

***Final Report and Recommendations Submitted by The Coalition for Physician
Accountability's Work Group on Learner Transitions from Medical Schools to Residency
Programs in 2020***

Introduction

The COVID-19 pandemic has brought widespread, extreme, and ongoing disruption to healthcare and medical education in the United States. This disruption extends throughout the continuum of physician education, creating novel circumstances for students, residents, faculty members, schools and institutions that provide medical education, and organizations responsible for the regulation of the medical profession. As this disruption continues through the summer of 2020, this year's transition of medical school graduates into their first postgraduate year (PGY-1) appointments in US residency programs demands a coordinated and collaborative approach in order to protect patients, learners, and the healthcare workforce, and to safeguard the interests of the public.

Coalition for Physician Accountability and the Work Group

The [Coalition for Physician Accountability](http://physicianaccountability.org) (Coalition) "is a membership organization that convenes on a regular basis to engage in discussion and collaboration on matters of common relevance to improve the quality of healthcare."¹ Its members include:

- Accreditation Council for Continuing Medical Education (ACCME)
- Accreditation Council for Graduate Medical Education (ACGME)
- American Association of Colleges of Osteopathic Medicine (AACOM)
- American Board of Medical Specialties (ABMS)
- American Medical Association (AMA)
- American Osteopathic Association (AOA)
- Association of American Medical Colleges (AAMC)
- Council of Medical Specialty Societies (CMSS) (*liaison member*)
- Educational Commission for Foreign Medical Graduates (ECFMG)
- Federation of State Medical Boards (FSMB)
- Joint Commission (*liaison member*)
- Liaison Committee for Medical Education (LCME)
- National Board of Medical Examiners (NBME)
- National Board of Osteopathic Medical Examiners (NBOME)

The Coalition was established to promote professional accountability by improving the quality, efficiency, and continuity of the education and assessment of physicians. Consistent with this purpose, the Coalition created several work groups to develop common

¹ Coalition for Physician Accountability. <http://physicianaccountability.org/About.html>. Accessed May 3, 2020.

recommendations that address urgent issues related to the COVID-19 pandemic and physician education.

This work group was convened to propose recommendations for the guidance of learners, schools, institutions, and organizations in the transition of medical school graduates into their PGY-1 appointments in US residency programs in 2020. The work group was comprised of representatives from ACGME, AACOM, AAMC, AMA, ECFMG, National Resident Matching Program (NRMP), and Organization of Program Director Associations (OPDA).

Background

In 2020, tens of thousands of medical school graduates will begin PGY-1 appointments in US residency programs accredited by the ACGME. 32,399 graduates have entered into match commitments with programs and institutions through the NRMP to begin their 2020 PGY-1 appointments, and approximately 400 or more graduates have committed to appointments through other matching programs.^{2,3} Based on previous years' information,^{4,5,6} it is roughly estimated that fewer than 1,000 appointments of PGY-1 residents will be arranged outside of matching programs in 2020. Consistent with well-established precedent in ACGME-accredited Sponsoring Institutions and residency programs, most PGY-1 appointments of residents in 2020 are expected to begin around July 1.

Most incoming PGY-1 residents are graduating from an MD-degree-granting medical school in the United States or Canada accredited by the Liaison Committee on Medical Education (LCME), or from a DO-degree-granting medical school in the United States accredited by the Commission on Osteopathic College Accreditation (COCA).^{6,7} The cohort of incoming PGY-1 residents also includes graduates of international medical schools who have obtained a valid certificate from the Educational Commission for Foreign Medical Graduates (ECFMG) or a full medical license in a United States jurisdiction.^{6,7}

The recommendations of the work group are intended to address the entire population of US and international medical school graduates who will begin their PGY-1 residency

² National Resident Matching Program (NRMP). 2020 Main Residency Match by the numbers. <http://www.nrmp.org/main-residency-match-data/>. Accessed May 2, 2020.

³ American Urological Association. Urology Residency Match statistics. <https://www.auanet.org/education/auauniversity/for-residents/urology-and-specialty-matches/urology-match-results>. Accessed May 2, 2020.

⁴ NRMP. Results and data: 2019 Main Residency Match. <http://www.nrmp.org/main-residency-match-data/>. Accessed May 2, 2020.

⁵ American Osteopathic Association (AOA). AOA Intern/Resident Registration Program. Summary of positions offered and filled by program type: results of the 2019 match. National Matching Services, Inc. <https://natmatch.com/aoairp/stats/2019prgstats.html>. Accessed May 2, 2020.

⁶ Accreditation Council for Graduate Medical Education (ACGME). Data resource book: 2018-2019. <https://www.acgme.org/About-Us/Publications-and-Resources/Graduate-Medical-Education-Data-Resource-Book/GraduateMedicalEducation/GraduateMedicalEducationDataResourceBook>. Accessed May 2, 2020.

