

# Reimagining medical meetings after the COVID-19 pandemic

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**Jann T. Balmer, PhD, RN, FACEHP, FAAN, FNAP**



**SACME's  
Virtual Journal Club**

**Facilitator: Mila Kostic, CHCP, FACEHP**

**April 16, 2020**

# Bios and disclosures

## **Alvaro Margolis, MD MS FIAHSI**

Dr. Margolis is an internist with a Master's degree in biomedical informatics from the University of Utah (USA). He is Founding Member of the International Academy of Health Sciences Informatics, and Associate Editor of Applied Clinical Informatics. He is the President of the Global Alliance for Medical Education (GAME), and Director of EviMed.

## **Jann T. Balmer, PhD RN FACEHP FAAN FNAP**

Jann Torrance Balmer PHD RN serves as the Director for CME of the University of Virginia School of Medicine. Under her leadership, the CME office demonstrated significant growth in meeting the educational needs of physicians, healthcare professionals teams. Dr. Balmer provided the strategic direction for the CE unit and serves as Co-Lead Nurse Planner for the School of Nursing. She holds faculty appointments in the School of Medicine and Nursing.

## Agenda for today

- State of continuing medical education activities prior to the crisis
- Existing solutions to the crisis
- Digital technologies and live meetings
- How the University of Virginia is implementing some of these concepts
- Conclusions
- Discussion

## State of CME/CE meetings prior to crisis

- Many academic centers regularly hold live departmental conferences, jointly provide regional, state and national society meetings
- RSS series– live and interactive part of the academic milieu
- Considered part of “everyday life and work”
- Focus is on credit and MOC points– business as usual– less educational grants but exhibit money available for live meetings

## Emergence of the COVID pandemic impact

- Faculty and staff on travel bans
- Discussions regarding live conferences/meetings occurred prior to governmental actions in many places
- Financial impact of contracts with hotels/conference centers, AV providers and caterers, cancelled travel for invited faculty
- Implications for discussions of other non-COVID content that can affect the health of populations

## Potential Solutions– evolving as the environment continues to change

- Remote/virtual presentations– live and asynchronous– how to effectively transform educational design to meet desired outcomes
- Approaches for engagement- chat box questions, ARS systems through teleconference platforms, case presentations etc.
- What to do with exhibitors?– Virtual exhibit hall or product showcase- pre-recorded “sales” information and links to company websites
- How to best manage accreditation requirements for revised approaches to CME/CE

## How does this change the Value Proposition for CME/CE profession

- Proactively develop solutions for transformation of traditional CME/CE programming– provide course directors and participants with user-friendly options
- Creates opportunity to talk about innovative approaches to self-assessment, content messaging, resources for presenters and participants
- Creates opportunities for utilizing content in multiple programming options– can repurpose content, with presenter permissions, into new asynchronous educational activities
- Creates opportunities for sequential learning, building contemporary content repositories/activities that can engage learners over time

# How does this change the Value Proposition for CME/CE providers?

- Leverage sequential and asynchronous CE content to provide new sources of revenue that can augment revenue projections
- How can CME/CE content be incorporated into undergraduate and graduate education environments– what are the differences and what are the similarities
- Is there an opportunity to share valuable content and information within your institution that can be designated for credit or maintenance of certification?
- Step up– opportunity to highlight that CME/CE office or department may be an underutilized resource

Digital technologies and live meetings

# Some history regarding the use of digital technologies and meetings

Lecueder S, Manyari DE.

**Virtual congresses.**

J Am Med Inform Assoc. **2000**

Jan-Feb;7(1):21-7. PubMed PMID: 10641960; PubMed Central PMCID: PMC61452.

<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC61452/>

## The dilemma: examples from the entertainment industry

“Should an established company risk cannibalizing its revenues in a traditional channel by pursuing a strong competitive position in a new channel?”

Elberse, Anita. Blockbusters: Why Big Hits - and Big Risks - are the Future of the Entertainment Business. Faber and Faber, New York, 2013. Chapter 5

The extended congress is the extension in *time*, *space* and *languages* of a live meeting, with the use of digital technologies.

It aims to unleash the reach of traditional meetings through the use of technology to *access larger audiences* in different languages, across a country and internationally, and to *improve knowledge translation into practice* through a sequential and active learning process.

