Graduate Medical Education Virtual Interviews and Recruitment in the Era of COVID-19

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In May 2020, the Association of American Medical Colleges recommended that medical schools and teaching hospitals interview potential students, residents, and faculty virtually this application cycle due to the COVID-19 pandemic to limit disease transmission and ensure safety. This will dramatically change the landscape of how applicants learn about prospective programs and determine fit. To address the impact of these changes and ensure a successful residency application season for students and programs, it will be important for institutions to develop recruitment strategies that leverage technology and social media to approximate the benefits of in-person interviews.

Benefits of In-Person Interviews

When the Department of Anesthesia at Loma Linda University completed a pilot study offering interviews in-person or virtually, reasons for selecting in-person interviews included wanting to interact with current residents (45.1%), geographic proximity (29.6%), an interest in visiting the facility (11.3%), and wanting to evaluate the surrounding area (7.0%).² Resident interaction and evaluation of the facility and surrounding area represent key elements valued by applicants.

Program Fit

Applicants look to the in-person interview day to get a feel for the program in terms of the culture and their own fit within it. A study of orthopedic surgery applicants found that the most important factors when creating a rank list was perceived happiness of current residents and camaraderie.³ Interview days typically incorporate pre-interview dinners, giving applicants an opportunity to interact informally with their potential colleagues. During the existing inperson interview day, applicants have additional opportunities to see how trainees and faculty interact through grand rounds and didactics.

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Facility and Environs

Campus visits to potential programs would be missing from virtual interviews and are important parts of the decision-making process. A study of radiology resident recruitment found that a facilities tour was considered necessary or desirable for 83% of applicants.⁴ These visits allow applicants to see the hospital, including, but not limited to, the clinical facilities, workspaces, cafeterias, and parking. Inperson interviews also allow applicants to visit cities they are less familiar with and see if they could feel comfortable living there. Having an understanding of the area surrounding the hospital, including restaurants, parks, safety, and accessibility to public transportation is important to developing a full picture of a future home.

Virtual Recruitment Strategies

Knowing these important benefits of in-person interviews, programs will need to find innovative ways to help applicants garner similar information and experiences in a virtual space. They need to be creative and adapt quickly via innovative recruitment strategies that leverage social media, use technology to enhance websites and offer webinars, and send recruitment boxes.

Social Media

Social media is an important way programs can enhance their online presence and recruit applicants.⁵ Those programs that do not have a social media presence should consider starting one this cycle, and those that do should bolster it with more frequent and thoughtful postings. In a study of radiology programs, 38% reported social media use.⁶ Per a study by Schweitzer and colleagues, social media was used by 27% of residency applicants to gain information about programs.⁷ Although these studies were published in 2012, they are the most recent analyses of social media for residency recruitment. What is clear, however, is if programs start social media accounts

