

Summary – APDR Round Table December 14, 2021: **Emerging Changes In Radiology Residency: The New "Virtual Normal" And How To Implement The New ABR Parental Leave Policy For Residents.**

Part 1 - The New "Virtual Normal": Speakers Drs. Omer Awan and Shanna Matalon

1. formal teaching

- using zoom or teams for conference
- residents log in from own devices (iphone, laptop)
- Pros: conferences accessible to all residents/faculty (even if offsite), can utilize off site lectures or programs (through APDR, other parts of the world, or other institutions), less time wasted walking to conference, attendance easy to document
- Cons: residents spread out, hard to find quiet space, loss of camaraderie, decreased interaction with instructors, no cameras, suboptimal IT, had when multiple residents participate with 1 device
- record conferences – great to be able to watch if on vacation, nights or in procedures, keep password protected, some programs get push back for recordings and some just require it (no choice) – issue nothing is 100% internal
- Use audience response to increase learner engagement
- require cameras to be on!!!!!!

2. informal teaching

- virtual readouts: virtual readouts thought there was more autonomy with them, however felt loss of feedback and education and loss of professional/social aspect (BWH)
- data from UMaryland showed 46% of trainees and 38% of attendings like in person readouts
- no substitute for in person readouts, but can optimize virtual readouts
 - 2 way screen sharing
 - split screen for prior studies
 - encourage questions (chat box)

3. Camaraderie/Morale

- research shows resident and PD morale decreased during covid
- outside get togethers
- virtual resident activities over zoom/teams

4. Miscellaneous/silver linings

- virtual divisions with virtual reading rooms for consults
- Alumni events/career planning events
- virtual mini electives for URM

5. other thoughts

- conference attendance – Microsoft teams can help you capture attendance (must ask your institution administrator to turn on this function in teams)
- QR codes for attendance
- Have chiefs take attendance
- if require cameras on at conference and no camera at workstation have them use their phones or have your chair authorize ability to use book fund to buy a camera for each resident
- keep recorded lectures as MP3s recorded off zoom
- issue could become with recorded lectures could a faulty then not want to give it each year and just ask for recording to be shown
- can post recorded lectures on new innovations and Blackboard

Part 2 - How To Implement The New ABR Parental Leave Policy For Residents: Speakers Drs. Cheri Cannon, Christopher Ho, and Cecelia Mercado

-ABR policy: ***Beginning with the 2021-2022 academic year, residents will be considered eligible for Initial Certification without an extension of training with “Time Off” that does not exceed an average of eight weeks (40 workdays) per academic year over the duration of the residency.***

- The maximal Time Off defined by this policy is meant to apply to exceptional circumstances. This policy is not intended to define the typical Time Off that a resident should expect, nor the typical Time Off that a program should provide.

- Completion of the training period is a necessary but not sufficient element to establish competency

- The ABR intended to have a flexible policy to allow for family, caregiver and medical” leave without requiring extension of training. However, the amount of time off available to a trainee during the residency depends on institutional policy as well as state and federal law.

- Residents who began training prior to 2021 may apply to the ABR, with the approval of their PD, for an exemption to this new policy. Circumstances warranting such exceptions are expected to be uncommon

- *The following are considered Time Off:*

1. *Vacation*
2. *Bereavement leave*
3. *Interview days away from the institution*
4. *Parental leave*
5. *Caregiver leave*
6. *Medical leave (sick time)*
7. *Other leave as determined by the PD*

- *The following are considered part of the residency (rather than Time Off):*

1. *Research activities approved as part of the residency by the PD*
2. *Attendance at a scientific or educational meeting in, or related to, the specialty*
3. *Days linked to “off hours” work (for example, a Monday off following a weekend call)*
4. *Workdays performed off site, including those resulting from a pandemic, natural disaster, etc.*

- Revision to Training Verification: Incorporates language reminding the program faculty that the ABR, like the ACGME, considers “successful completion” of the residency to require more than merely “time served, three months of breast imaging, four months of nuclear radiology, etc”.
 - o This is especially true of “Professionalism”, which is very difficult to effectively assess through our exams

-Application of this policy in real life:

- resident using all the allowed time should be the exception not the rule
- combine your institution policy with the ABR policy
- If residents want to extend the residency, they should be allowed to despite the new policy
- Other support for parental leave: pregnancy, post-partum, young families
- culture around parental leave – comes from the top, need to have a supportive culture for this
- be flexible
- transition back to work – help the residents
- wellness day – not sick time, can go to doctors appointments for kids or stay home if kids sick
- make sure you have lactation facilities, and the culture is supportive of time to pump
- be mindful i.e. daycare closes at 5:15pm so resident needs to leave at 5pm

- some less flexibility during 4th year (elective time) if take leave to compensate for time off to ensure they get all their core rotations
- how do we get fellowships to accept residents starting late if they choose to extend
 - internal usually not an issue
 - need a culture change overall in fellowships
- move to competency-based vs time-based requirements (use your CC to help assess which what is right for each resident)
- how balance burden to other residents especially in small programs
 - culture change
 - see if can pay the residents who cover and take extra call
- funding issues with residents choosing to extend
 - Chair can ok department funding – depending on how flexible their budget is
 - GME can absorb a certain amount but variable from program to program