Teaching in the Time of COVID

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Senior Associate Dean for Academic Affairs

College of Medicine

Objectives

1. Identify alternative approaches to instruction and assessment that may be used during a pandemic

2. List the components of an administrative plan for responding to a pandemic.

My Lens: the program perspective

10,000 ft view

Pivoting an entire program to exclusively online and/or hybrid instruction

- How should instruction change?

- How should assessment change?

- What policy changes should be considered?

- How are these decisions made?

Pivoting: Instructional Delivery

- Today's learners are largely comfortable with online delivery (the majority of COM students prefer it)

  Synchronous (Zoom*)

  Asynchronous (Pre-recorded lectures)

  *Instructors LOVE Zoom (and want to use it post COVID)

- A subset of learners may still desire in-class attendance

  (20 – 30 of 165)

- Certain learning objectives may still require on-campus attendance (e.g., clinical skills training)

- There are a wealth of online learning materials

Pivoting : Instructional Delivery

- Online learning/assessment materials. . .

https://www.mededportal.org/

http://www.merlot.org/

Pivoting : Instructional Delivery

Students will ask how a quarantine will impact his/her educational progression

Consider developing a "Quarantine Curriculum"

Example: National standardized curriculum for students under quarantine

Consider your policy regarding quarantine impact on educational progression

THE UNIVERSITY OF OKLAHOMA
College of Medicine

POLICY

Number: 309

Area: Student Affairs

Title: Student Health Requirements and School-Related Health Issues

Note: This policy applies to MD program students at all instructional sites, for all MD program tracks, and for any joint degree programs that include the MD degree. The student health center refers to the Student Health and Wellness Clinic on the Oklahoma City campus and the Student Health Clinic on the Tulsa campus.

Personal Health Insurance

Each student enrolled in the OU College of Medicine is required to maintain personal health insurance coverage at all times. Participation in a group policy is offered annually to all students. However, students may select an insurer of their choice. Documentation of coverage must be provided to the Office of Student Affairs.

Infectious and Environmental Hazards

The OU College of Medicine fulfills its obligation to educate medical students while safeguarding the welfare of patients and respecting the personal rights of OU College of Medicine students with an infectious and environmental disease.

Training

OU College of Medicine students are expected to protect themselves, coworkers, and patients from exposure to infectious and environmental hazards (including contaminated bodily fluids). As such, students are required participate in training that will help them understand those activities which increase the risk of exposure, strategies regarding prevention and reducing the

Effects of Infectious and/or Environmental Disease or Disability on Medical Student Educational Activities

Students with an infectious or environmental disease or disability will be allowed to continue in the program . . . in certain cases, students infected with, and in some cases exposed to, specific infectious diseases may be restricted from participating in the curriculum (referred to as "work restrictions").

Any coursework time missed due to school-imposed work restrictions (i.e., as a result of this policy) will be considered an excused absence according to policy 306.

Pivoting : Assessment

Knowledge-based assessment

Campus-based exams

- Social distancing means more rooms & proctors (COM: 5 rooms & 8 proctors for <u>each</u> exam)

Remote exams

- What are the rules around remote proctoring?
- Develop procedures for ensuring exam integrity, communicating with students and other proctors

Clinical assessment

Online Objective Structured Clinical Exam (OSCE)

- Standardized patients and students both at remote sites
- Significant logistical work

Everything except for the Physical Exam can be replicated

Regents, University & Accreditor Guidance

- Understand the guardrails

- Call them (we did)

- Many of these groups have issued guidance for instruction, assessment, and other related issues

LCME Guidelines (as an example)

- Anticipate and plan for sudden loss of access to external clinical training sites

- Review the learning objectives of all clinical courses (including typical final-year courses) and determine whether some objectives may have been met in another course.

- Consider waiving <u>elective</u> graduation requirements to allow time and resources for completion of clinical requirements.

Think longitudinally and qualitatively, not quantitatively, about the clinical curriculum and be prepared to track each student's progress through it.

Components of an Administrative Response

Develop a Instructional & Assessment Plan (discussed)

Develop a Communication Strategy

Consider Policy Changes

Address Student Needs

Develop a Communication Strategy

Develop a plan for bi-directional communication with:

- Faculty/Staff
- Students

- **<u>Don't</u>** limit decision making to administrators *(a tendency in emergencies)*
- Hold regular meetings
- Involve course directors, front-line staff, and student leadership
- Ask THEM to:
  - Suggest meeting agenda items
  - Preview email correspondence
  - Provide regular feedback on problems

Consider Policy Changes

Policy changes

- Allow incoming (guest student) or outgoing (elective) rotations?
- Continue affiliation agreement processing?
- Allow students to participate in non-OU clinical environments (including volunteer clinics)?

- Monitor national changes board exam scheduling/availability
  - Do you revise policies or issue a blanket exception for all students?

THE UNIVERSITY OF OKLAHOMA
College of Medicine

POLICY

Number: 405.1

Area: Education

Title: Temporary Supplement to Off-Campus Electives, Fourth Year

1. This policy places restrictions on off-campus rotations, in addition to those outlined in Policy 405.

2. The COVID-19 pandemic has disrupted the clinical education of many medical students. It is a medical school's responsibility to regulate away rotations in an effort to maintain safety, promote equity through the residency application process, and promote well-being. OU College of Medicine (OU COM) students will have access to all applicable clinical experiences to support their clinical education, meet graduation requirements, and support their specialty application in any given field.

3. Effective May 27, 2020 and until further notice, OU COM medical students are not permitted to attend and will not receive credit for in-person away rotations outside of the state of Oklahoma. There are two allowable exemptions to this restriction that must be approved in advance by the Associate Dean for Student Affairs:

    i. Students who must complete an away rotation to fulfill their military commitment.

    ii. Students who have an interest in a specialty for which the OU College of Medicine does not have a residency program.

Policy Changes

When do we pull students from clinical setting?

