

# Holistic Review

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# Objectives

- Recruit a more diverse applicant pool
  - Use a structured “tool box” approach
- Holistically review fellowship applications
  - Think about qualifications besides metrics
- Enhance mentorship activities
  - Maximize success of all trainees
  - With a focus on those from different backgrounds

# Assess Your Program

- Track the numbers of:
  - URM Applicants
  - URM Interviewees
  - URM fellows joining your program
- Know the faculty data
  - Departmental statistics of URM faculty
- Believe that recruitment of URM applicants is important

# Ask for an external look (Not a site visit)

- Current minority trainees (if you have any)
- Medical Students
- Faculty
- Another program director
- Staff members

# What they told me

- Website
- Faculty
- Faces
- Mission
- Open conversation
  - It's ok that you aren't black
  - Ask questions and about what it is like
  - Be prepared for the answer

*When  
things go well,  
look in the  
mirror.*

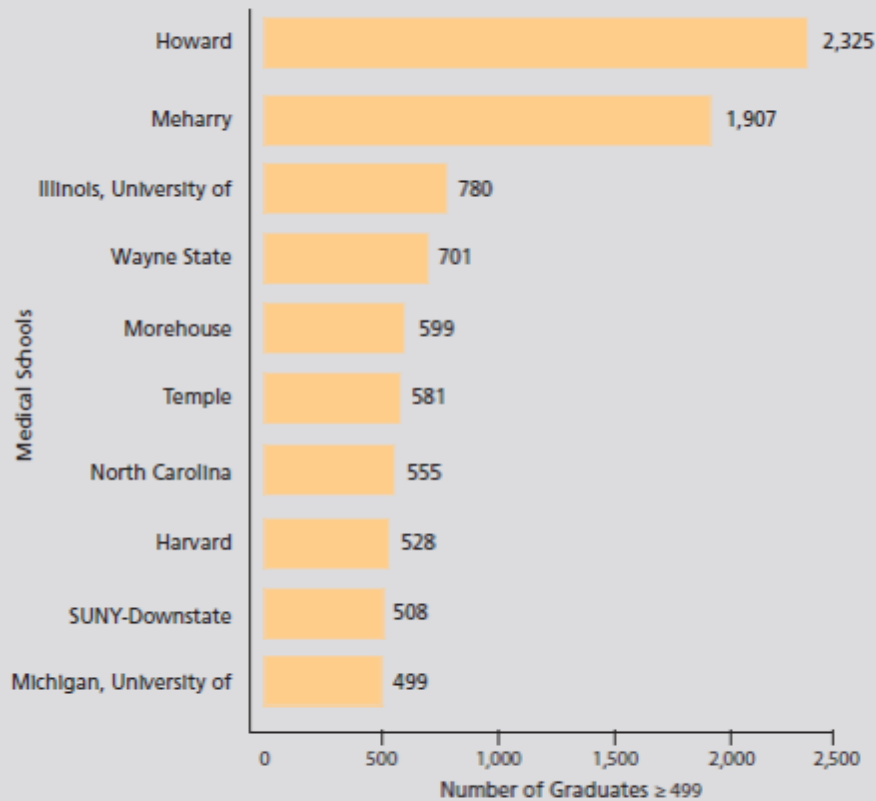
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# Step One Recruitment

- Examine the applicant pool
- Look at schools who traditionally train URM physicians
- Ask yourself why certain trainees might not be applying
- Track minority applicants separately
  - Invite “risky” applicants
- Tell your faculty that this is important

