

dear residents

Emergent Change

April 23, 2023

Dear Residents,

In 2018, the residency program completed an ACGME required self-study. This included a SWOT analysis (strengths, weaknesses, opportunities and threats). Even as we reflected on our many strengths (and there are numerous), we correctly predicted that an expanding clinical enterprise would result in a shift in the tight bond between clinical care and the teaching mission. Not so long ago each patient in our health care system was frontlined by a trainee (resident or fellow). The first place this changed was hospital medicine – beginning at Parkland, followed by the VA and was already in place when Clements opened. Then other services followed, and I expect that we will see the creation of more non-teaching service lines. We can view this both as a threat and as an opportunity. A threat because it potentially reduces trainee majority ownership of clinical care. And as an opportunity because we can right-size the clinical care to education balance.

Reflecting on an analysis of the [recent national match results](#), there are a few noteworthy signals:

The number of USMD applicants to all programs declined by 1.8%, but internal medicine saw a modest increase of 0.7%, while interest in obstetrics and gynecology and emergency medicine declined.

Table 1. Percent Change in U.S. MD Senior Applicants From the Previous Application Cycle by Specialty

Specialty	2020	2021	2022	2023
All Specialties	2.2%	2.9%	0.5%	-1.8%
Emergency Medicine	7.1%	7.8%	-18.8%	-21.4%
Family Medicine	-3.4%	-3.3%	-1.7%	-3.0%
Internal Medicine	1.7%	0.6%	3.7%	0.7%
Obstetrics and Gynecology	0.0%	0.1%	4.6%	-5.2%
Other	2.6%	3.6%	5.9%	-1.1%
Pediatrics	1.8%	0.0%	-4.5%	-1.3%

In the 13 states that have reproductive health care restrictions, there was a 3.0% drop in USMD applications. However, most positions did fill because “put simply, applicants are likely to want to match *somewhere* — even the least desirable location — rather than *nowhere*.”

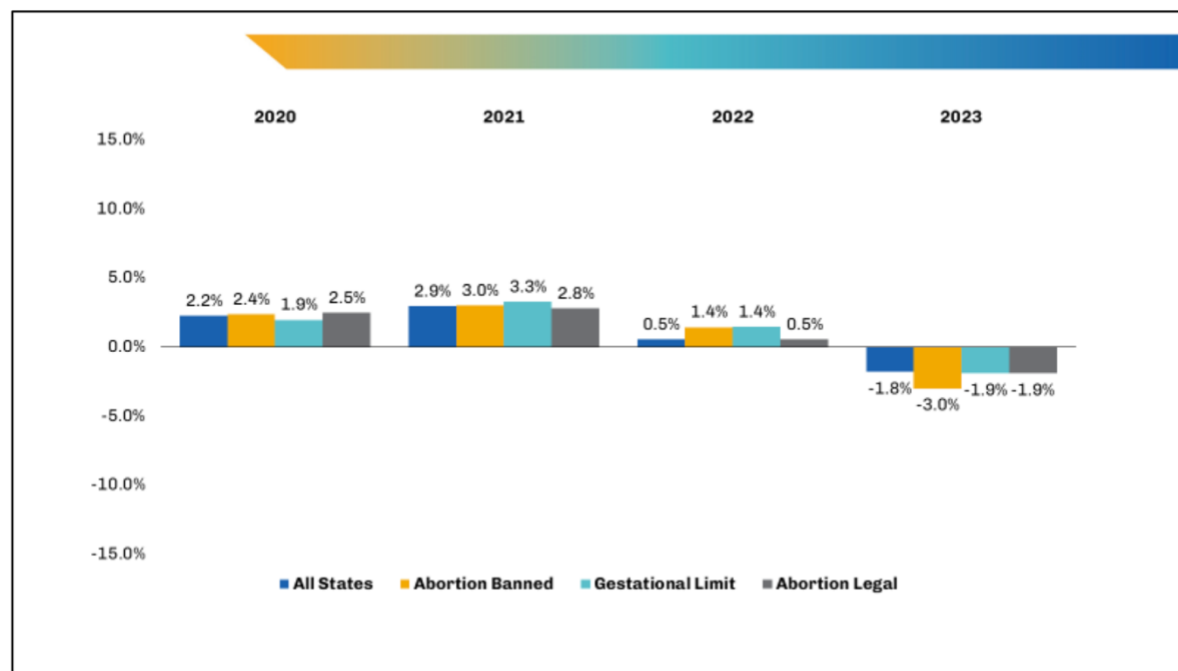


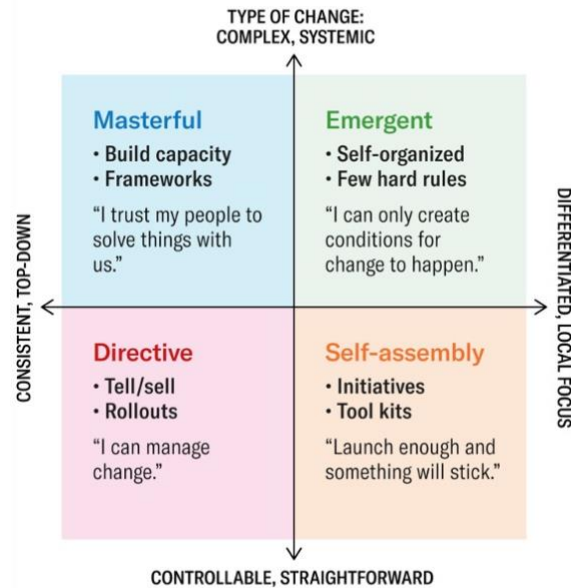
Figure 1. Percent change in U.S. MD senior applicants from the previous application cycle by state abortion-ban status.

These trends have implications for our program even though we are a sought-after training program. Sociopolitical forces are outside our sphere of influence, but we must further strengthen and continue to modernize our program.

There are 4 ways one can initiate and manage change as shown in the figure below:

The Change-Approaches Framework

This research-backed guide can help leaders decide which approach to change will work best for a given situation. Masterful and emergent approaches are the most correlated with success.



Source: Still Moving Consultancy, adapted from Sustaining Change, Leadership That Works, by Deborah Rowland and Malcom Higgs (Wiley, 2008)

HBR

I will advocate for “masterful change” by engaging our key stakeholders – hospitals and the faculty. However, masterful change is typically led by the highest-ranking leaders and is probably less likely to be achieved by program directors acting alone. I do think that “emergent change” is within the realm of program directors. It starts by identifying hot spots, leaving room for experimentation, learning from rapid feedback loops and by realizing the [7 conditions of emergent change](#):

Emergence in Organisations

	Process	‘Condition’
❖	Everyone speaks with many others	Connectivity
❖	Relevant & ‘irrelevant’ inputs	Diversity
❖	Many short ‘rounds’	Rate of information flow
❖	Safe, egalitarian environment	Lack of inhibitors
❖	Clear question, tight time-keeping	Good boundaries
❖	Relevant topic, desire for answer	Intention
❖	Wait for the question...	Watchful anticipation

Table 1 Emergent inquiry characteristics

Our 2018 self-study occurred 5 years ago. Conditions have changed. An adaptive organization needs to respond and create the conditions for emergent change. We have many such conditions already in place: we are connected, we have free flow of information, we are exceptionally diverse, and we are safe and egalitarian. Your voice is heard, and your observations and suggestions are catalysts for continuous improvement.

I will convene an interim self-study for our program and will invite you to the table. Together we will create the conditions for achieving the change we need to remain a competitive and superlative place to train.

Eid Mubarak to all who celebrate!



Photo by [Slashio Photography](#) on [Unsplash](#)

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