When do we return them to the clinical setting?

Best if a group develops & uses criteria to make these decisions

Criteria for Student Re-Entry to Direct Patient Care

The University of Oklahoma College of Medicine

May 23 MS3 Re-Entry Date Decision will be made by May 15

Criteria	Who Makes Decision	Status: Met (Y/N)
Community Issues		
1. *COVID-19 Transmission* - Will students resume direct patient care when there are appropriate public health policies in place at the major clinical training sites and adequate community resources available to minimize the level of community transmission?	COVID-19 UME Team Executive Dean SCM Dean	
2. *Normalization of Clinical Operations* - Will hospital and clinic operations likely be sufficient to support clerkship delivery? Are elective surgeries being scheduled? Are non-urgent clinic visits being scheduled?	Executive Dean SCM Dean Hospital Leadership	
3. *Availability of Personnel* - Will faculty and residents be available and prepared for student education (i.e., not exhausted, ill, vacationing, etc.).	Executive Dean SCM Dean	
4. *Restricted Environments/Patients* - Should students be restricted from certain clinical environments or patient types? Have all restrictions been communicated to clinical leaders, clerkship directors, and students?	Executive Dean SCM Dean Hospital Leadership COVID-19 UME Team	
5. *PPE Supply* - Are PPE supplies sufficient to ensure student safety, taking into account all indications for PPE and the provision of PPE (through either on- or offsite PPE sources)? Has availability of PPE been communicated to clinical leaders, clerkship directors, and students?	Executive Dean SCM Dean Hospital Leadership	
Clinical/College Leadership Issues		
6. *Support for Student Re-Entry* - Do hospital leaders in OKC and Tulsa support student re-entry?	Executive Dean SCM Dean Hospital Leadership	
7. *PPE Policies* - Do hospital policies and processes support student use of PPE for all indications of PPE (whether it is obtained on- or offsite)? Does the hospital restrict PPE availability or use by students (compared with residents or faculty)?	Executive Dean SCM Dean Hospital Leadership	

Criteria for Student Removal from Direct Patient Care

If the college learns from students, clerkship directors, or others that one or more of the following criteria are problematic, then the college administration will review the extent of the problem and make a decision to retain or remove the students from direct patient care.

Criteria related to safety:

- Are appropriate public health policies in place at all clinical training sites that will minimize the risk of exposures and maximize the safety of students, faculty and staff?
- ~~Are appropriate public health policies in place at the major clinical training sites and are there adequate community resources available to minimize the level of community transmission?~~
- To protect student and patient safety, i) are there sufficient supplies of PPE for all indications of PPE, and ii) do hospital policies and processes support student use of PPE for all indications of PPE?

Criteria related to education:

- Are students being exposed to sufficient patient volume and mix to meet relevant clerkship objectives at clinical training sites?
- Are there adequate numbers of teaching residents and faculty available to provide direct supervision of student learners in a meaningful (not limited to 'shadowing') learning environment?
- Are students being excluded from participating in direct patient care?

Criteria related to clinical training sites:

- Has the college been asked by clinical training sites to restrict students from participating in direct patient care?
- Is there any new evidence to suggest that clinical training sites have become unsuitable or unsafe environments for students?

Addressing Student Needs

Engaging student and employee health

What are the most recent screening & exposure protocols – keep your students informed

Keep Students Informed

Emails

Town halls

Small group meetings

Individually calling all students

Special attention to at-risk students

Organizing Your Work (Trello)

Teaching in the Time of COVID-19:
Academic Policy Matters

Valerie N. Williams, PhD, MPA

University of Oklahoma Presidential Professor, and
Vice Provost for Academic Affairs and Faculty Development
The University of Oklahoma Health Sciences Center

OUHSC Education Grand Rounds | August 21, 2020

COVID-19 and Academic Policy Matters

Objective:

Discuss **health**, **safety**, and **shared responsibility** academic policy matters

Williams 082120

COVID-19 and Academic Policy Matters

What steps can we take as faculty to establish, acknowledge, and reinforce an HSC-wide culture of **health**, **safety**, and **shared responsibility**?

Williams 082120

COVID-19 and Academic Policy Matters

https://www.ouhsc.edu/coronavirus
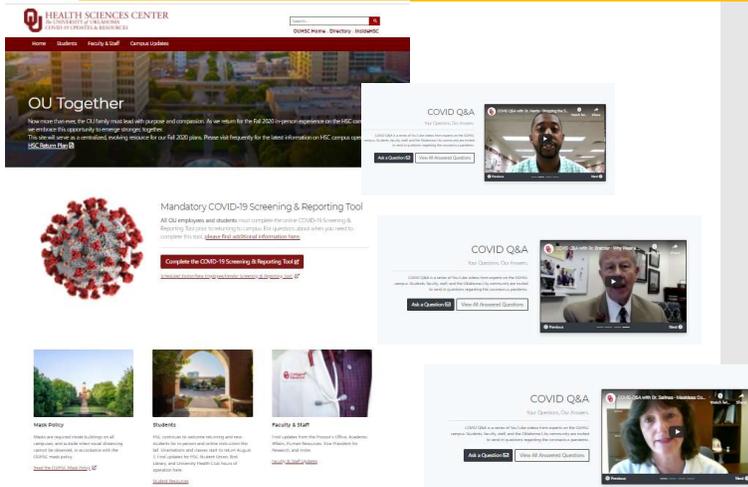
Examples of steps taken at HSC and in your College to establish, acknowledge, and reinforce an HSC-wide culture…

COVID-19 and Academic Policy Matters

- **OU HR EAP webpage**: https://hr.ou.edu/EAP . Great general information about the EAP program, guidance on how to contact the EAP office, and some excellent resources for HSC faculty and staff.

