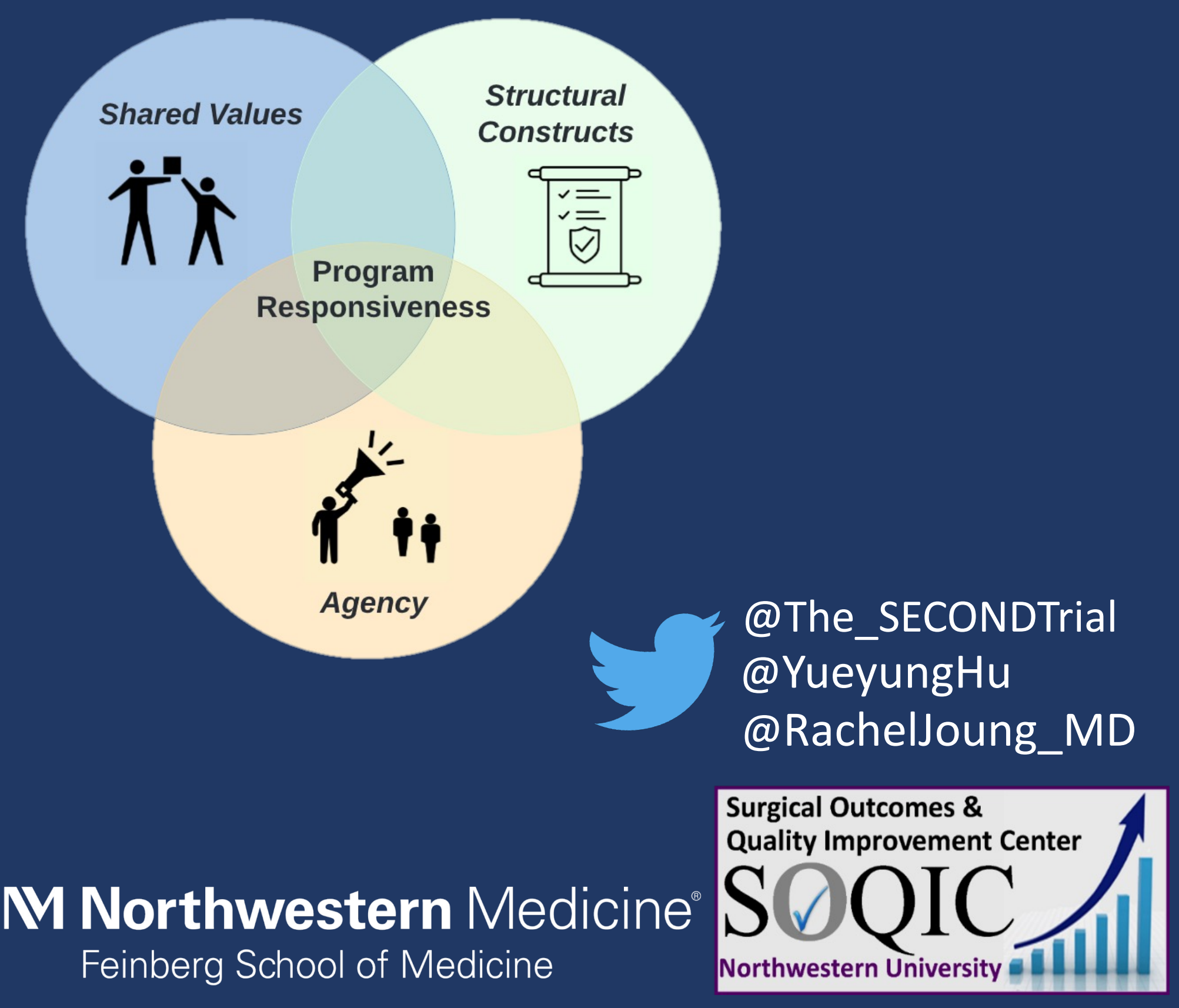
1. Describe national resident perceptions of program responsiveness
2. Assess the associations between program responsiveness and resident wellness
3. Identify factors associated with program responsiveness

