Implementation and feasibility of a resident – student mentorship program and its impact on student satisfaction and resident evaluations.

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Overview:
OB/GYN residents score lower than residents from other specialties on the AAMC graduation questionnaire as teachers. This holds true in our program as well, and scores appear to be worsening. Resident physicians and medical students are both concerned about the lack of opportunity to work with each other regularly (continuity) due to the increasing nature of shift work for residents, changes in medical student curriculum, and lack of overlap in resident and student schedules. This may contribute to student dissatisfaction with their teaching environment and overall clerkship experience.

Objective:
In addition to a Residents as Educators curriculum, we implemented a resident - student mentorship program during the Third-Year Obstetrics and Gynecology Clerkship. We studied its implementation and feasibility and evaluated its impact on student satisfaction and students’ evaluations of resident teaching.

Methods:
Students in the required 3rd year OB/GYN clerkship rotating at one of our 3 sites were paired with PGY2-PGY4 OB/GYN residents during their clerkship experience.

Expectations of mentorship program:
- “Coffee” meeting during first week of rotation
- Four half-days working with mentor/mentee
- Resident to review student submitted H&P
- Resident to observe and give feedback on: 1. Student obtaining a gynecologic and obstetric history
  2. Student performing a pelvic examination
- Anonymous surveys were given to students and residents at the end of the clerkship
- End-of-clerkship students evaluations of the pilot site were compared to the evaluations at the “control” sites.
- “Please rate the residents as educators”
  - Prior to study date, residents were rated as educators at a mean of 3.85 out of 6 (SD 0.99).

Results:
From June to October 2018, 30 students rotated at the mentor program site, and 68 students rotated at the other two sites.

17 Student Survey Responses
Did you meet with Resident during the first week? 11
How many half-days did you spend with your resident mentor? Average 2.5 (0-4)
Did the resident mentor review an H&P? 8
Did the resident mentor observe you obtain a OB/GYN history? 8
Did the resident mentor observe you perform a pelvic examination? 6

13 Resident Survey Responses
Did you meet with the student during the first week? 9
How many half-days did you spend with your resident mentor? Average 2.7 (0-6)
Were you able to review an H&P? 7
Were you able to observe student performing a pelvic examination? 6
How would rate the mentorship program (0-5)? 3.4

End of Clerkship Evaluations:
Students’ rating of residents as educators at the mentor site were not statistically significant as compared to the other two sites (4.49, SD 0.72 vs. 4.35, SD 0.76, p=0.39).

Discussion:
Residents play a key role in the student experience during the OB/GYN clerkship. However, lack of continuity can significantly impair this relationship. The implementation of a resident – student mentorship program was well received by students and resident alike as it gave both groups an opportunity to build a stronger relationship.

Written comments from students and residents were overall positive but also highlighted challenges in the execution of the program. These challenges were mainly secondary to scheduling issues as student and resident schedules do not overlap. Additional time constraints due to clinical duties also pose challenges.

Based on our experience conducting this pilot, we will continue the resident – mentorship program. The positive aspects of the program seem to stem from the identification of the pair and the accountability built by the mentorship. We will work on improving the coordination of student and resident schedules as well as reducing some of the expectations initially set.

Conclusion:
A resident/student mentorship program is feasible and may result in higher teaching evaluations of residents.

REFERENCES