Magellan EAP program and **LiveWell OU**

- **Magellan website login** : https://magellanascend.com/ to begin exploring resources and information

- **Magellan Health | 800-327-5043** https://www.magellanascend.com/

- **LiveWell OU** at https://hr.ou.edu/wellness

Williams 082120

For our

health

COVID-19 and Academic Policy Matters

- **OUHSC SPPOT and EOC**
  - **HSC Provosts' Office and Operations Offices**

- **OUHSC Return Plan(s)**
  - **Campus Colleges and Units**
  - **Research**
  - **Academics**
    - Academic Programs Council
    - Academic Affairs Policy Coordination Committee
    - Vice Provost for Academic Affairs offices
    - College Deans Offices and Curriculum Committees (classroom, clinical, etc.)

Williams 082120

For our

safety

COVID-19 and Academic Policy Matters

What steps can we take to further model best practices for safe & effective academic continuity during this pandemic?

shared responsibility…

- self-care
- learner progression
- colleague faculty and staff wellness
- learner, faculty & staff diversity (of experiences and needs for support)
- academic environment
- well-being as an academic community

Williams 082120

COVID-19 and Academic Policy Matters

More ideas, thoughts, reflections on Teaching in a Time of COVID-19…

Email: FacDev@ouhsc.edu

shared responsibility…

- self-care
- learner progression
- colleague faculty and staff wellness
- learner, faculty & staff diversity (of experiences and needs for support)
- academic environment
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Williams 082120
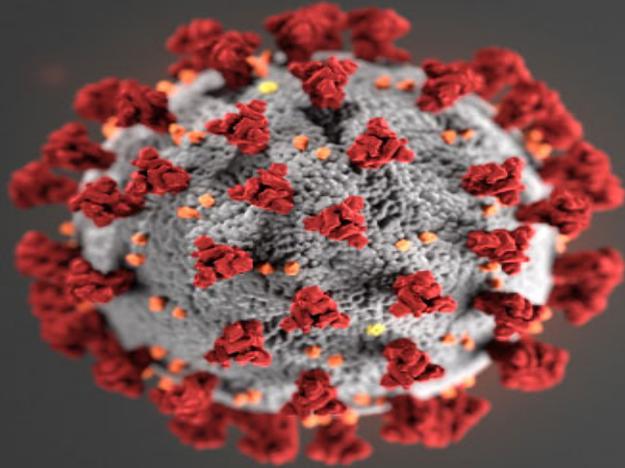
COVID-19

Navigating in the Classroom

Dale W. Bratzler, DO, MPH, MACOI, FIDSA
Chief COVID Officer – University of Oklahoma
Professor College of Medicine
Professor and Chair, Department of Health Administration and Policy
Hudson College of Public Health
Edith Kinney Gaylord Presidential Professor
Email: dale-bratzler@ouhsc.edu
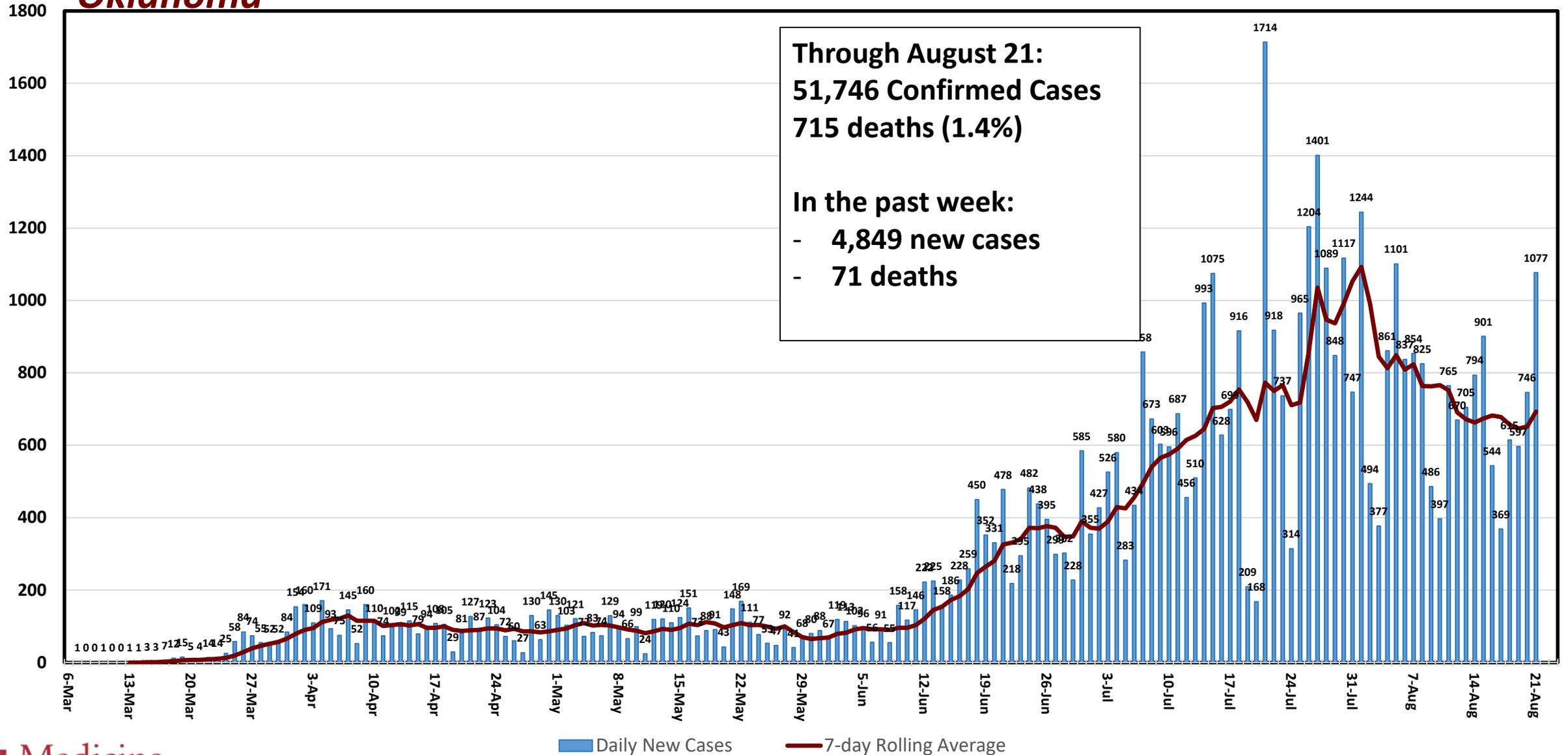Office Phone: (405) 271-3932

August 21, 2020

OU Medicine

Objectives

- Provide a brief overview of the pandemic in Oklahoma.

