

## INTRODUCTION

Due to COVID-19, healthcare systems in the United States have made various changes, including how training programs conduct prospective resident interviews. Before COVID-19, the Physical Medicine and Rehabilitation (PM&R) Department at East Carolina University (ECU) conducted in-person interviews that consisted of resident interactions along with orientation and in-person interviews with faculty and Chief Residents. Over the past few years, the Accreditation Council for Graduate Medical Education (ACGME) has recommended virtual interviews for all training programs. This project highlights the changes and improvements that have been made to streamline the virtual interview process to be more time-efficient and reduce the overall amount of interview days that can affect department operations.

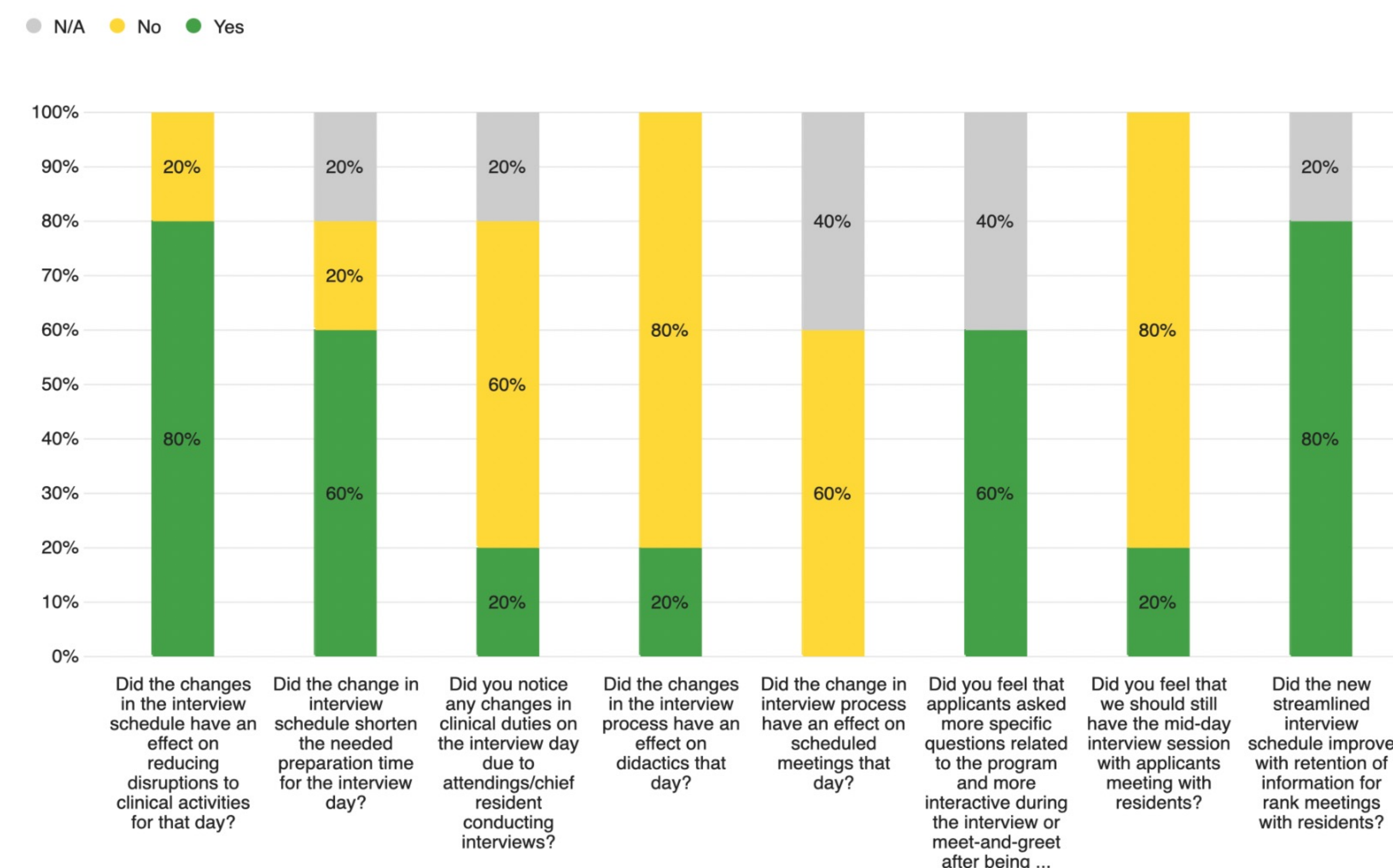


## METHODS

The PM&R Department at ECU changed the interview day format to minimize disruptions to the department's education and clinical care schedules. Adjustments were also made to make the day more efficient for the applicants. The interview schedule was changed from 12 half-days of interviews for six applicants to four total interview days, consisting of three sessions with approximately six applicants, thus 18 interviews per day. Interview season started on Mid-October 2023 and concluded in November 2023. On the Monday prior to the interview day (Wednesdays), each applicant received a department orientation PowerPoint and WebEx links via email for the resident/applicant to review in preparation for the interview. These links were for the resident/applicant virtual meet and greet and for the actual virtual interviews. Despite the previously mentioned changes, the time that each applicant had in the interview remained consistent with previous interview cycles.

## RESULTS

These structural changes in the interview format for the PM&R Department at ECU resulted in faculty and Chief Residents being able to provide patient care for five additional half-days of clinic throughout the interview cycle. With the alterations made to the interview schedule, it was estimated that clinicians were able to schedule appointments for 24-36 additional patients. An official survey was completed by the PM&R resident physicians. The survey results suggest that the previously mentioned changes led to fewer disruptions in clinical activities during the interview day, less time needed to prepare for applicant interviews, resident applicants asking more targeted questions about the program, and improved retention of applicant information during resident rank meetings.



## DISCUSSION

The alterations in the interview day resulted in various positive outcomes among residents of the PM&R department. In addition to positive feedback from residents, clinicians were able to schedule additional patients during the interview season. These results suggest that modifications can be made during the virtual interview process to improve efficiency in patient scheduling during interview season as well as interviewing and ranking applicants.

## CONCLUSIONS

COVID-19 led to the recommendation that all resident applicant interviews be virtual. With this change comes the opportunity to create an interview process that streamlines the approach to applicant interviews. The interview season was overall shorter, provided fewer disruptions for the training program, prepared applicants better for the interview day, decreased interview season fatigue, and allowed more time for the final evaluation and ranking process to occur.

## Future Developments

An official survey will be completed by members of the department outside of residents to expand feedback on how the streamlined interview process impacted faculty throughout the interview season. Further development of the interview process will include providing a survey to applicants to implement changes based on applicant feedback.

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-<https://www.istockphoto.com/illustrations/virtual-interview-job>