

Program Director FAQs

2026 Resident Reach Pilot

General/Overview (*all audiences*)

What is the purpose of Resident Reach, and why is the ABA exploring it?

Resident Reach is a longitudinal formative assessment currently being explored in a pilot format. It's designed to spark conversation between anesthesiology residents and teaching faculty, strengthen residents' clinical reasoning, and offer insight into their medical knowledge and confidence throughout training.

Since the 2016 introduction of MOCA Minute, programs have expressed interest in the ABA exploring a similar longitudinal assessment for residents. The ABA's 2025 Strategic Plan solidified a strategic need to engage trainees and programs early, including a new formative assessment for residents. In late 2024, the ABA conducted a Resident Reach pilot with a small group of programs and about 50 residents.

Building on learnings from that initial pilot, the ABA has selected a specific group of programs, representing a range of anesthesiology training environments across the country, to participate in a broader fall 2026 pilot of the Resident Reach platform. Through this pilot, the ABA seeks to understand how Resident Reach supports resident learning and dialogue within programs.

How does Resident Reach work?

Each week, two question sets will be released, each containing three questions in ascending order of difficulty: a cascading question from the BASIC content outline, a cascading question from the ADVANCED content outline and a case-based question. All three questions in a set share a common clinical theme, such as cardiac anesthesiology. Residents will need to answer each question presented to get access to the next in the set.

For cascading questions, residents choose whether to answer in their own words or view an answer choice and assess whether it's correct. After submitting a response, residents rate their confidence and can review the correct answer along with a key point and supporting references.

For case-based questions, residents work through a multi-part clinical case. After submitting their responses, they can view a random selection of other residents' answers, helping them self-assess their reasoning and see different approaches to the case.

When does the pilot run, and how often will questions be released?

The Resident Reach pilot runs Sept. 8 through Oct. 27, 2026. New question sets will be released every Tuesday at 9 a.m. ET from Sept. 8 through Oct. 13. Residents will have two weeks to complete

each question set.

Is Resident Reach a question bank or exam prep?

While Resident Reach questions are aligned with ABA exam content outlines, the pilot is not intended to function as a question bank or exam preparation tool. Instead, Resident Reach is a formative assessment that seeks to encourage reflection on clinical situations through structured question sets.

How does Resident Reach fit into the current training assessment landscape, including In-Training Exams (ITEs)?

The pilot is designed to explore how Resident Reach and the ITEs may connect in the future.

What does the future of Resident Reach look like?

This pilot aims to yield insights to inform future directions. Feedback on the experience, including how the tool is used within programs, will be gathered through pre- and post-pilot surveys, weekly question set feedback provided by residents, and participation data.

Pilot Logistics (*all audiences*)

When will residents see the weekly questions?

Six questions, divided into two question sets, will be released via ABA GO every Tuesday at 9 a.m. ET from Sept. 8 through Oct. 13. Residents will receive alert emails notifying them of the questions' release and available points each week. Program directors will receive weekly questions and possible points in advance via email, on the Friday preceding each Tuesday release.

What is a question set?

A question set is a group of three questions released together around a shared clinical theme. Two question sets are released each week of the Resident Reach pilot.

How long do residents have the opportunity to answer a question set?

New question sets open each Tuesday at 9 a.m. ET and remain available for 14 days, closing at 8:59 a.m. ET two weeks later. Residents can review questions they've previously answered, but unanswered questions cannot be completed after the set closes and will not be available for later review.

Where should I direct any questions about Resident Reach?

Reach out to coms@theaba.org with questions.

How will the ABA gather insights from the pilot?

Before the pilot begins and after it concludes, residents and program directors will receive surveys from the ABA about their experience. Program directors will also be encouraged to share a survey with teaching faculty so they can provide feedback.

Residents will also have the ability to provide feedback within Resident Reach after completing each question set. In-platform analytics will track participation throughout the pilot.

Program Director-Specific Questions

What role do program directors play in the pilot?

Program directors are expected to help facilitate participation in Resident Reach within their programs. During the pilot, they have the ability to track residents' progress over time and identify where they may need additional attention.

Their role may include sharing pilot information, encouraging residents and teaching faculty to engage with one another, and reviewing dashboard insights throughout the pilot.

Which residents will be enrolled in the program?

All CA-1 through CA-3 residents in participating programs enrolled via RTID will be opted into the pilot. Residents must be enrolled via RTID to be registered in Resident Reach.

Can new participants be added once the pilot has started?

New participants can be added at any time once the Resident Enrollment Form is completed, but residents added partway into the pilot will not receive access to questions from the preceding weeks. If a resident leaves training, they will lose access to Resident Reach.

I've added someone to my roster in RTID; how do I invite them to Resident Reach?

If your program is included in the Resident Reach pilot, any CA-1 through CA-3 resident added to your RTID roster will be automatically enrolled in Resident Reach, no separate invitation is needed.

How can I help create a more robust experience for my residents throughout the pilot?

Programs are encouraged to use resident responses as a starting point for discussion among residents and teaching faculty, though this will not be structured within the platform. Program directors can encourage residents and teaching faculty to engage with one another throughout the pilot and may share resident learning insights with teaching faculty as needed.

This might include reviewing weekly questions in advance, using them as teaching opportunities during educational sessions, discussing different clinical approaches and reasoning, and encouraging participation.

How will the ABA communicate with my program's residents?