- Review what have we learned about the virus and transmission?

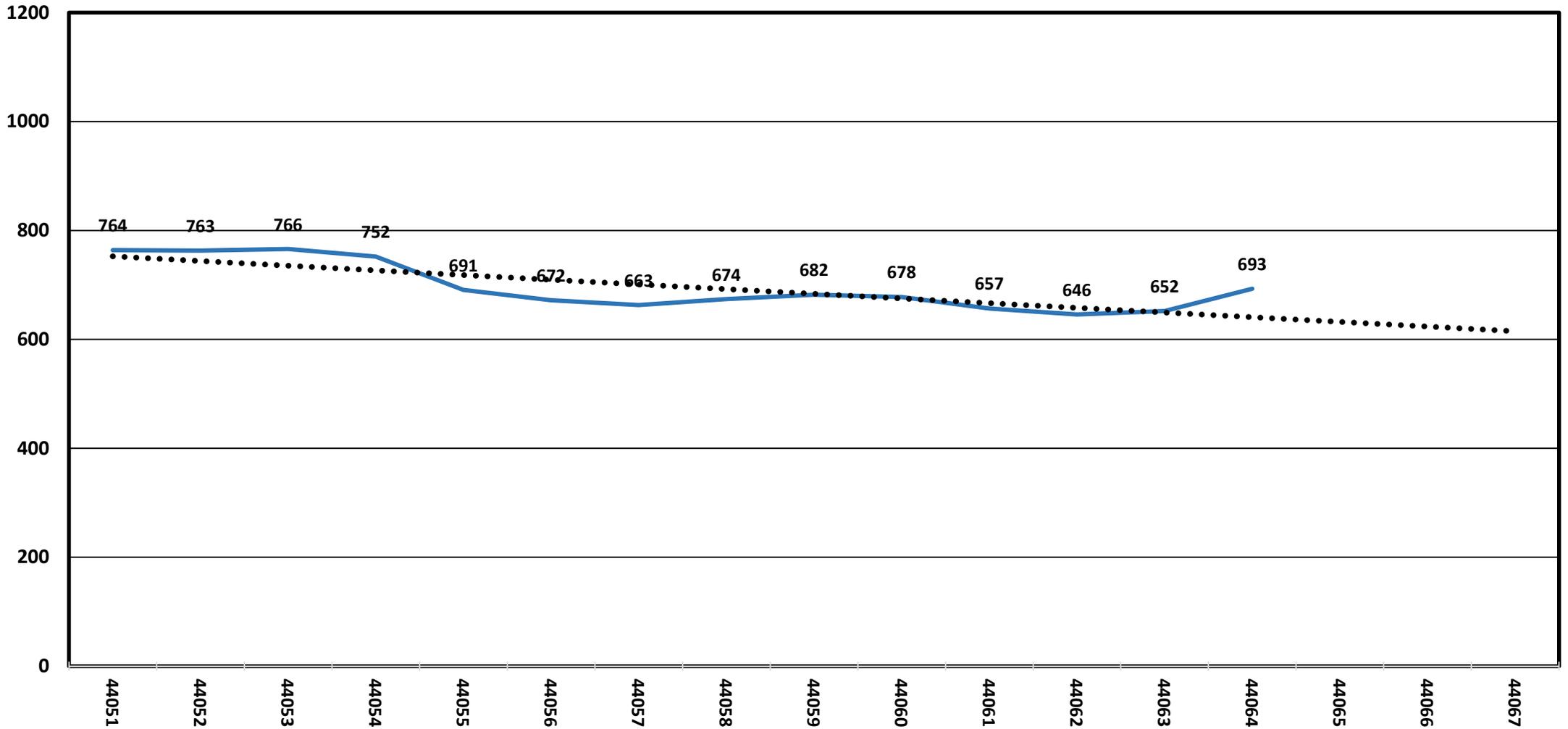- Discuss how do we keep students, staff, and faculty safe on campus?

OU Medicine

Daily New Cases with 7-day Rolling Average
Oklahoma

Through August 21:
51,746 Confirmed Cases
715 deaths (1.4%)

In the past week:
- 4,849 new cases
- 71 deaths

Daily New Cases   7-day Rolling Average

OU Medicine

Seven-day Rolling Average of New Cases
Oklahoma – Last 14 days

OU Medicine

County	Cumulative Cases	New Cases
OKLAHOMA	12328	291
TULSA	12095	222
CLEVELAND	3469	70
COMANCHE	987	64
GARFIELD	704	33
CANADIAN	1393	32
WAGONER	1034	31
PAYNE	874	27
LE FLORE	504	23
OKMULGEE	553	22
MCCURTAIN	929	15
CREEK	735	14
OTTAWA	456	14
CARTER	388	13
MCCLAIN	519	13
LINCOLN	261	11

