

GEISEL GOES VIRTUAL

BY STEPHEN MCALLISTER D '77

WHEN DARTMOUTH COLLEGE'S COVID-19 TASK FORCE ANNOUNCED ON MARCH 3 that an employee of Dartmouth-Hitchcock had tested positive for coronavirus, John F. Dick III, MED '03, interim senior associate dean for medical education and member of the task force, understood the need for social distancing on campus and quickly organized a team to begin planning for remote learning at Geisel.

Before restrictions on the size of gatherings on campus were set, a medical school team of Geisel faculty, information technology, classroom services, and medical education staff began working collaboratively and tirelessly to make remote courses a reality. A few days later, the College and the hospital would announce reductions on meeting size and social distancing guidelines, which would make it difficult for any class at Geisel to be in person.

By March 10 large group classes were online and by the end of March Geisel's entire first- and second-year curriculum could be taught remotely via Zoom. Per recommendation of the Association of American Medical Colleges, clerkships for third- and fourth-year students were suspended across the U.S.

Geisel was in a good position to transition to remote learning because the school already had lecture hall recording systems with streaming capabilities and a thoughtful implementation of materials on Canvas, a web-based learning management platform used to create a virtual classroom.

Even so, there were challenges—faculty and instructors required training to effectively use the Zoom app to teach, but before training them our education support teams needed to

become adept at using this tool themselves. Beyond that, Zoom faced security and privacy challenges as more and more people around the world began to depend on it for teaching, collaboration, and socializing, forcing the app maker to rapidly push out changes to default setting for educational customers, such as screen sharing, to improve security. To balance security with ease-of-use, IT is constantly monitoring these changes, addressing them, and quickly communicating them to faculty.

Maintaining the interactive learning experiences Geisel students are accustomed to required creativity. “Fortunately,” Virginia Lyons, PhD, associate dean for pre-clinical education and a member of the team said, “we have an excellent computing team who quickly identified virtual tools to promote collaboration and that allowed us to preserve faculty-to-student and student-to-student interactions.”

Currently, the College plans to extend remote learning efforts through the summer. Plans for the fall term have not yet been announced.

Stephen B. McAllister is director of computing at Geisel School of Medicine.

STUDENTS ORGANIZE TO SUPPORT HEALTHCARE WORKERS

NATIONWIDE, MEDICAL STUDENTS ARE RESPONDING TO COVID-19 by helping beleaguered healthcare workers in their communities. At Geisel, medical students are providing non-clinical support to Dartmouth-Hitchcock Medical Center (DHMC) in the Upper Valley.

Taryn Weinstein, director of Student Affairs, says as soon as news of the pandemic broke, students wanting to jump into action began launching projects—gathering personal protective equipment (PPE) and providing childcare—then reached out to the Student Affairs office seeking help with organizing volunteering at DHMC.

“I was initially connected with Jeffrey O’Brien to help coordinate opportunities at the hospital,” Weinstein says. O’Brien is the senior vice president of Clinical Operations at DHMC. Since then she has been working with Laurie Emanuele, director of fiscal and academic affairs and research, community and family

medicine/population health at DHMC, to place students into volunteer roles at the hospital. “It took a few weeks for us to settle what students would be doing because of the rapidly changing situation and to ensure compliance with the Association of American Medical Colleges guidelines, which strongly advise against medical students taking on clinical roles at this time.

“The collaboration between the hospital and Geisel has been wonderful. Everyone wanted to bring these volunteer experiences together so our students who wanted to be involved could do it safely.”

By late April, 21 medical students were

deployed to DHMC's supply chain operations—distributing supplies to various areas of the hospital as runners. Others are helping RNs with calls to the hospital's COVID-19 Hotline, supporting telehealth development, and helping with Aging Resource Center and Pediatrics Family Support Check-in calls among other remote, yet vital roles.

Additionally, several independent medical student-driven projects are underway, including collecting PPE from Upper Valley businesses for distribution to rural hospitals and providing virtual academic support to local middle school students.

“We are so proud of our students who are extraordinarily motivated and professional—they are amazing,” Weinstein says. “Their level of adaptability and perseverance in trying to find ways to support their community, patients, and each other is incredible. They inspire me every day.”

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