



THE CULTURE OF RESIDENCY PROJECT SUMMARY

The Culture of Residency national project was a first-of-its-kind quantitative assessment of the clinical learning environment and professionalism from the perspective of resident physicians.

The validated C - Change Resident Survey[©] assesses 13 dimensions of the culture: Vitality, Relationships/Inclusion/Trust, Self-Efficacy in Career Advancement, Values Alignment, Ethical Moral Distress, Institutional Support, Respect, Mentoring, Gender Equity, Minority Equity, Work-Life Integration, Leadership Aspirations and Competencies. In addition to documenting the culture of residency programs, the survey is a credible and powerful tool for facilitating improvement. The aims of the project are to:

- Document the environment for learning and professionalism of residents in U.S. teaching hospitals.
- Examine associations among resident perceptions of the organizational culture and demographic characteristics such as gender, ethnicity/race, and year of residency training, program specialty and site.
- Improve the learning environment and professionalism for residents.

Fourteen public and private academic health systems participated in the study. The sites were stratified by diverse regions of the U.S: two were in Massachusetts, three in NY, two in the Washington DC area, one in the mid-west and southern regions, two in the south west and three on the west coast. The survey was administered electronically by C - Change between November 2014 and June 2015. Survey response rate was 70% and captured the experiences of over 1700 residents in 34 residency programs in three major specialties- Internal Medicine, General Surgery and Pediatrics.

In December 2015, each participating residency program received its individual results report together with aggregated national comparison data for its specialty. Each designated institutional officer also received a report aggregating data from the site's three residency programs, with national comparisons.

Survey findings were used by residency programs, GME and hospitals to identify dimensions of their culture requiring improvement, to address wellbeing, and to initiate interventions. The survey directly aligns with the new ACGME Pathway objectives (clinical learning environment, patient safety and professionalism CLER foci).

The Culture of Residency study was a joint project of the National Initiative on Gender, Culture and Leadership in Medicine: C - Change and the CIR Policy and Education Initiative.

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