August 21, 2020

COVID PCR Tests Done Per Week, and Percent Positive
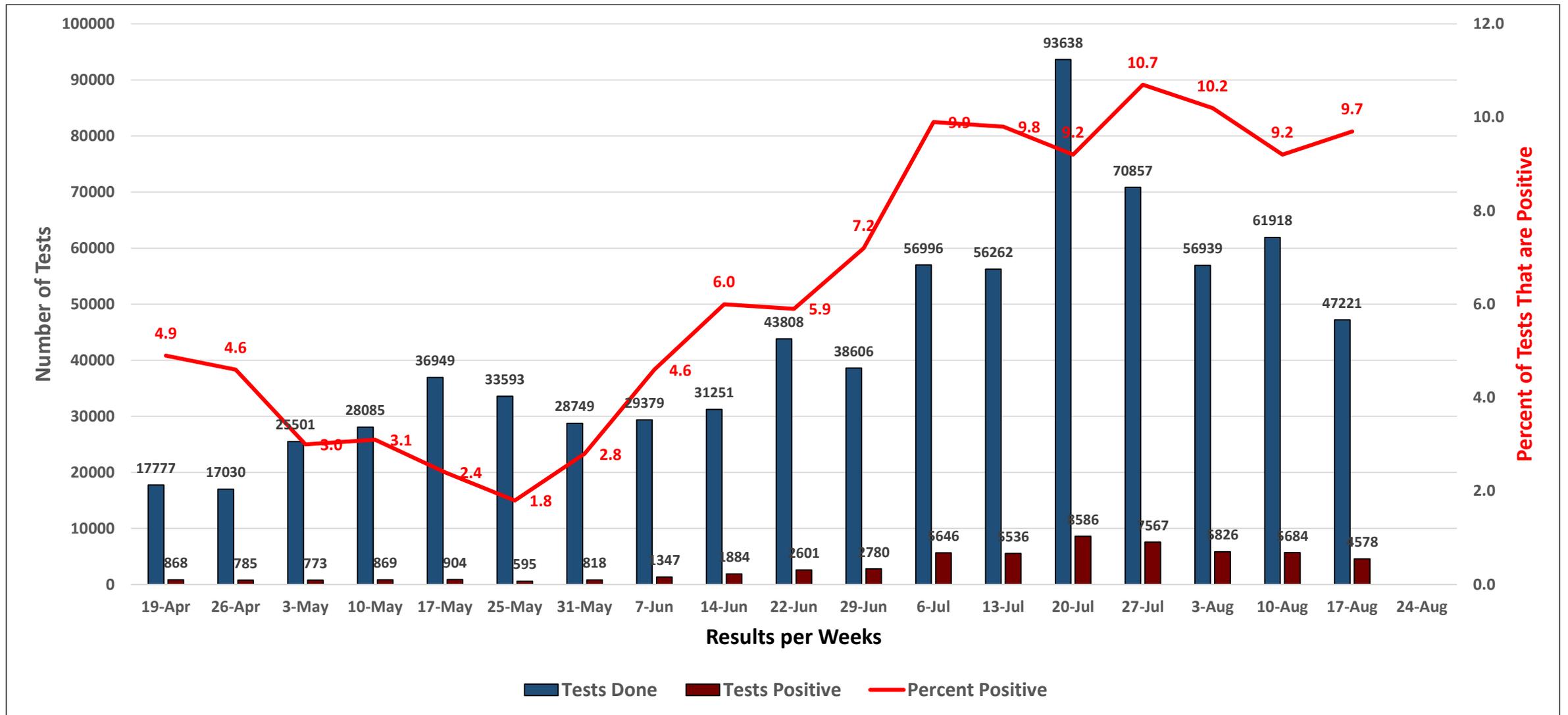
Total Hospitalizations – Confirmed and PUIs
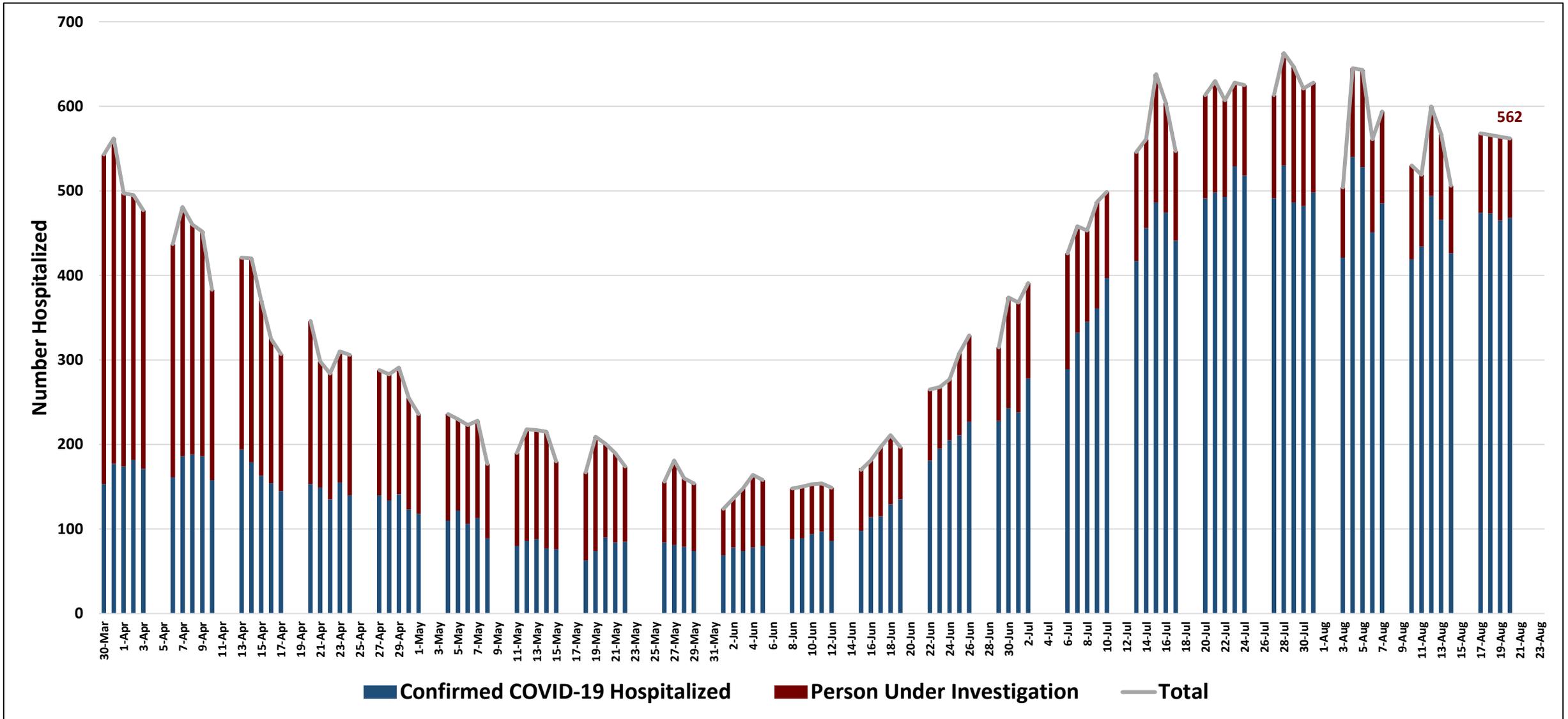
Source: Oklahoma State Department of Health Executive Order Reports.
Available at: https://coronavirus.health.ok.gov/executive-order-reports

