

## **Virtual Simulation Experience**

### Meeting Notes

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### **Dermatology course**

Virtual simulation of in-person, hands on course. Delivered online via zoom. 5-7 techniques being taught (Punch biopsy, shave biopsy, etc.)

#### Preparation Work

1. Staff created tool kits and sent them to the sites.
2. Residents received 15-20 utensils each
3. Each tool kit in a ziplock bag along with a picture of how it was to be laid out.
4. Materials were shipped to each site ahead of time.
5. A room was designated on site for residents. Course coordinator recommends having a staff member on site who can help set up the room correctly.

#### Instruction:

1. The instructor talked the residents through the techniques. ("Now pick up \_\_ tool, do \_\_\_\_")
2. Residents did not have cameras so that they could show their hands as they were doing the procedure and the instructor did not have a camera either. As a result, there was limited success.
3. residents needed to see the hands of the instructor.

#### For next time:

1. Have the instructor make a video of themselves doing the technique, showing their hands. residents watch the video prior to the class session.
2. During class time, the instructor still talks the residents through the technique but both instructor and residents have cameras so that they have the visual information as well as audio (gooseneck phone holder might be helpful).
3. Use a checklist to clarify what the residents and instructor need on the day of the class session.
4. As you prepare a virtual simulation of an in-person, hands on class, consider what the skill is that the instructor is teaching and what does getting the skill look like

### **Suturing Course**

1. Staff sent [suturing materials](#) for to students ahead of time.
2. Students were directed to find a piece of fruit ahead of time to use to practice during the class session.

#### Instruction:

1. Instructor walked students through technique

2. Students reported that the instructor said things too fast and they could not ask the instructor to stop or slow down as they would in an in person class.

#### For Next Time:

1. May send a video to students to view ahead of time.
2. Students view video prior to class and then the instructor goes through the technique step by step after everyone has seen the video.

#### General Advice

1. Involve a lot of people as you develop the virtual simulation so that you have a lot of buy in
2. As with everything, communication is key.
3. Doing both virtual and in person delivery formats at the same time doesn't work.
4. Developing a new format for a course absorbs a lot of time.
5. Time is precious. Consider how you maximize in person time and what could be moved to pre-session work.
6. Important to consider under what circumstances a specific strategy or tool works well; depends on the goal of the session.

#### Other places to gather info from:

1. Elizabeth Sopdie and integrating Canvas into their poster presentations.
2. Consider meeting with [ATSS](#) to see how they can consult and advise in the GME/ME world.
3. Jess Blum, oversees 3rd and 4th year for medical stds. Her goal was to move as much as she could online.  
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4. Simulation software and expense
5. Things available on MSIM.
6. HCSE space.
7. VA may have resources. Sessions may need to occur in a VA facility in order to be allowed to use their funds/equipment? Health policy course at the VA using their SIM center?
8. POCUS simulations are available. SONOSIM...but it's expensive. (Emergency Medicine-coordinator had controls and std.s would tell them what to do with patients. Cost over \$100,000.
9. ATSS online. They have a whole slew of things that they have ramped up with the pandemic. There are so many tips and tricks there. That would be a good starting point. May be able to help with what to flip and what not to flip.

10. ATI-COP meets regularly to talk about this sort of thing (Heidi is part of this group)
11. Other available tools and strategies such as Aquifer cases, zoom breakout rooms; Play video over zoom and then stop and ask stds questions what they would do/debrief; Poll everywhere.
12. What students miss when they are not in person
  - People like seeing each other, the before and after connection adds a layer of participation
  - People love food and beverage because it brings people together.
  - What does the space around us look like and how that affects learning.
  - Zoom can be more customizable (introverts like it, can go at their own path)
13. At the March PAACE meeting, we will assess and look at data about what worked well and review courses critically.
14. Active learning and flipped classroom methodology course was offered by the University  
<https://cei.umn.edu/teaching-active-learning-classroom-alc>.