⁷ ACGME. Institutional requirements. <https://acgme.org/Designated-Institutional-Officials/Institutional-Review-Committee/Institutional-Application-and-Requirements>. Effective July 1, 2018. Accessed May 2, 2020.

appointment in the US no later than January 31, 2021, and the institutions and programs that will appoint them.

Process, Goal, and Considerations

In a series of video conference meetings in April and May 2020, work group members described various issues related to the transition of medical school graduates into PGY-1 residency appointments in 2020 and summarized published guidance relevant to those issues. The work group then outlined recommendations addressing aspects of the 2020 transition that were likely to be affected by the pandemic.

The goal of the recommendations is to promote public and professional safety by mitigating the effects of pandemic-related disruption in the transition from undergraduate to graduate medical education (UME to GME). When formulating the recommendations, the work group considered the needs of learners, medical schools, organizations involved in GME, and organizations with regulatory responsibility, and balanced those needs with the interests of patients, communities, and the public.

Some of the work group's considerations deserve explicit mention. It was hypothesized before the COVID-19 pandemic that stressors associated with this transition may compromise the well-being of the learner,⁸ and the work group formulated its recommendations with concern that pandemic-related disruption could exacerbate learners' stress. This includes new challenges that US and international medical school graduates may encounter related to relocation, personal health risks, and personal health screening as they transition into PGY-1 residency appointments. Many incoming PGY-1 residents will enter clinical learning environments under considerable stress at a time that institutions and programs are planning for increases in disease burden that may occur this fall and winter. Social isolation of PGY-1 residents outside the clinical learning environment may also be a threat to well-being in some locations.

Many institutions and programs are experienced in supporting and monitoring the well-being of incoming PGY-1 residents and are planning to adapt their approaches to reflect complex well-being challenges that have emerged inside and outside the clinical learning environment this year. The work group's recommendations acknowledge that there may be elevated risks to the well-being of PGY-1 residents in 2020, and that any such risks may persist for the duration of their PGY-1 appointments.

The work group also took into account widespread reports of pandemic-related financial and operational emergencies in healthcare and educational organizations and recognized that international medical graduates may face unique challenges in this year's transition.

Finally, the work group's recommendations are based on the current knowledge of COVID-19 and its anticipated impact in the coming months, which is expected to vary by location. The work group acknowledged that future developments in the pandemic response may affect healthcare and medical education needs in unexpected ways, and therefore may call

⁸ Yaghmour NA, Brigham TP, Richter T, et al. Causes of death of residents in ACGME-accredited programs 2000 through 2014: implications for the learning environment. *Acad Med.* 2017;92:976-983. doi: 10.1097/ACM.0000000000001736

for superseding recommendations from the Coalition for Physician Accountability or its member organizations. The recommendations are not presented in order of priority.

This report and its recommendations were reviewed prior to publication by representatives of ABMS, FSMB, and LCME. (A list of reviewers is Appendix 2.) The work group gratefully acknowledges the reviewers' comments.

Recommendations

1. 2020 Match Participation Agreements
 - a. Match participation agreements and match commitments for PGY-1 residency appointments should remain in effect for all residents, programs, and institutions, and all matches (e.g., [NRMP](#), [Urology Residency Match Program](#)).
 - b. Any modifications to, or cancellations of, match commitments for PGY-1 residency appointments should conform to the policies and procedures of the organization that provides the match (e.g., NRMP waiver process). Programs and applicants seeking waivers of a match commitment due to delays in graduation, United States Medical Licensing Examination (USMLE) or Comprehensive Osteopathic Medical Licensing Examination (COMLEX) testing needs, etc., are encouraged to consider a deferral of training to the next academic year.
 - c. Match commitments are contractual obligations. Deployment or assignment of matched applicants to PGY-1 positions should adhere to match participation agreements and match commitments, including any prohibition against enrolling applicants into residency programs into which they did not match.
2. Residency Appointments
 - a. Appointment to a PGY-1 residency position should comply with ACGME Institutional Requirements.
 - b. Conditions of appointment provided in PGY-1 residency appointment contracts should be consistent with information provided to applicants at the time of recruitment and interview or that were provided in post-match communications.
 - c. In accordance with institutional policies and procedures, Sponsoring Institutions should consider requests for leaves of absence or for reasonable accommodations from incoming PGY-1 residents whose ability to participate in resident assignments or the residency program is affected by the COVID-19 pandemic. Additionally, modification or cancellation of a match commitment (e.g., NRMP waiver) must be discussed with the organization that provides the match to determine available options.
3. Transitions to a New Location to Begin a Residency Program
 - a. Sponsoring Institutions and their programs are encouraged to provide augmented relocation resources to assist incoming PGY-1 residents in the transition to 2020 appointments. Examples may include referrals for services such as healthcare, housing, legal assistance, transportation, and childcare.
 - b. The Sponsoring Institution and its programs should provide policies and communications to incoming PGY-1 residents regarding any quarantine measures to which residents will

be subject before starting their program or rotations. A suggested approach is to allow residents under quarantine to participate in activities such as virtual orientation, information systems training, or research/scholarly activity.

