2015

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Recommended Citation

Bright DR, Adams AJ, Ulbrich TR, Soric MM. Mentoring Residency Candidates: Avoiding Misinformation and Employing Best Practices. *Inov Pharm.* 2015;6(2): Article 197. http://pubs.lib.umn.edu/innovations/vol6/iss2/2

Mentoring Residency Candidates: Avoiding Misinformation and Employing Best Practices

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Abstract
With an increasing demand in pharmacy residency training, and with a rapidly evolving residency application process, mentors of residency candidates are faced with the challenging task of providing accurate, helpful, and up-to-date information. The purpose of this commentary is to describe resources and best practices to help mentors effectively support residency candidates. Areas of misinformation are discussed first, followed by strategies for individual-level development as a mentor of residency candidates, and finally by a review of selected larger-scale residency candidate development models. Mentors of residency candidates may find it helpful to continually review current information about the residency search process and residency candidate development so as to provide the most helpful information and support possible.

Introduction

The demand for residency training continues to increase dramatically. Since 2000, the number of applicants enrolled in the residency Match governed by the American Society of Health-System Pharmacists (ASHP) has risen each year to a total of 5,373 in 2015. After the 2015 Match concluded, more than 35% of PGY1 applicants were without a position, though this value ignores an additional 1,015 applicants that did not submit a rank list.[1] In an effort to meet this demand, the number of PGY1 positions has also increased, though not with enough pace to keep up with the number of applications. The result of this imbalance is an intensely competitive residency market that puts a significant amount of pressure on applicants.

In order to increase the likelihood of a favorable Match, applicants often seek out advice from faculty members and mentors. Though colleges and schools of pharmacy are well positioned to prepare students for success, a 2010 survey found that fewer than 23% have developed formal residency preparation programs.[2] With the residency application process evolving rapidly, students may be receiving inaccurate, conflicting or out-of-date information as it relates to the residency search, application and/or interview process. Blake et al. recently explored the gap between residency program directors' and pharmacy faculty members' opinions of the most critical selection factors, identifying a number of areas of discordance.[3]

If faculty members and mentors pass along misinformation to applicants, it can be the difference between success and failure in securing a residency position. This high stakes environment requires all mentors involved in the residency search process to stay current with best practices and the needs of their mentees.

The objective of this commentary is to highlight resources and best practices so that mentors can provide helpful support to residency candidates. Examples of potential areas of misinformation and misalignment are listed first, followed by an assortment of strategies for personal development as a residency search mentor, and a description of selected best practices from the literature related to programmatic-level residency candidate development.

Potential Areas of Misinformation

Myth: All students should be encouraged to complete a residency.
Fact: In our experience, a student's decision to enter directly into practice upon graduation is often inaccurately portrayed by faculty advisors as a poor career decision. While we agree that residencies can provide career advantages,[4] any discussion about a student's desire to pursue or not pursue a residency must start with a candid conversation about the student's short- and long-term career goals. Students with an interest in academia, advanced clinical practice, and clinical service development, among others, may benefit

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substantially from a residency. There are, however, many paths to any career goal. Postgraduate fellowships, graduate degrees, and direct practice experience all have their own merits and may be more appropriate for some pharmacy students. Thus, advisors should not portray postgraduate opportunities as a dichotomous residency versus non-residency choice, and should instead provide students a holistic view of options, and discuss each option in the context of a student's career goals.

Myth: Due to residency program growth in recent years, applicants are having an easier time matching with a residency program.
Fact: While residency programs and available positions in the ASHP Match have increased (1,941 PGY1 positions in 2010 and 3,075 in 2015), this growth has been exceeded by the number of applicants participating in the Match (2,915 PGY1 applicants in 2010 and 4,358 in 2015). Therefore, securing a residency position continues to be extremely competitive with only 64.5% of applicants securing a position through the Match in 2015 compared to 61.8% in 2010.[1]

Myth: Student pharmacists are receiving consistent advice related to the residency application process from peers, faculty, preceptors and professional organizations.
Fact: In our experience, students are receiving a wide range of advice as it relates to the residency search, application, interview and Match processes. Students are engaging with many individuals during this process including faculty, peer student pharmacists, preceptors, and alumni. Each has likely had varying experiences that have shaped his/her perspective. To have a well-rounded view of the residency applicant process, student pharmacists should gather feedback from multiple sources including peers, professional organization resources, faculty and preceptors.