## CONVERGENT MIXED-METHODS

Quantitative	Qualitative
<p><b>Data Source</b> National, voluntary survey following the 2020 ABSITE exam Survey response: 85.5%</p> <p><b>Outcomes</b> “My program is responsive to resident concerns”</p> <p>Strongly Agree   Agree   Neutral   Disagree   Strongly Disagree</p> <p>Job Demand   Work-life Integration   Burnout</p> <p>Cluster-adjusted multivariable logistic regression models</p>	<p><b>Data Source</b> 15 general surgery residency program tours</p> <p>366 semi-structured interviews 27 focus group interviews</p> <p><b>Qualitative Analysis</b> Codebook developed deductively and inductively</p> <p>4 study members independently coded and reconciled differences</p>

Resident perception of program responsiveness was significantly associated with **reduced** burnout, **duty hour violations**, and **improved** career satisfaction and wellness

*Shared Values, Structural Constructs, and Agency are important components of program responsiveness*



## RESULTS - QUANTITATIVE

- **72.1%** (n=3,791) reported satisfaction with program responsiveness

<p>80-hr violation: OR 0.2 Finish work at home: OR 0.6</p>	<p>Satisfaction with Career choice: OR 3.2 Personal life: OR 2.8 Health maintenance: OR 3.1 Time for healthy habits: OR 2.6</p>	<p>Burnout: OR 0.5 Thoughts of attrition: OR 0.3 Thoughts of suicide: OR 0.5</p>
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	Rate (%)	OR (95% CI)		Rate (%)	OR (95% CI)
<b>Sex</b>			<b>Program size (total number of residents)</b>		
Male	73.4	1.00	Quartile 1 (<23)	71.3	1.00
Female	70.6	0.94 (0.81-1.10)	Quartile 2 (24-34)	71.6	1.16 (0.83 - 1.63)
<b>Race/ethnicity</b>			Quartile 3 (35-49)	<b>74.0</b>	<b>1.46 (1.02 - 2.07)</b>
Non-Hispanic White	73.1	1.00	Quartile 4 (50+)	<b>71.6</b>	<b>1.48 (1.01 - 2.19)</b>
Non-Hispanic Black	<b>74.9</b>	<b>1.62 (1.08 - 2.43)</b>	<b>Having a faculty mentor</b>	<b>83.8</b>	<b>2.64 (2.22 - 3.14)</b>
Hispanic	72.9	1.04 (0.77 - 1.40)	<b>Having input into call and vacation</b>	<b>83.1</b>	<b>3.31 (2.74 - 4.00)</b>
Asian	71.9	1.17 (0.95 - 1.44)	<b>Feels comfortable speaking up</b>	<b>83.6</b>	<b>4.20 (3.47 - 5.09)</b>
Other/Prefer not to say	63.6	0.94 (0.72 - 1.23)	<b>Resident camaraderie</b>	<b>79.2</b>	<b>2.93 (2.32 - 3.71)</b>
<b>Clinical postgraduate year</b>					
Intern (PGY 1)	73.3	1.00			
Junior (PGY 2-3)	<b>69.1</b>	<b>0.55 (0.44 - 0.68)</b>			
Senior (PGY4-5)	<b>74.7</b>	<b>0.52 (0.41 - 0.65)</b>			

## RESULTS - QUALITATIVE

**Shared Values: Trust and Openness, Transparency, Unity**

**Program director** “...Honestly, the biggest hurdle was just getting residents to trust the system and people’s motivations. There was kind of this fear they were asking for something that was going to create backlash”

**Faculty** “...I think there was a lot of residents’ suggestions, which then would be squashed because it just couldn’t be done. And sometimes, the tension was the lack of clear communication.”

**Structural Constructs: Policies and Schedules**

**Resident, PGY-5** “...We get to rank where we want to go every year...And I have found that the program tries to give you your top five picks. It’s a very responsive program.”

**Agency: Faculty Mentors, Resident Leadership & Representation**

**Resident, PGY-5** “...[Our] resident council will bring [topics of importance] to the Program Directors to put some weight behind it, and so you’re not just one voice speaking up, being singled out. It’s sort of the residents as a whole bringing an agenda.”

**Program director** “...I have learned over time that the residents having a say in their residency is even more important. We have a pretty good structure for them to have input, and, honestly, most of the things we do were their ideas.”