TABLE Ideas to Improve Online Presence for Virtual Interview Season

Online Platform	Curated By	Potential Innovations
Twitter	Program administration or a chief resident	 Chats on scheduled dates with regularity, like every other Monday at 6 PM EST, using a specific hashtag featuring current residents and faculty (introduced by the number sign, a type of metadata tag, eg, #[insert schools name or nickname or initials + interview chat]) Account can be "taken over" by a resident for a day or 2 and identified as such and they can post and answer questions Promote links to research projects completed by faculty and current trainees and any grand rounds or particularly unique educational activity Promote links to blogs written by trainees on the program website Highlight faculty and trainees with professional Twitter accounts (retweet them, feature them specifically with shout-outs from the accounts) Show photos of social outings and events with residents Interact with potential residents who ask questions via direct messages or via chats, at least connecting them to the right people to talk to next
Instagram	Current trainees	 Resident profiles (including a photo, brief bio of the resident with fun facts, and tagging their undergraduate school and medical school) Live videos Videos of current trainees, program directors, and alumni (who can provide guidance on ways a program can enhance careers) Collaboration videos with other residency programs at the same institution Videos discussing current research projects with principal investigators Take Q&A from attendees when possible Have these occur on a regular basis Instagram TV (IGTV) channel (videos can be uploaded between 15 seconds and 10 minutes); can upload live videos after they are finished for people who missed them Stories (disappear after 24 hours, but can be archived on a profile) Featuring "a day in the life of a resident" at work and on a day off Promote research, writings, art, creative projects by residents Virtual tours with photo spreads of nearby apartments, gyms, and attractions Photos of residents' social outings Showcase any wellness or mental health related activities Post using hashtags (examples: #residencyprogram, #fellowshipprogram, #Match2021, #ERAS) Consider hosting photo caption contests to win program gear Account can be "taken over" by a resident for a day or 2 and identified as such and they can post and answer questions
Program websites	Program administration	 Program overview List of faculty and current residents Photos of current residents as well as a brief bio (including hometown, medical school, and interests) Highlights of alumni and their current endeavors Application deadline and requirements Educational opportunities (descriptions of didactics, rotation schedules, and research opportunities) Links to recorded grand rounds lectures Well-being initiatives and mental health resources Virtual tour of the hospital and medical campus Video interviews of current trainees and faculty discussing the program and research interests Social media program links Webinar calendar, including links of prior videos about the application season

now, there will likely be growth in usefulness. Through resident-facilitated social media spaces, programs may be able to replicate the authentic, informal exchanges that allow applicants to determine a program's culture and fit and supplement the missing education gleaned from campus visits.

The 2 social media platforms with the highest yield in facilitating connections are Twitter and Instagram. The Pew Research Center found that 67% of 18- to 29-year-olds use Instagram, with 76% using the application daily.8 Given that this is the target demographic, Instagram is a way to find potential applicants and appeal to them with pictures and brief videos of experiences as a resident in the program. Twitter is also important, given the large #medtwitter presence already, and, as one residency program described, it was effective to promote clinical concepts and highlight academic activities, which can be used as recruitment tools during the application process.9 See the TABLE for ideas on using these platforms in creative ways to target trainees during the application season.

Webinars

Outside of social media, applicants can interact with current trainees in an informal environment to help assess program fit prior to interview season through webinars or virtual pre-interview dinners where applicants are given a voucher to a food delivery service and then interact with residents. These "virtual" dinners could be a fun way to break the ice and decrease the distance.

Websites

In addition to enhancing social media presence and webinars to create connection, program websites will be critical for recruitment this season. Many studies have showed that websites in various fields need improvements as they lacked program details. ^{10–13} Per a study completed in emergency medicine, website accessibility and ease of navigation played a role in 78% of applicants' decisions about applying to a program. ¹⁴ Websites can also host campus and city video tours to satisfy in-person interview benefits of these experiences. See the TABLE for ideas of how to use program websites to recruit applicants and ensure they are optimized for recruitment.

Recruitment Boxes

Though a slightly more time-intensive and financial investment, recruitment boxes might be another way to add a personal touch. These boxes, similar to guest welcome baskets at weddings, would be kits to

promote a particular city. Boxes can contain unique snacks made in the area as well as handwritten notes from trainees and program administration. To increase mentorship, letters could be written by trainees with similar professional or personal interests as individual applicants and could also act as a substitute for informal events with residents. Recruitment boxes could bring a tangible part of the program to applicants without having to leave their homes in this era of COVID-19.

Virtual Recruitment Challenges and Considerations

Though virtual recruitment is safer this season in preventing the spread of disease, it does have additional challenges. There will be new technical adaptations required to implement webinars and costs involved in making recruitment boxes and producing videos. Programs might solicit donations from local companies for recruitment box contents. Some within program administration may feel less comfortable and facile using social media; programs could seek the assistance of social media savvy faculty and residents to help develop their strategy. This could include a team creating content that is posted at regular frequencies and ensures meaningful interaction with applicants. Programs should partner with institutional media and communication departments to ensure messaging is aligned with institutional social media policies.