Myth: Student pharmacists are receiving extensive guidance to prepare them for the residency search, application and interview process.
Fact: Preparation activities for student pharmacists varies significantly from one college to another. Some colleges have established curricular activities (i.e., a residency preparation elective course), whereas others utilize professional organizations and other co-curricular activities to provide this information to student applicants.[2,5-11]

Myth: Placement into a PGY2 position is as competitive as placement into a PGY1 position.
Fact: The number of PGY2 residency programs participating in the ASHP Match, while smaller in number compared to the PGY1 programs, has increased significantly in recent years (335 positions in 2010; 615 positions in 2015). While still

highly competitive, placement into a PGY2 position is more favorable to the applicant compared to that of the PGY1 program. In 2015, there were 705 applicants participating in the Match and 497 were successful in obtaining a position (70%). The likelihood of matching is largely dependent on the area of training (e.g., critical care, ambulatory care, etc.), number of positions available, and variations in the number of PGY1 residents that early–commit to those programs each year.

Myth: The application process has remained relatively unchanged over recent years.
Fact: With the introduction of the Pharmacy Online Residency Centralized Application System (PhORCAS), the application process has changed significantly. Student pharmacists, and those advising a student seeking a residency position, should familiarize him/herself with the online applications system. For example, one major change is in regard to the applicant's reference that was traditionally completed via a reference letter and is now completed using a standardized reference form. In addition to the PhORCAS changes, there have been significant changes to the "Scramble" for those applicants that are not successful in obtaining a position. What was traditionally viewed as more of a "free for all" for unmatched applicants and programs to find one another has more structure in place with the use of the PhORCAS application system and recommendations from ASHP regarding timelines for when a program should make an offer to an applicant.

Myth: With changes to improve the residency application process, the scramble process has become irrelevant.
Fact: Due the volume of students that are not successful in the residency Match, the scramble is as relevant as ever. Applicants should be ready to participate in the scramble process and it is recommended they work closely with an advisor or mentor to plan in advance. Planning includes: understanding the scramble timeline, how to conduct a meaningful search during the scramble rather than looking for any available position, restructuring letters of intent, notifying reference writers and preparing for interviews (often conducted over phone or video conferencing rather than in person).

Myth: There is a magic number of programs to which a residency applicant should apply.
Fact: In our experiences, the number of applications required for a student to be successful in obtaining a position is dependent on multiple factors that do not allow for a broad recommendation that applies to all applicants. These factors include, but are not limited to, the quality of the candidate, geographic limitations for where an applicant may search, and previous connections between the applicant and the

programs (i.e. APPE rotation and internships). We have had experiences where applicants are successful with applying to one program because of a strong applicant that has a strong connection to the program. We have also had situations where an applicant applies to 10 or more programs without obtaining an interview. Time should be spent with each student pharmacist applying for residency to help him/her determine what may be the right number of applications that will allow for a reasonable number of interviews without interfering with experiential rotations.

Suggestions for Individual-Level Development as Residency Search Mentors
It is imperative that faculty advisors keep current on the residency application process as well as key resources in order to best mentor students. To start, PhORCAS offers instructional videos and specific instructions on how to apply for programs, and advisors may benefit from reviewing these resources in order to become more familiar with the application process.[12] Advisors are also encouraged to keep abreast of the latest residency statistics available through ASHP's National Matching Services (NMS). NMS publishes annual updates on the number of available programs and positions, applicants enrolled in the Match, rankings per applicant, Match results by program type, filled and unfilled positions, among others.[13] An understanding of these statistics and emerging trends can provide insight to prospective applicants as they make decisions around the number of applications, ranks, etc. In addition, advisors should become familiar with ASHP's residency directory.[14] This resource allows individuals to search residency programs by location and program type and also provides individual program information, such as residency program director, stipend, benefits, number of positions, and special features. Residencies are not one-size-fits-all, so a careful review of individual programs and their unique characteristics is important for applicants. For a brief summary of available resources and key considerations for applicants, readers are encouraged to review "Coaching for success: A residency search primer and update for preceptors and faculty."[15]

Programmatic-Level Opportunities to Mentor Residency Candidates
Although a single mentor can make a widespread impact on several students, programmatic-level adoption of residency preparation content may also be helpful in enhancing residency candidate success. Logistical considerations, such as a policy to allow rescheduling of class obligations to permit attendance at the ASHP Midyear Clinical Meeting (MCM), may be one opportunity to allow greater participation in the residency search process. Additionally, other mechanisms for information dissemination and individual preparation for

residency candidates may be attempted at a programmatic level. While certainly not an exhaustive review of all current practices by colleges and schools of pharmacy as it relates to residency preparation (simply due to the lack of widespread publication of all efforts of all programs), several diverse and relatively recent examples are summarized below to delineate possible opportunities for structured mentoring and support for residency candidates:

