



# TRANSFORMING the Medical School Interview

**A new interview format is designed to better assess applicants' interpersonal skills and humanistic traits, and may be a more efficient predictor of success.**

BY JEN USCHER

**E**very year, the School of Medicine at New York Medical College selects 1,400 prospective students—out of the more than 11,500 who apply—to visit campus for an in-person interview. Starting last September, the Office of Admissions began using an innovative new tool to evaluate these aspiring physicians. Instead of meeting with a faculty member for a traditional 30-minute, one-on-one interview, the candidates rotate through a series of short, scenario-based interview stations. This format—known as the Multiple Mini-Interview, or MMI—is designed to assess communication and problem-solving skills, ethical grounding, and other personal traits

the admissions committee views as vital to becoming an effective physician.

“We already know about the academic work of an applicant, including their grades and MCAT scores, when we invite them for an interview. The purpose of the MMI is to look at other important personal qualities and abilities, such as empathy, collaboration, professionalism and cultural competency,” says Fern R. Juster, M.D., senior associate dean for admissions at the School of Medicine.

During the MMI, each applicant moves through eight different interview stations. The candidate has two minutes to read

a scenario posted on the door of an interview room. At a signal, he or she enters the room and begins a focused, six-minute discussion about the scenario with an interviewer. An automated voice prompt over a loudspeaker system announces when it's time to move on to the next room to discuss a new scenario with another interviewer. On a typical interview day, a total of 24 candidates complete the fast-paced circuit.

#### HEART OF THE MATTER

Developed a decade ago at McMaster University's Michael G. DeGroote School of Medicine in Hamilton, Ontario, the MMI format is gaining popularity. Thus



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The customized MMI system at the College was conceived and implemented by Fern Juster, M.D., left, James DeMaio and Robin Camhi Baum.

far it has been adopted by approximately 30 medical schools in the U.S. and Canada. While the specific scenarios used for the MMI at the College are kept confidential, some published examples include questions like these: is it ethical for a physician to recommend homeopathic treatments if there's no widely accepted scientific evidence to suggest they work? What should a physician do if an elderly patient reveals that she is being physically abused by her spouse?

"I tell our applicants that there are no right or wrong answers to these questions," says Dr. Juster. "We're challenging them to think about a situation so we can see how they organize their thoughts, interact with other individuals, and approach a problem that might be complex or new to them."

The medical school interview is no longer the exclusive province of faculty admissions committee members. Over the summer, the staff of the Office of Admissions recruited and trained 150 volunteer interviewers to participate in the MMI. They represent the broader community of NYMC and consist of faculty and staff members, alumni, students, allied health professionals, hospital staff, community members and organizers, and even patients.

#### COMMUNITY INVESTMENT

Robin Camhi Baum, M.S., director of admissions at the School of Medicine, says it's been particularly gratifying to reach out to the local community and enlist the help of so many volunteer interviewers. "Now we have a wide range of stakeholders who are more aware of and invested in what we do

here at New York Medical College," she says.

The MMI sessions are held every Monday and Thursday from mid-September through the end of April, and the interviewers commit to volunteer at least one afternoon a month. After each six-minute interview is complete, the interviewer gives the candidate a score from one to ten and writes comments on his or her performance. Later, when the executive admissions committee reviews the candidate's full application, they'll be able to see both a composite score and the individual comments and scores from all eight interviewers the candidate met with during his or her MMI session.

In fact, one of the main reasons Dr. Juster and her team decided to switch to the MMI format is that meeting with eight interviewers rather than one is fairer for the applicant. It mitigates the unconscious bias or interpersonal chemistry that may affect any single interview and gives the candidate multiple opportunities to show off his





or her skills. In addition, research conducted by the faculty at McMaster University School of Medicine showed that the MMI is a better predictor of how students will perform during their clinical clerkship than the academic measures traditionally used to select medical school students. “Tools such as grade point averages and MCAT test scores predict how students will do during the first two years of medical school, but until now we never had a reliable and valid tool that predicts how students will perform in the third-year clinical clerkship,” notes Dr. Juster. Thus the composite MMI score becomes an integral component of the holistic review of the applicant’s application including GPA, MCAT scores, the candidate’s personal statement, letters of recommendation, research, employment, community service and other volunteer experiences.

#### CUSTOM FIT

Dr. Juster and Ms. Camhi Baum spent months learning how other schools had implemented the MMI and deciding

how to adapt it to reflect the unique culture of New York Medical College. “We began by going on a fact-finding mission,” says Ms. Camhi Baum. “We observed how the MMI process works at UMDNJ-Robert Wood Johnson Medical School, spoke with the admissions staff at Stanford University School of Medicine to find out how they implemented the MMI, and eventually hired consultants from McMaster University School of Medicine to work with us.” The consultants shared insights from their own experiences on how to train volunteer interviewers and handle other MMI logistics. They also encouraged the admissions staff to tweak existing scenarios and create new ones that fit the College’s culture and identity.

James DeMaio, director of information management for the admissions office, oversees the day-to-day logistics of the Multiple Mini-Interviews, as well as setting up the systems that keep the interviews moving on schedule. He spent time working with Information Services, for example, to create a database into

which the interviewers can input their scores and comments, and creating the automated voice prompt system using an iPod and wireless speakers. He says he is receiving enthusiastic feedback on the MMI process from both the volunteer interviewers and the applicants. “They’ve told us they were impressed that logistically everything ran smoothly and they felt we prepared them for it well,” he says. Now colleagues at other medical schools are reaching out to the College for advice on how to adopt the MMI format, including the associate dean of admissions from the NYU School of Medicine, who recently paid a visit to campus to observe the MMI.

“Transitioning to the MMI has been both exciting and challenging,” says Dr. Juster. “But we believe the format will enhance our selection of students grounded in the humanistic traits and with the interpersonal skills necessary to practice medicine in an increasingly diverse and complex world.” ■