Hospitalizations – PUIs

Source: Oklahoma State Department of Health Executive Order Reports.
Available at: https://coronavirus.health.ok.gov/executive-order-reports
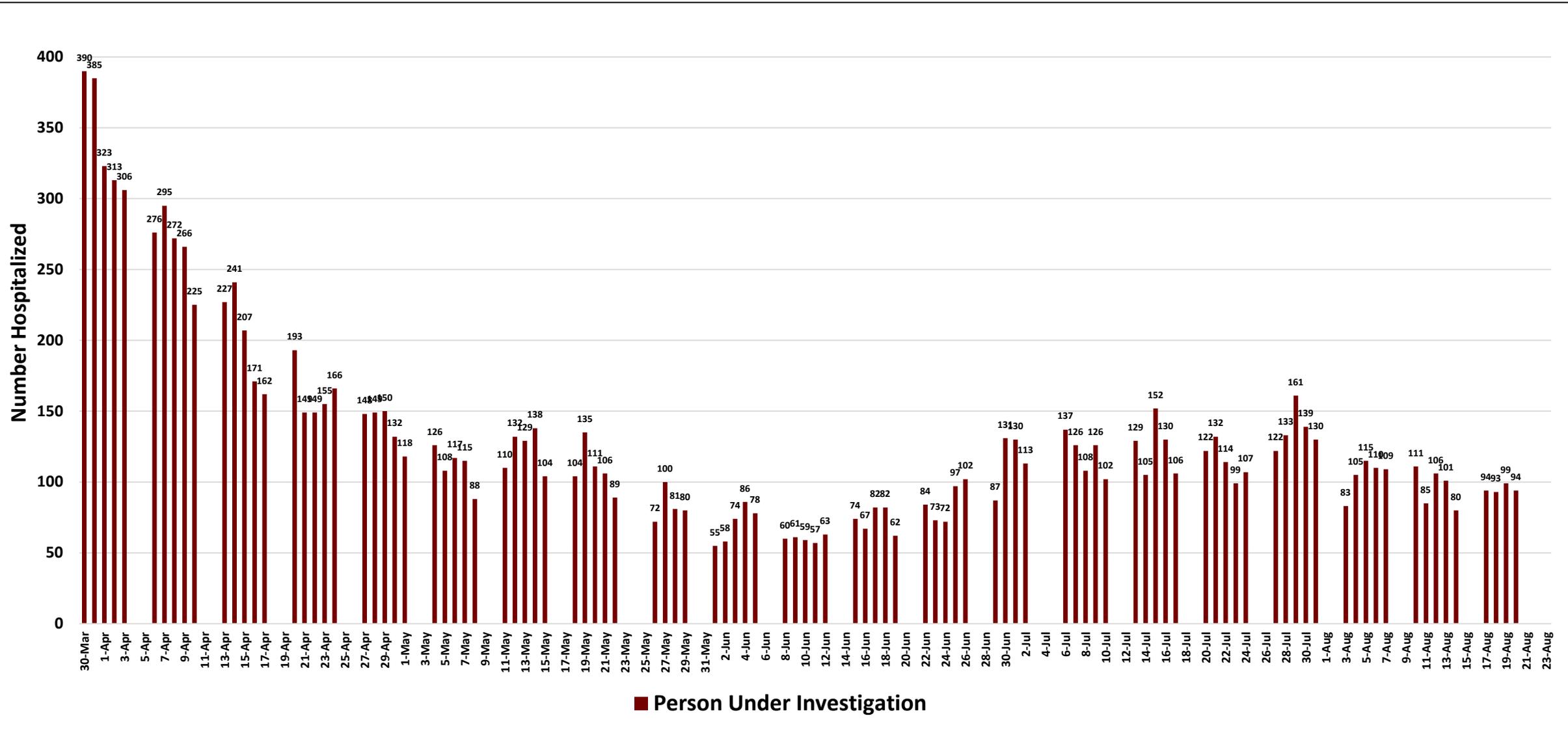
Hospitalizations – Confirmed Cases