# 2020 Peritoneal Dialysis Extended Congress

## Pre-congress activities

*Free access to onsite and remote participants*

Recorded mini-lectures

Online networking

Voting of papers & posters

March 23-26

Pre-congress

March 27-28

Congress

March 30-April 5

Key topic 1

April 6-12

Key topic 2

April 13-19

Key topic 3

April 20-26

Key topic 4

April 27-May 3

Key topic 5

May 4-10

Final activities

## Congress Key topics

*By registration*

Focus on 5 topics from Congress, prioritized by leading experts

**Highly interactive**

## Congress activities

*Free access to onsite and remote participants*

Launching Webinar

Online networking

Congress news

The log in page



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    Support



**CONGRESO EXTENDIDO  
ACTUALIZACIÓN EN DIÁLISIS PERITONEAL**

CURSO ONLINE

23 DE MARZO AL 10 DE MAYO DE 2020 <https://redemc.net/congresoextendido>

ORGANIZAN  redEMC   ASPROSA  SLANH 

HOME EXTENDED CONGRESS. PERITONEAL DIALYSIS >



CONGRESO EXTENDIDO  
ACTUALIZACIÓN EN  
DIÁLISIS PERITONEAL

CURSO ONLINE

23 DE MARZO AL 10 DE MAYO DE 2020

Nephrology 7 Modules 30 hours 0 mins

**22**  
Teachers

**765**  
Participants

VIDEO-TUTORIAL

WATCH

Envíenos un mensaje jvachat

- 

**Alvaro Margolis** 

04/15/2020  
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04/15/2020 10:44:25 

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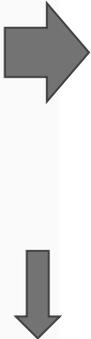
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# The program and the opening week

- PROGRAM**
- Opening
- Adequacy of peritoneal dialysis
- Peritoneal membrane
- Identifying barriers to peritoneal dialysis
- Peritoneal dialysis infections
- Fluid management on peritoneal dialysis
- Closing



Free Jobs

LIBRARY

SUPPORT Alvaro Margolis | Get out PROGRAM

The Event was broadcast on Tuesday, March 24, it was recorded and we incorporated it into the campus so that it is at your disposal.

Although you can see the opening lectures broadcast during the webinar indistinctly, relive the entire event, which also includes the dynamics of live exchange with teachers online.

Webinar: Renal Replacement Therapy 24h

Dr. Thiago Moraes, PhD

Professor de Pós-graduação em Nefrologia, Universidade de São Paulo, Faculdade de Medicina de Ribeirão Preto, Departamento de Nefrologia, Universidade de São Paulo, Faculdade de Medicina de Ribeirão Preto, Departamento de Nefrologia, Universidade de São Paulo, Faculdade de Medicina de Ribeirão Preto, Departamento de Nefrologia

Logo: redEMC, UNESP, UNICAMP, UNICAMP, UNICAMP

Logo: evimed

Inchilés peritoneal, por ser una diálisis que ofrece

Thank you to everyone who was able to connect and participate!

Rate Inaugural Webinar 4.67

- + Opening lecture: Peritoneal dialysis, the ideal therapy to start renal replacement treatment
- + Keynote Lecture: Nursing Empowerment to Assist Patients in Decision Making by Choosing PD as the First Treatment Option

- Opening
  - Adequacy of peritoneal dialysis
  - Peritoneal membrane
  - Identifying barriers to peritoneal dialysis
  - Peritoneal dialysis infections
  - Fluid management on peritoneal dialysis
  - Closing

Your certificate or certificate will be issued with the following name, if you wish to modify it, (please do so before pressing the request button):

Alvaro Margolis

**SEE MY ACTIVITIES**

**SEE MY PROFESSIONAL NETWORK**

**COMMENTS THAT MAY INTEREST YOU**

19 Likes 'Dear participants: | Envíenos un mensaje



# Opening Forum



[Redacted Name]

23 Mar 2020 32  

This is a warm welcome to all the professionals who are participating in the "Extended DP Update Congress"; We are facing an interesting scientific event that gives us the opportunity to exchange experiences, consult with experts; expand knowledge and update it; with a focus on quality medical care; focused on the sick person and their family; recognizing self-care, adherence and persistence to chronic treatment as fundamental axes of medical care; also taking into account the complex characteristics of chronic multipathological and polymedicated disease.

To my esteemed nursing colleagues, a special greeting for being in the midst of the Global "Nursing Now" Campaign carried out in collaboration with the ICN and WHO, with 2020 being the Year of Nursing Worldwide. Postulating that nurses are at the heart of most healthcare teams, playing a crucial role in promoting health, as well as in the prevention and treatment of disease.

Unfortunately, we have to go through a year that confronts us with one of the most critical health care challenges of the 21st century. To face the event "Teamwork and professional self-care". We are in the forum. Suzanne.



[Redacted Name]

23 Mar 2020 26  

From Colombia, the Colombian Nephrology Association recommends peritoneal dialysis as the first option for the replacement treatment of kidney disease.