Residency Interest Groups
One institution has implemented "Residency Interest Groups" consisting of faculty presentations followed by discussion which was led by current residency program directors/residents, as well as a question and answer session. These meetings occurred four times over the academic year, three before the ASHP Midyear Clinical Meeting (MCM) and one before the subsequent Match day, and lasted for 2-3 hours each. Both P3 and P4 students were invited to attend to cover topics such as a residency overview, local residency showcases, resources, choosing a residency, the MCM, residency interviews, and the Match/scramble process. The program was demonstrated to improve knowledge, confidence, and preparedness of students who attended.[5]

Student Organization-Led Programming
At another institution, programming was facilitated through the Student Society of Health-System Pharmacists (SSHP) chapter and held in collaboration with college faculty, pharmacists from the surrounding area, and current pharmacy residents. Programs ranged from a "Residency 101" program targeted at early-career students interested in pursuing a residency to CV critique and mock residency interviews. A six-part "Midyear to Match" program also offered information on topics such as the MCM, PhORCAS, preparing for residency interviews, and Match logistics.[6]

Elective Coursework
An Introduction to Postgraduate Residency Training course was offered by one institution as a 2-credit hour elective to P3 students using distance learning strategies and faculty small group discussion leaders. Features of this program included a mock residency Match, mock residency interviews, and development of a CV and letter of intent. Students also self-assessed skill improvement following completion of the course. Other topics covered in the course included an overview of types of residency programs, a day in the life of a resident, researching programs, preparation for the MCM, and interviewing.[7] In a different model, another institution introduced a formal Residency Interviewing Preparatory Seminar program to empower pharmacy students to interview with confidence and secure postgraduate training. Eight weekly classes, each lasting two hours, were offered

through a one credit hour elective that concluded immediately prior to the MCM. Enrollment was limited to 10 students, with 2-3 students assigned to each faculty member involved, to assist with individualized feedback. Much of the content covered was similar to the aforementioned elective course offering. Students in this elective course reported improved knowledge regarding residencies, interviewing confidence, and application materials (CV, letter of intent, and personal statement).[8]

Advanced Clinical Track
One institution developed an Advanced Clinical Track (ACT) specifically to prepare graduates for residency positions. Requirements of the program included, but were not limited to, six credit hours of coursework (including topics such as acute care therapeutics and an introduction to residency and fellowship training), an additional one-month clinical practice experience, completion of a skills checklist, and participation in the SSHP clinical skills competition. Based on follow-up survey data with ACT graduates, the majority of students who completed the ACT pursued residency training and would recommend the ACT program to other students.[9]

Midyear Clinical Meeting Preparatory Forum
Another model described in the literature entails a mandatory 1-hour educational forum for all student attendees of the MCM, with content ranging from residency/fellowship terminology, benefits of attending the MTM, and activities to complete prior to MCM arrival. The forum was moderated by a faculty member and included four faculty members and 1-2 residents as a panel of speakers. Additional optional 1-hour training sessions in CV and interview preparation were offered, as well. The program extended to the MCM with an on-site faculty member providing guidance to students. The majority of the students involved reported feeling adequately prepared for the MCM.[10]

Faculty-Led Mock Interviews
Mock interviews were offered to students at another college of pharmacy by a team of eight faculty members. Sessions lasted 40 minutes, consisted of 12 standardized questions, and were led by two-member faculty teams in December and January. The first 20-25 minutes were used for the interview questions while the last 15-20 minutes was reserved for debriefing and assessment of the interview. A checklist-based system was used to standardize feedback. The vast majority of students reported that their interview skills had improved and 85.2% of participants matched with an ASHP accredited or eligible residency program as compared with the 61.9% national Match rate for that year.[11]

Conclusion
To most effectively support candidates in the residency search process, mentors have a duty to be aware of recent changes and advances. Those who wish to make larger-scale impact to influence many residency candidates may find several published resources and examples from which to draw ideas. Future consideration is warranted as the residency search process continues to evolve to ensure that College of Pharmacy faculty and mentors in the process are best serving residency candidates.

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