The ABA will communicate via email to alert residents that their weekly questions have been released and will reach out before and after the pilot to program directors and residents with surveys to gather feedback. Residents will have the ability to communicate questions or feedback within ABA GO after completing each question set and can reach out to ABA staff directly via coms@theaba.org.

Beyond this regular communication, the ABA will correspond directly with program directors and provide resources that may be shared with residents and teaching faculty.

What role do teaching faculty play in Resident Reach?

Discussions with teaching faculty and attendings should be residents' primary avenue for clarifying questions and deepening understanding. Residents may find value in Resident Reach with active engagement, reflection on their responses and discussions with teaching faculty to clarify their clinical decision-making.

Program directors will receive full PDFs of weekly questions as well as pre- and post-pilot surveys, which they are encouraged to share with teaching faculty for review, discussion and feedback purposes.

My resident is unable to log in. What should I do to help?

Please email the ABA at coms@theaba.org for support.

Data Dashboards:

Where can I access data showing residents' performance in Resident Reach?

Program director dashboards, accessible via RTID, will present key data.

What kind of data will I be able to see in my dashboard in RTID?

Program directors will be able to review residents' full written responses, along with participation and correctness rates for their program compared to national averages. Data can be filtered and searched by resident or question, and exported for further review. Together, this can help program directors track resident progress over time, identify where residents may need additional attention, and tailor conversations to address gaps in clinical reasoning and judgment.

When will I see residents' performance data? Is the dashboard in RTID updated live?

Yes, the Resident Reach dashboard is updated live, so program directors will see new data as available when they refresh the page.

Can I download the data?

Program directors can export the full text of the active question sets from the Current Questions

dashboard, and they can download the full text of their residents' responses from the Question Responses dashboard. This data can be filtered for responses to a single question or from a particular CA year. Program directors are also encouraged to take screenshots of participation or performance metrics before the pilot ends.

What does the “I Know Rate” in the dashboard mean?

The “I Know Rate” reflects how often residents select the “I Know the Answer” written answer pathway in cascading questions, rather than selecting “Show Me an Answer”. This pathway may indicate higher confidence in clinical knowledge.

Why do some questions show a dash (—) instead of a correct or incorrect result?

A dash indicates that Resident Reach cannot automatically score the accuracy of a response, such as when a resident provides a written response using the “I Know the Answer” pathway or when answering case-based questions.

What does "MCQ fallback" mean?

MCQ fallback stands for multiple-choice question fallback. If a resident selects “Show Me an Answer” and rejects all answer choices presented to them, the question will convert to a traditional multiple-choice format. Dashboard reporting identifies these responses separately from other cascading question pathways.

Can I view individual data as well as aggregate data for my program?

Yes, the data can be viewed from multiple levels. Program directors can look at the response rates for individuals or view by program and CA year. Cascading questions will show green or red to indicate correctness of responses captured via the MC option, while free-form written responses will be indicated by a dash (—).

How are free-form written responses handled in the dashboard?

Program directors can review and download residents' individual free-form written responses within the dashboard. Free-response responses during the pilot receive no automatic scores or correct vs. incorrect judgment.

Question Formats and Points

What are cascading questions?

Cascading questions dynamically change format based on the resident's own choices while answering. In the pilot, residents begin by choosing "I Know the Answer," where they submit a written response, or "Show Me an Answer," where they're shown a possible answer choice and asked

whether it's correct.

Residents receive the highest number of points for submitting an "I Know the Answer" written response. After submitting an answer, they receive the correct answer alongside a key point and references.

How does "Show Me an Answer" work?

If residents select "Show Me an Answer" instead of inputting a written response, they will be presented with a possible answer choice at random and can indicate whether they believe the answer is correct. If they reject all available answer choices, the question will convert to a traditional multiple-choice format and ask them to select the best answer.

What are case-based questions, and how are they scored?

Case-based questions are free-form written response questions that aim to assess residents' clinical judgment, decision-making skills, and decision-making rationale. Each clinical case contains multiple questions that do not have a single correct answer, as they may have more than one reasonable approach. Residents receive one point for each question answered per case, regardless of their answer.

After answering all questions for a clinical case-based question, residents see a sample of anonymized peer responses. Program directors can review residents' responses in their dashboards, use the data to inform discussions about reasoning, and share with teaching faculty as needed.

Why is the ABA incorporating points in the pilot?

The ABA is piloting a points system to explore residents' behavior in the pilot phase and gauge how points can incentivize participation. Points are awarded for answering questions to encourage engagement. Resident feedback on the approach to points in the pilot may influence future iterations of Resident Reach.

What do points signify?

Points are given for answering questions to encourage engagement, with more points awarded for correct answers and for completing more challenging question types, such as the "I Know the Answer" written response to cascading questions. Points are not used for evaluation, ranking or any formal assessment.

How many points can residents receive?

For case-based questions, residents receive one point for each part of the case they complete.

Cascading question points are awarded as follows:

- Four points for selecting "I Know the Answer" and submitting a written response

- Three points for selecting “Show Me an Answer” and selecting the correct answer
- Two points for selecting “Show Me an Answer” and selecting the incorrect answer
- One point for Multiple-Choice Question (MCQ) Fallback and selecting the correct answer
- Zero points for MCQ Fallback and selecting the incorrect answer

Who can see the number of points a resident has accumulated?

Residents participating in the pilot can track their total points on their Resident Reach dashboard in ABA GO. Each resident can only see their own points, and program directors do not have the ability to view residents' points during the pilot.