# Medical School Graduates

**Figure 20: U.S. Medical Schools Graduating 499 or More Black or African-American MD Physicians, 1978-2008**

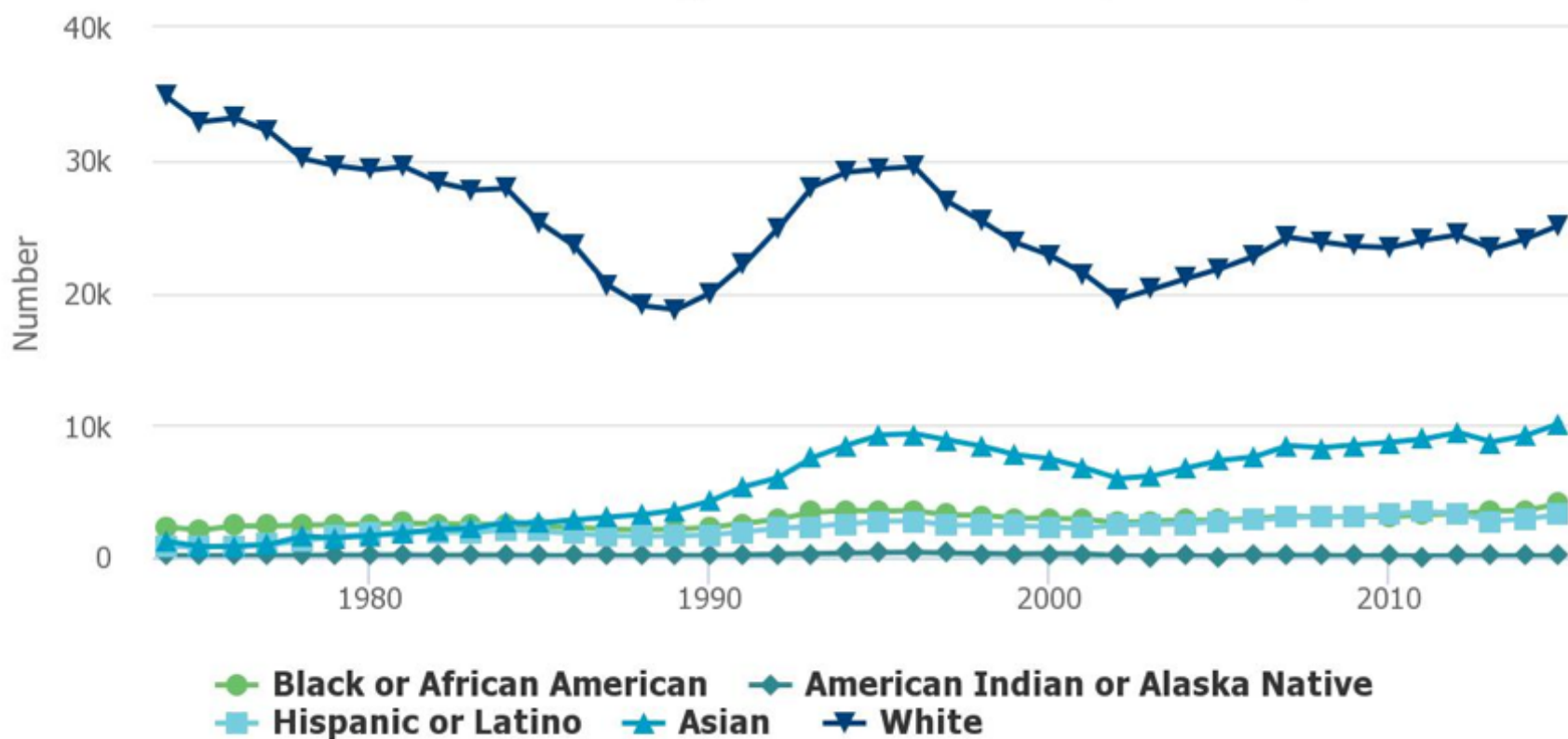


Note: The data include U.S. medical school graduates from 1978 to 2008 only.  
Source: AAMC Data warehouse: Minority Physician Database, AMA\_Masterfile\_R, App\_Bio\_R, as of 11/30/2009.

# Figure 4. Number of U.S. medical school applicants by race and ethnicity, 1974-2015.

Note: Beginning in 2002, individuals could identify as more than one race. For all years presented here, data are included only for individuals who identified with a single race/ethnicity category.

Source: AAMC Data Warehouse: Applicant and Matriculant File, as of Jan. 4, 2016.