235/468 (50%) in ICU
on August 20, 2020

Number Hospitalized

■ Confirmed COVID-19 Hospitalized

OU Medicine
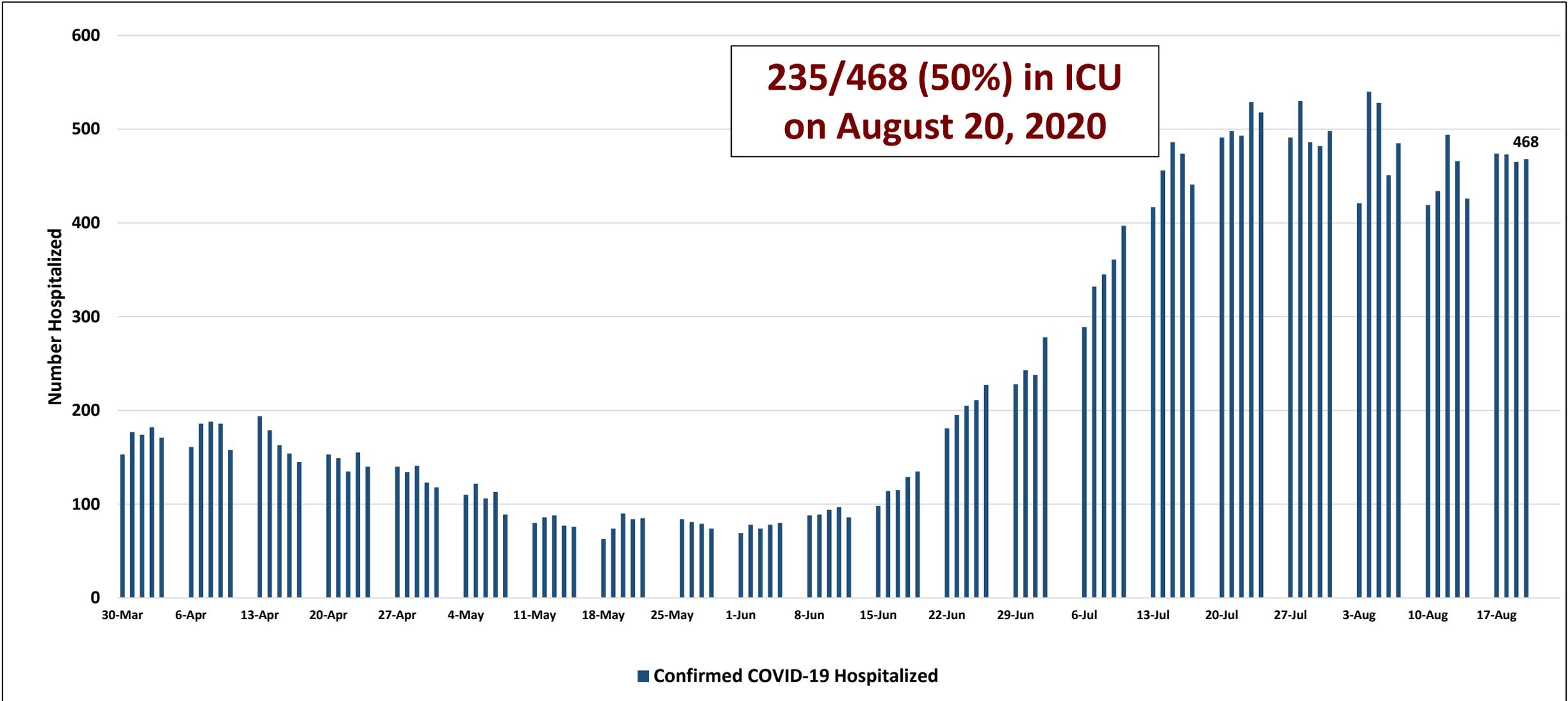
What have we learned?

How is it transmitted?

- **Primarily** through person-to-person spread among close contacts
  - Through respiratory droplets and aerosols produced when an infected person breaths, talks, sings, coughs, or sneezes.

- A person may get COVID-19 by touching a surface or object that has the virus on it and then touching their own mouth, nose, or eyes. <u>This is not thought to be the main way the virus spreads</u>.*

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How You May Transmit COVID-19 Coronavirus From Talking Without Coughing Or Sneezing
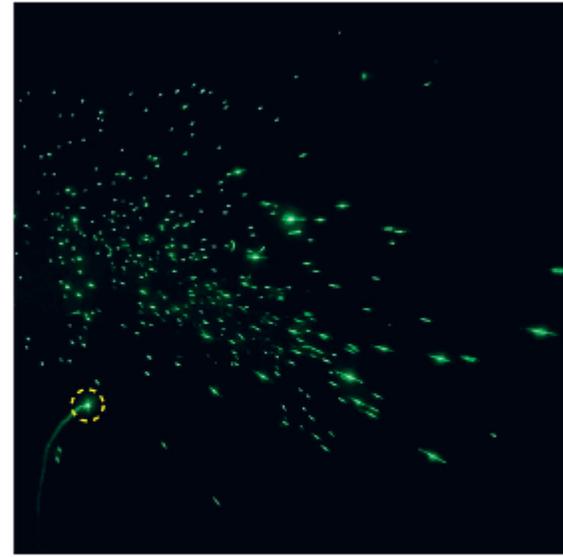
Bruce Y. Lee Senior Contributor ⓘ

Healthcare

I am a writer, journalist, professor, systems modeler, computational and digital health expert, avocado-eater, and entrepreneur, not always in that order.