- c. The Sponsoring Institution should ensure the provision of appropriate resources to support incoming PGY-1 residents who are subject to quarantine. (See 7.b below.)
 - d. Orientation to infection protection for residents, including the provision of personal protective equipment (PPE) and training in its use, should precede incoming PGY-1 residents' participation in any clinical setting. If a GME boot camp is required for incoming PGY-1 residents, it should be conducted in accordance with the Sponsoring Institution's policies and procedures for infection protection.
 - e. It is essential for Sponsoring Institutions to be mindful of regulations pertaining to medical licensure for PGY-1 residents.
4. Flexibility in Requirements
 - a. See 1.b above.
 - b. Some variance in ACGME Common and specialty-/subspecialty-specific Program Requirements is available under a Sponsoring Institution's pandemic emergency status, as described on the [ACGME web site](#).
 - c. There is no variance in ACGME Institutional Requirements.
 5. Early Medical School Graduation
 - a. See published guidance from [ACGME](#), [NRMP](#), [AMA](#), [LCME](#), and [COCA](#).
 - b. Early medical school graduates should be able to opt out of engaging in clinical care prior to their PGY-1 residency appointments without intimidation or retaliation.
 - c. Early medical school graduates who engage in clinical care prior to their PGY-1 residency appointments should be provided appropriate PPE, training in its use, and appropriate supervision; and should be released from duty on a schedule that allows for reasonable transition time so that the PGY-1 residents may begin their appointments without delay.
 6. Delayed Medical School Graduation; Delayed Arrival in Residency Program
 - a. Per NRMP guidance, in the absence of a waiver or deferral of a match appointment, matched applicants are to begin their PGY-1 residency appointments by January 31, 2021.
 - b. During the 2020 appointment year, Sponsoring Institutions should seek to accommodate the delayed graduation of medical students who are transitioning to residency, and the delayed arrival of PGY-1 residents due to reasons that include international travel, health concerns (including quarantine not required by the Sponsoring Institution/program), visa issues, or licensure delays. See Section 3.e.
 7. Resident Obligations Regarding Pre-Employment Health Screening or Quarantines
 - a. See 3 above.
 - b. Any PGY-1 resident obligations regarding pre-employment health screening or quarantines should be guided by institutional policies and procedures. If a Sponsoring

Institution requires a health screening, it should be provided by the Sponsoring Institution in partnership with its participating sites. If an institution requires pre-employment physicals or quarantines, these requirements should be viewed as responsibilities under the residency appointment.

- c. As a resident assignment, time in quarantine should not be classified as vacation or leave of absence within a PGY-1 residency appointment.
8. Impact of Transitioning to a Clinical Environment during the COVID-19 Pandemic
 - a. Given anticipated challenges to the well-being of PGY-1 residents during the COVID-19 pandemic, Sponsoring Institutions, in partnership with their programs, should consider providing augmented assessment and monitoring of PGY-1 residents' well-being throughout the appointment year.
 - b. Sponsoring Institutions and programs should disclose to incoming PGY-1 residents any deviations from the expected curriculum due to the response to the COVID-19 pandemic. The disclosure should specify the effects of curriculum deviations on PGY-1 residents' ability to satisfy requirements for program completion, and on eligibility for specialty board examinations.
 - c. Sponsoring Institutions and programs should consult published [ACGME guidance](#) regarding the COVID-19 pandemic to ensure compliance with Institutional Requirements, and with program requirements for safety, supervision, and clinical and educational work hours.
 - d. Given the clinical environment in 2020, there should be augmented consideration of the amount of incoming PGY-1 residents' previous clinical experience in the United States when determining the residents' initial clinical assignments.
 9. International Medical Graduates
 - a. Sponsoring Institutions, programs, and training program liaisons should proactively communicate with incoming PGY-1 residents who are international medical graduates to confirm their status and to understand if there are any barriers to beginning their residency appointments.
 - b. Sponsoring Institutions, programs, and training program liaisons should contact ECFMG for information and assistance, as needed.
 - c. Early appointment of international medical graduates to PGY-1 residency appointments should be consistent with visa-specific regulations and immigration law and should follow ACGME, NRMP, FSMB, and state-specific guidance, requirements, policies, procedures, rules, and regulations.
 - d. Sponsoring Institutions and their programs are encouraged to provide augmented relocation assistance to incoming PGY-1 residents who are international medical graduates in the transition to 2020 appointments. Examples may include referrals for services such as healthcare, housing, legal assistance, transportation, and childcare.
 - e. Recognizing the increased risk of social isolation and other unique circumstances related to COVID-19, Sponsoring Institutions, programs, and training program liaisons are strongly encouraged to facilitate enhanced cultural and community support for international medical graduates beginning PGY-1 residency appointments in 2020.

f. See 6.b above