# Medical School Applicants by Race/Ethnicity (alone)

AAMC data

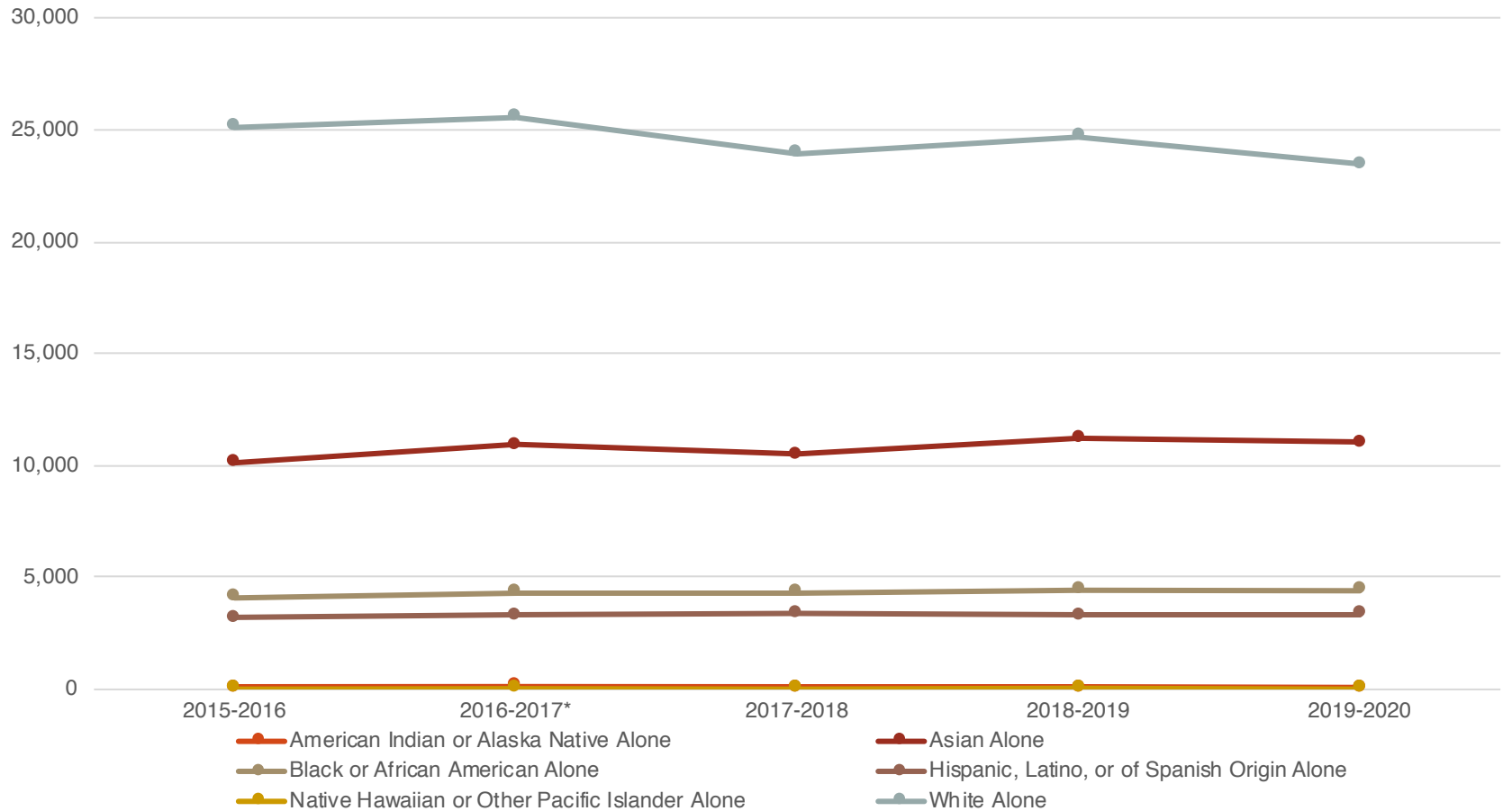
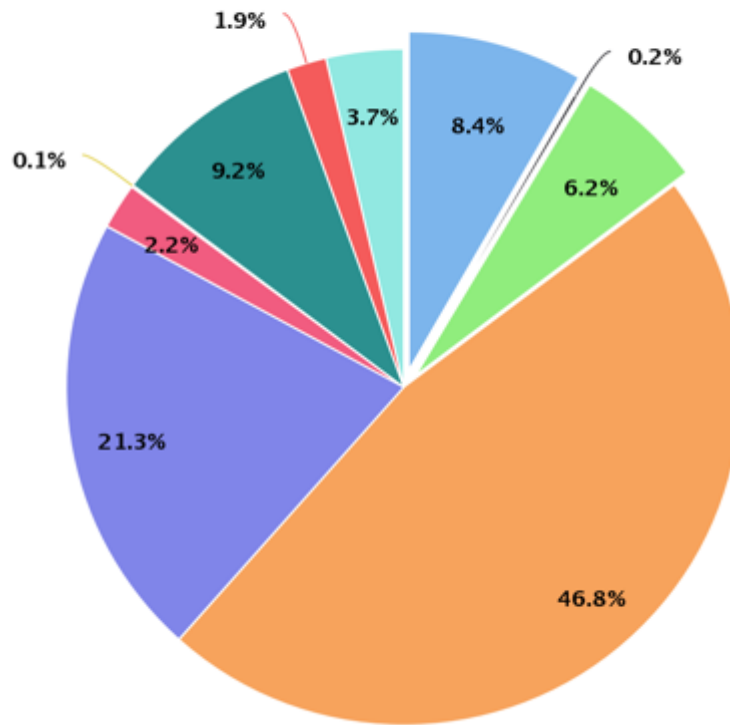


Figure 2. Percentage of applicants to U.S. medical schools by race/ethnicity (alone), academic year 2018–2019.



