

AOA Task Force
WUSM 2019
Recommendations

Task Force Members

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Task Force Charge

After review of data from WUSM over the last 10 years, there is clear evidence of racial disparity in clinical grading, with students who are traditionally under-represented in medicine (URiM) being less likely to receive honors than those who are non-URiM. Multivariate regression analysis suggests that much (but not all) of this difference is attributable to shelf exam scores. This difference inevitably leads to a disparity in the pool of students eligible for AOA. In September 2019, after review of data, and consideration of input from students, faculty and staff, the decision was made to continue selection of AOA candidates in the fall of the senior year with a modification that all students who self-identify as URiM are considered eligible for AOA in addition to the top third of students eligible based on academic achievement.

Given the timing of this decision, and discerning a need for thoughtful review and consideration, Dean Aagaard convened this task force with the following charge:

- **Should Washington University School of Medicine continue to support election of medical students to our AOA chapter?**
- **If so, how should eligibility for AOA be determined?**
- **Is there a mechanism by which we can create a more holistic review process while maintaining AOA as an academic society?**

Process

The Task force met 4 times on October 25th, November 13th, November 25th and December 18th.

Background reading and information presented included:

- Boatright et al 2017 “Racial Disparities in Medical Student Membership in the Alpha Omega Alpha Honor Society”
- Teherani et al 2018
- Thilan et al Academic Medicine 2018
- Leadership Letters – AOA, Equity and Wellness 2018 Icahn School of Medicine at Mount Sinai
- Reinis and Aaron The Consequences of Structural Racism on MCAT 2019
- Internal findings and communication with students regarding racial differences in grading – communication to students
- AOA Decision for the graduating class of 2020, Sept 2019
- Data regarding disparity in measured performance on clinical clerkships:
 - Clinical grades – percentage of students receiving honors
 - NBME Subject exam
- C-ECG findings and recommendations
- National Resident Matching Program (NRMP) data regarding:
 - AOA by Specialty
 - Program Director Survey results
 - Characteristics of Matched Seniors
- Internal data for URiM and dual degree student AOA membership

Student Input

In addition to student participation on the task force, students created a survey to gather input from the medical student body. These data were presented at the 3rd meeting.

Complete student presentation with [Key findings here](#).

Student perspectives on AOA impact

- Students believe AOA at WUSM is not necessary because WUSM has a strong reputation for academic rigor and productive graduates.
- AOA confers an advantage but not having it is not a large detriment
- AOA’s existence means that it must help those who have it and hurt those who do not
- Attainment of AOA is important for applicants seeking to match into competitive specialties and programs
- Some students think AOA has an impact beyond residency, many do not, and many are unsure

Summary

- Students are largely uninformed about the AOA nomination and election process, and are generally unaware that their dean’s letter paragraph is included for consideration by the selection committee
- Majority of students expect a competitive match based on specialty, location, couples match, etc.
- Even if unsure, students would like to be competitive

- Students believe that, if a school awards AOA, receiving AOA has a positive impact on one's career
- If AOA remains at WUSM, students would prefer a holistic process

Selection Process and Internal Data

The [AOA selection process](#) states:

For medical students, the Dean of the School of Medicine or his/her designee identifies a pool of candidates who approximate in number the upper quartile of the class expected to graduate, and who have excelled in the criteria for nomination to AOA membership—scholastic achievement, professionalism, leadership, community service, and research. Scholastic achievement refers to the qualities of becoming, and being, an excellent doctor—trustworthiness, character, caring, knowledge, skills, demeanor, proficiency of the doctor-patient relationship, promise of future leadership, decision-making, compassion, empathy, altruism, values of the profession, teamwork, life-long learning, and servant leadership.

The current selection process for AOA at WUSM includes identifying the top third of our students based upon grades. In addition to scholastic achievement, the selection committee considers professionalism, leadership, community service and research and elects 1/6 of the class for membership into AOA. Initial selection occurs in September, prior to submitting applications for residency. Since many students, particularly MSTP's, do not have core clerkships complete at that time, a second election occurs in December of the senior year to select more students to reach the full 1/6 of the class.

