Virtual breakout rooms: an effective approach to offer guidance to medical students on residency applications

Salles de réunion virtuelles : Une approche efficace pour offrir des conseils aux étudiants en médecine sur les demandes de résidence

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Introduction

Abrupt shifting from pre-clerkship clinical experiences to virtual learning have exacerbated anxieties around CaRMS and reduced in-person mentorship opportunities.\textsuperscript{1} Although the Canadian Resident Matching Service (CaRMS) is stressful, resident panels have previously improved medical students’ understanding and preparedness around CaRMS.\textsuperscript{2,3} However, conventional in-person panels may present confidentiality concerns that discourage candid discourse. Thus, University of Toronto medical students piloted two innovative online events with large and small group components to counsel students about CaRMS. These virtual events employed small, non-recorded, cycling breakout rooms between residents and medical students, and comprised intentional panel diversity across specialties, genders, training sites, and experience with being unmatched.\textsuperscript{4} This format may foster a safe environment with exposure to various mentors in a single event.

Innovation

This event was designed to enable students to ask residents about their CaRMS experiences in a confidential and informal setting. There was purposeful diversity related to specialty (paediatrics, general surgery, family medicine, psychiatry, anesthesia, and internal medicine), race, gender, and training site. To normalize and destigmatize not matching, we included a resident who was previously
The event began with introductions from eight resident panelists to attendees in one virtual room using a Zoom videoconferencing platform. Concurrently, event organizers arranged breakout rooms of seven students and one resident. This ratio was chosen as small group mentorship (5-8 mentees) effectively fosters relationships and support.

Within breakout rooms, students had 15 minutes to freely ask residents questions about CaRMS (e.g., process, experiences, and specialty-specific advice). Faculty were not in breakout rooms to ensure students felt comfortable asking questions without fear of judgment. After 15 minutes, the executive team cycled residents into the next breakout room to speak with other students. This process repeated until the final 15 minutes, during which groups returned to one room for sharing and concluding remarks. Both events lasted 90 minutes each. Following the event, student attendees completed an optional questionnaire to evaluate the initiative. Survey questions were original and reviewed by supervising faculty (eSupplement).

This project was exempt from ethical review by the University of Toronto Research Ethics Program.

Outcomes
Almost half of student attendees (27/56, 48%) completed the evaluation to rate their understanding and attitudes around CaRMS on a 5-point Likert scale (Figure 1). Overall, respondents reported satisfaction with the session; most stated they would attend again (25/26, 96%) and would recommend it to others (24/26, 92%). Few students (2/27, 7%) found the session unhelpful in understanding residency applications and only one (1/26, 4%) reported they would not recommend this session.

Next steps
Moving forward, consideration should be given to continuing the event virtually given its success and ability to accommodate many participants. For in-person sessions, similar principles of cycling between small groups should be considered over traditional panel-style mentorship. For ideal mentor-mentee ratios, more frequent events, rather than a greater single event capacity, may be required. Funding may be sought for resident honoraria. Future qualitative studies should investigate long-term implications of these virtual sessions and the efficacy of cycling, non-traditional panels. Studies may also explore potential benefits of diverse panelists.
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References