What's coming out of your mouth when you talk? (Photo: Getty)   GETTY

B Flashes in a Single Video Frame

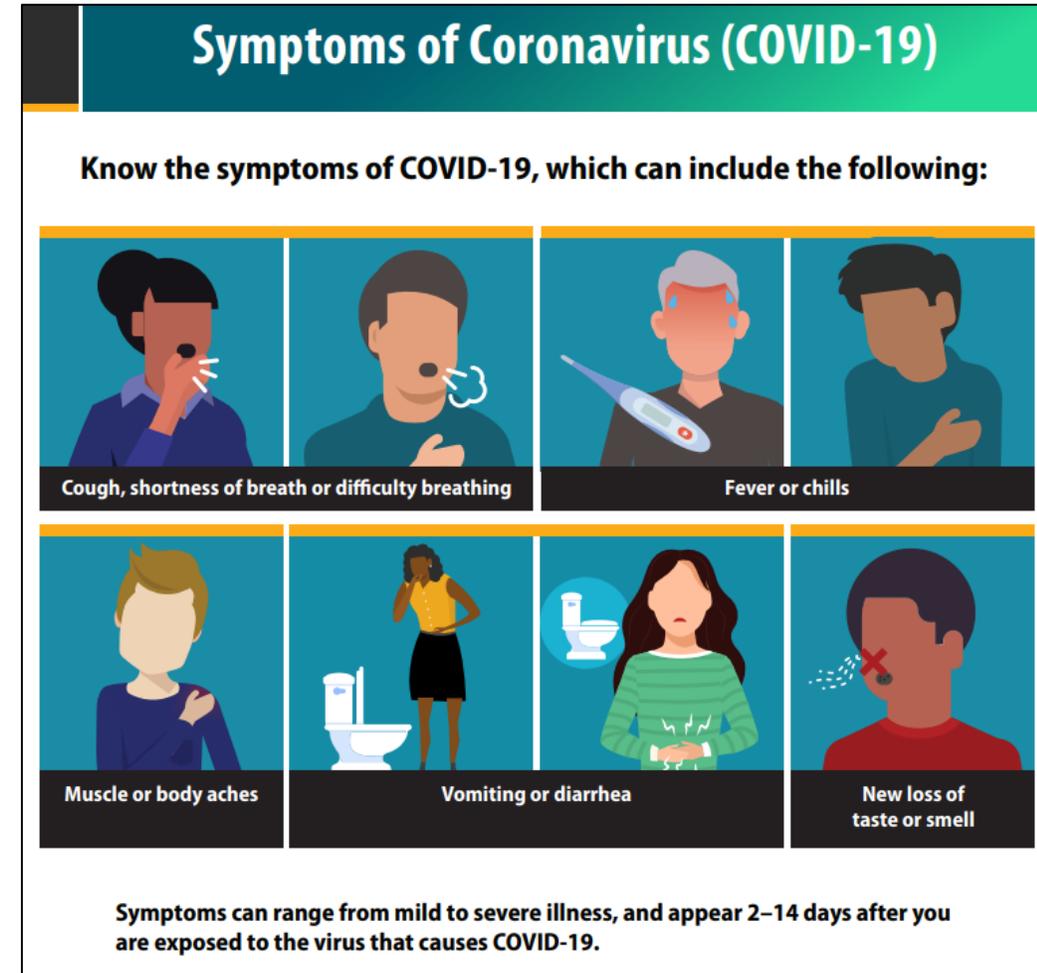Emission of Droplets While a Person Said "Stay Healthy."

Watch this video – see what happens when you talk, and see how a mask can change that!

https://www.youtube.com/watch?v=UNHgQq0BGLI

Symptoms – our understanding has evolved

- The following symptoms may appear 2–14 days after exposure (but most commonly occur within 4-5 days)

  - Fever or chills
  - Cough
  - Shortness of breath or difficulty breathing
  - Fatigue
  - Muscle or body aches
  - Headache
  - New loss of taste or smell
  - Sore throat
  - Congestion or runny nose
  - Nausea or vomiting
  - Diarrhea

Source: https://www.cdc.gov/coronavirus/2019-ncov/symptoms-testing/symptoms.html

Symptoms of Coronavirus (COVID-19)

Know the symptoms of COVID-19, which can include the following:

Cough, shortness of breath or difficulty breathing

Fever or chills

Muscle or body aches

Vomiting or diarrhea

New loss of taste or smell

Symptoms can range from mild to severe illness, and appear 2–14 days after you are exposed to the virus that causes COVID-19.

Is COVID a chronic disease?

- We don't know…..but
  - We do know that some people have residual symptoms for weeks even though they don't spread the virus any more

- Some people will test positive for weeks, even though you cannot grow the virus from their specimens
  - So, for the most part, we do not retest individuals any more

How do we keep everyone safe?

OU Medicine

Safe and Resilient Plan

- Keep students, faculty, and staff safe

- Accommodate students, faculty, and staff in high risk categories for COVID-19

- Recognize that there will likely be some disruptions and to be flexible and prepared to adjust plans should the need arise

University of Oklahoma Health Sciences Center
COVID-19 Return Plan – Adopted May 1, 2020
Last Updated August 13, 2020

The return to full, normal operations in all areas of the University of Oklahoma Health Sciences Center campus will be a gradual, phased process. Effective May 1, 2020, each dean and vice president is responsible for reviewing and distributing this Plan in their areas and for the specifics of the return process to be implemented for their areas; the phases and timing for return must comply with the Oklahoma *Open Up and Recover Safely Three-Phase Approach to Open Oklahoma's Economy*, as applicable, and the requirements in this COVID-19 Return Plan.

As the nature of COVID-19 remains dynamic, the Specific Pathogens Preparedness Operations Team (SPPOT) and the OUHSC Emergency Operations Committee (EOC) will regularly evaluate the COVID-19 Return Plan and implement new or revised requirements for return when indicated.[1] Revised versions of this Plan will be distributed to appropriate campus groups and posted on the HSC COVID-19 Updates and Resources page: https://www.ouhsc.edu/coronavirus, also accessible from the OUHSC home page. This Plan applies to all OUHSC employees and students,[2] which includes residents and trainees and, for purposes of this Plan, volunteers. It includes the following sections:

I.   Telecommuting
II.   Reopening Common Areas, Resuming Services, & Returning Employees to Campus
III.   Social Distancing
IV.   Masks
V.   Building Access and Amenities
VI.   Sanitizing Facilities and Equipment
VII.   Testing, Isolation, and Contact Tracing
VIII.   Monitoring Workforce and Visitors for COVID-19 Symptoms
IX.   Travel
X.   Training
XI.   Research, Patient Care, Academics
XII.   Enforcement

Masks and Physical Distancing

- If everyone wears a mask, the risk of person-to-person transmission of this virus is dramatically decreased. Now a mandate in any University-owned facility.

- Of the public health interventions to prevent spread of this disease, maintaining physical distancing is also quite effective

Combined, the classroom will be a very safe environment!

OU Medicine