Discussion and Findings

- There is disparity in clinical grades at WUSM
- Much of this disparity is due to the NBME subject exam score
- Clinical grading is the primary consideration for AOA eligibility
- Changes are being made to mitigate these disparities such as:
 - Grading Committees for the clinical clerkships
 - Individual attendings not assigning grades on CEFs
 - Proposal to remove shelf exam from grade (deferred)
 - Equitable access to resources
 - All students receive UWorld subscriptions for NBME shelf preparation and USMLE step 2
 - For 2019 AOA elections, a modification was added so that all students who self-identify as URiM were considered eligible for AOA, in addition to the top third of students by academic achievement who are eligible by national criteria
 - Final C-ECG recommendations are in preparation
- Concerns raised regarding representation of MSTPs and dual degree students in AOA (out of scope for this Task Force)

- Concerns raised regarding Gold Humanism Honor Society (GHHS) selection (out of scope for this Task Force)

The committee discussion included the pros and cons of maintaining vs suspending AOA elections summarized here:

| Benefits of maintaining AOA | Benefit to suspending AOA | Cons to suspending AOA | Cons to maintaining AOA |
|---|--|--|--|
| -nationally recognized honor -may be helpful to students for match in competitive residencies -may help long term in an academic career -must include transparency of holistic process | -eliminating a structure that imposes bias -removing AOA may encourage programs to look more deeply into the entire application of our students (some risks b/c programs may use filters) | -potentially cause harm to students by the competitive disadvantage of not having this honor - may negatively impact students in the current graduating class -will require significant communication to residency programs, and if this is a temporary suspension, further communication will be necessary and complex. | -may perpetuate a structure that imposes bias -may create distrust by choosing to maintain a biased process -added stress for students to get Honors and focus on the shelf exam -may disadvantage dual degree students |

Recommendations

Recommendation #1 Suspend indefinitely WUSM AOA Student Elections

Given the data at our institution regarding bias in clinical grading, the task force concluded that continuing to elect students to AOA using grades as an initial screen for eligibility would propagate a system of bias. Until changes in AOA selection are made that eliminate or at least significantly mitigate this bias, the committee took the stance that AOA eligibility is flawed and as an institution we should suspend election for students. If AOA student elections are suspended, it will be necessary to devise a comprehensive strategy to notify program directors of the suspension; this could include, but not be limited to, a statement in the medical student performance evaluation (MSPE/Dean’s letter), publication in academic or lay media, and direct communication to specialty academic societies and/or program director groups.

Recommendation #2 Mitigate bias in Clinical Grading

We recommend continued evaluation of the school’s grading distribution to assess for bias in clinical grades. The Committee to Evaluate Clinical Grading will provide recommendations to mitigate bias in clinical grading with a multifaceted approach. Changes are being made in the current grading process so progress is being made. In addition, progress should be assessed by

following the CECG recommendations for evaluation of the recommended changes by the PE/CQI unit.

Recommendation #3 Reconvene AOA task force in the future

After annual evaluations and assessments of grade disparities led by the PE/CQI unit, we recommended reconvening an AOA task force to discuss and determine the status of either reinstating elections or removing student elections to AOA completely. If student elections are reinstated, we recommend review of the process and criteria for AOA eligibility and election. We recommend that the AOA awardees reflect the values of WUSM.

Recommendation #4 Expand and reconstitute WUSM AOA chapter selection committee

Since WUSM will retain an AOA chapter and continue to elect residents, alumni and faculty, it is recommended that the makeup of the AOA committee be increased in size and also adequately reflect the diverse makeup of the medical school community. Increasing the diversity of the selection committee will facilitate a more thorough understanding of each nominee's contributions to the medical field during their training to ensure that all activities are considered based on their individual merits.

Recommendation #5 Increase the transparency and rigor of the WUSM AOA review process

If it is decided that the WUSM AOA chapter will continue to elect students, the selection process should be redesigned to increase transparency and facilitate a more holistic review of students' achievements. Currently, consideration of research, cocurricular, and extracurricular activities are based on students self-submitted dean's letter paragraphs, often without the knowledge of the students. The AOA selection committee should consider increasing the transparency of this process, and instituting an application that allows students to clearly list their activities and contributions to the field.

References

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