*Click on legend item below to add or remove a section from the report.*

- American Indian or Alaska Native (109)
- Asian (11,218)
- Black or African American (4,430)
- Hispanic, Latino, or of Spanish Origin (3,297)
- Multiple Race/Ethnicity (4,856)
- Native Hawaiian or Other Pacific Islander (53)
- Non-U.S. Citizen or Nonpermanent Resident (1,948)
- Other (1,167)
- Unknown Race/Ethnicity (1,013)
- White (24,686)

# Holistic Review

- Holistic review is a flexible, highly-individualized process by which balanced consideration is given to the multiple ways in which applicants may prepare for and demonstrate suitability as residents and physicians.
- Under a holistic review framework, candidates are evaluated by criteria that are institution-specific, broad-based, and mission-driven and that are applied equitably across the entire candidate pool

# Application Review

- EAM
  - Experiences
  - Attributes
  - Metrics
- We are pretty comfortable with METRICS
  - Grades, step scores, number of papers, reputation of institution (?)

# Experiences

- How did the applicant get here?
- Examples
  - Care for a family member
  - Employment history
  - Geography distance
  - Research type
  - Volunteerism



# Attributes

- Skills and abilities, personal and professional characteristics, demographics
  - Listening skills, written and verbal communication, critical thinking, multilingual abilities
  - Intellectual curiosity, motivation, resilience, integrity, persistence, empathy
  - socioeconomic status, parental education levels, geography, being a first generation college student, race, ethnicity, and gender

# Where do you find these?

- CV
  - Opening summary
  - Types of research, activities
  - Leadership
- Personal Statement
  - Family hardship, illness, empathy
  - Path to medicine
- Letters
  - Perseverance, leadership, resiliency, communication
  - Innovation
- MSPE, additional activities, professionalism

# What are you looking for?

- Future career goals
- Clinical skills
- Prior leadership, work ethic
- Diversity experiences
- Match for your program strengths
- Needs of the institution, region



# Enhancing Mentorship

# A Primer for Mentoring Across Differences

- Express an earnest commitment to the trainee's success
- Be Curious!
  - Understand their unique lived experience
- Express Empathy
  - Often have unique stressors
  - Often feel they reflect on their families and communities
  - Often feel they are role models in their communities
- Celebrate their successes (build their self-efficacy)

# A Primer for Mentoring Across Differences

- Be prepared for a range of concerns on part of resident:
  - Not fitting in
  - “Imposter” syndrome
  - Social isolation/Lack of support network
  - The Tax
- Be prepared to mentor them about the social conventions/constructs of medicine
- Encourage Social Networking
  - ODI
  - SACNAS
  - Meet the professor sessions

# Retention and Support

- Address career plans early on
- Ask about (encourage) plans to stay in the area
- Inquire frequently in small groups about experiences on campus and in the community
- Be specific: What do we need to do to keep you here?



# Faculty Development

- Reflective Sessions (with or without trainees)
  - Discussion of published pieces such as
    - What to do when a family asks for a white doctor (Pediatrics)
    - A Silent Curriculum (JAMA)
- Panel discussion of URM faculty and their experiences while in training

# 5 key steps to building a URM Mentoring Program

1. Self-assess current strengths and opportunities
  - Focus groups with residents and faculty
2. Use national (AAMC) and regional organizational resources
3. Develop strategic plan for minority faculty recruitment
4. Recruit, support, and encourage faculty interested in URM recruitment
5. Adopt best practices of successful departments within the institution and regionally

# A Framework for Inclusive Graduate Medical Education Recruitment Strategies: Meeting the ACGME Standard for a Diverse and Inclusive Workforce

Alda Maria Gonzaga, James Appiah-Pippim,  
Chavon Onumah, Maria Yialamas. 2019.  
*Academic Medicine.*



# Lessons Learned

- Ask for honest feedback from your residents
- Involve medical students
  - Participate in their activities (e.g., SNMA, LMSA)
  - Host meet and greet sessions to talk about careers
- Utilize the resources that exist in the SOM, the health system and your Department
- Unmeasured advantages of increased diversity
- Approach Diversity Recruitment the way you would any new initiative...Play to Win!