Conclusions

While the COVID-19 pandemic is necessitating a transition to virtual interviews, virtual recruitment may lead to new practices and opportunities that last beyond the pandemic. The interview season will be most successful by ensuring known benefits of inperson interviews are approximated through innovative interview and recruitment strategies. This is also the time to improve program websites, create virtual video tours, and increase the use of social media by programs. In the future, studies can be done to evaluate how this virtual application cycle affected applicants' decisions.

References

- Association of American Medical Colleges. Conducting Interviews During the Coronavirus Pandemic. https:// www.aamc.org/what-we-do/mission-areas/medicaleducation/conducting-interviews-during-coronaviruspandemic. Accessed August 12, 2020.
- 2. Vadi MG, Malkin MR, Lenart J, Stier GR, Gatling JW, Ii RLA. Comparison of web-based and face-to-face

- interviews for application to an anesthesiology training program: a pilot study. *Int J Med Educ*. 2016;7:102–108. doi:10.5116/ijme.56e5.491a.
- 3. Huntington W, Haines N, Patt J. What factors influence applicants' rankings of orthopaedic surgery residency programs in the National Resident Matching Program? *Clin Orthop Relat Res.* 2014;472(9):2859–2866. doi:10.1007/s11999-014-3692-9.
- Deloney LA, Perrot L, Lensing SY, Jambhekar K. Radiology resident recruitment. *Acad Radiol*. 2014;21(7):931–937. doi:10.1016/j.acra.2014.03.009.
- 5. Schlitzkus LL, Schenarts KD, Schenarts PJ. Is your residency program ready for Generation Y? *J Surg Educ.* 2010;67(2):108–111. doi:10.1016/j.jsurg.2010.03.004.
- Deloney LA, Rozenshtein A, Deitte LA, Mullins ME, Robbin MR. What program directors think. *Acad Radiol*. 2012;19(12):1583–1588. doi:10.1016/j.acra. 2012.08.009.
- 7. Schweitzer J, Hannan A, Coren J. The role of social networking web sites in influencing residency decisions. *J Am Osteopath Assoc.* 2012;112:673–679.
- Pew Research Center. Perrin A, Anderson M. Share of U.S. adults using social media, including Facebook, is mostly unchanged since 2018. https://www. pewresearch.org/fact-tank/2019/04/10/share-of-u-s-adults-using-social-media-including-facebook-is-mostly-unchanged-since-2018/. Accessed August 12, 2020.
- Bergl PA, Narang A, Arora VM. Maintaining a Twitter feed to advance an internal medicine residency program's educational mission. *JMIR Med Educ*. 2015;1(2):e5. doi:10.2196/mededu.4434.
- 10. Hashmi A, Policherla R, Campbell H, Khan FA, Schumaier A, Al-Mufarrej F. How informative are the

- plastic surgery residency websites to prospective applicants? *J Surg Educ*. 2017;74(1):74–78. doi:10. 1016/j.jsurg.2016.08.002.
- Ashack KA, Burton KA, Soh JM, Lanoue K, Boyd AH, Milford EE, et al. Evaluating dermatology residency program websites. *Dermatol Online J*. 2016;22(3):13030/qt7rx3j2dn.
- 12. Stoeger SM, Freeman H, Bitter B, Helmer SD, Reyes J, Vincent KB. Evaluation of general surgery residency program websites. *Am J Surg.* 2019;217(4):794–799. doi:10.1016/j.amjsurg.2018.12.060.
- 13. Gu A, Lehman JD, Sardana A, Cohen JS, Richardson SS, Sculco PK. Adult reconstruction hip and knee fellowship program content and accessibility. *J Arthroplasty.* 2018;33(6):1630–1633. doi:10.1016/j. arth.2018.01.075.
- Gaeta TJ. Aspects of residency programs web sites important to student applicants. *Acad Emerg Med*. 2005;12(1):89–92. doi:10.1197/j.aem.2004.08.047.



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