

Residency recruiting: Are virtual open houses here to stay?

Peter Metcalfe

Division of Pediatric Surgery, Department of Surgery, University of Alberta, Edmonton, AB, Canada

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It is very important to acknowledge another aspect by which the medical community has been affected by the COVID-19 pandemic — in the fundamental career choices of our students. I applaud the University of Ottawa's documentation of their urology residency recruitment experience.¹ Having just completed a second year of “virtual electives” and staring down yet another year of restrictions, the data is welcomed.

Electives are vital for medical students to ensure they select a career and program that best suits them and for training programs to ensure their incoming residents are suited for their program and its rigors of training. Thankfully, technology has helped mitigate the loss of electives. The Royal College of Physicians and Surgeons of Canada's Urology Specialty Committee, and its Chair, Dr. Keith Rourke, should be applauded for initiating, coordinating, and promoting the virtual open houses across the country.

Specifically, regarding the University of Ottawa's experience, as discussed in this issue of *CUAJ*,¹ while the dedicated webpages, Twitter, and Instagram were very popular, they did not seem to be as integral to the students' decision-making process. I think this reinforces the need for human interaction so that students “get a feel” for the program. Websites are also expensive to develop and social media is labor-intensive to maintain.

It would be very interesting to know how the various initiatives employed for recruitment affected students' rank order lists. Did they compare one institution's information tools to another's? Which aspects of those mattered most in their decision—the information provided or the social interaction with the faculty and residents?

Finally, as virtual open houses were a tool used by most of the programs, I am curious as to how many used this platform as a basis for their evaluation of students, in addition to formal and informal evaluations, of course. Furthermore, did many of the students feel pressure to attend all of the

open houses across the country to minimize the potential for negative impressions?

In Edmonton, we found it difficult to coordinate students' schedules with the challenges of various time zones. By the time our residents and staff finished their workday, it was very late in the evening for the Memorial students! Therefore, we offered an evening session and a Saturday session, which may have resulted in an excessive burden on our CaRMS team and the students.

It must be noted that in the University of Ottawa study, data was collected immediately following the open house, so there was potential for bias; furthermore, the 100% response rate must be considered, in part, due to a potential fear of negative consequences.

Some additional questions arising from this work include: How did the University of Ottawa react to this data? For their second year of restricted electives, did they focus more on the open house and less on the website and social media campaigns? Did they consider doing more than one open house? And what are their plans for the 2022–23 year?

We are so fortunate to belong to a specialty where important initiatives like virtual open houses are promoted and organized centrally, and the subsequent results are freely shared among programs. Hopefully, this will be the last year under COVID restrictions, but these innovations are likely to carry forward and will ensure that urology programs across the country continue to be promoted to the best and brightest students in the country.

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Reference

1. Nham E, Kumar R, McAlpine K, et al. Development, implementation, and uptake of a novel Canadian Resident Matching Service (CaRMS) residency recruitment committee strategy in the era of COVID-19. *Can Urol Assoc J* 2022;16:206–11. <http://dx.doi.org/10.5489/cuaj.7676>

Correspondence: Dr. Peter Metcalfe, Division of Pediatric Surgery, Department of Surgery, University of Alberta, Edmonton, AB, Canada; pmetcalf@ualberta.ca