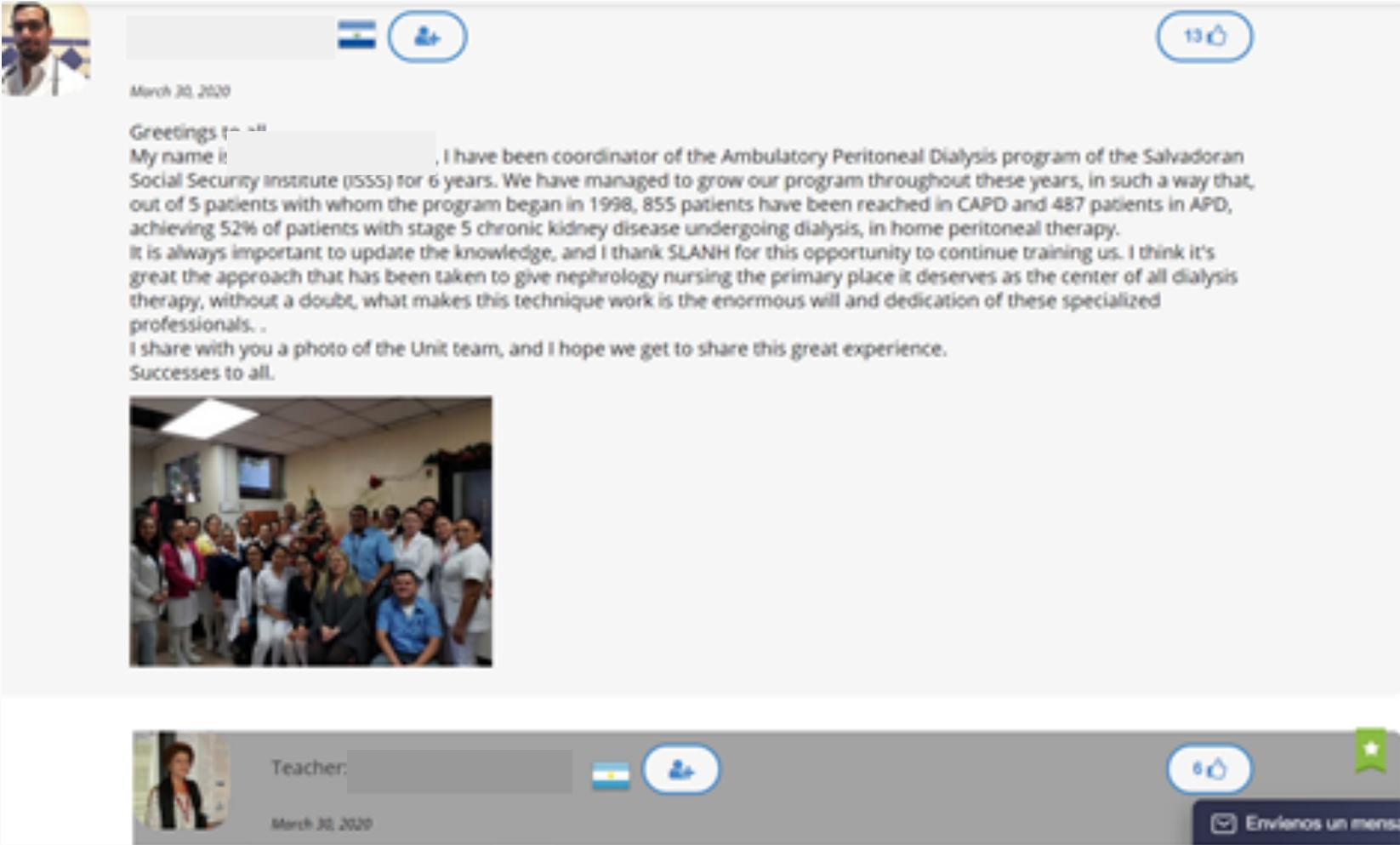
[Redacted Name]

23 Mar 2020 23  

 Envíenos un mensaje

# Exchange among participants and with Faculty in the opening forum



The image shows a screenshot of a forum post. At the top left is a profile picture of a man. To its right is a grey bar containing a flag icon and a plus sign icon. Further right is a blue circle with the number '13' and a heart icon. Below this bar is the date 'March 30, 2020'. The main text of the post reads: 'Greetings to all. My name is [redacted], I have been coordinator of the Ambulatory Peritoneal Dialysis program of the Salvadoran Social Security Institute (ISSS) for 6 years. We have managed to grow our program throughout these years, in such a way that, out of 5 patients with whom the program began in 1998, 855 patients have been reached in CAPD and 487 patients in APD, achieving 52% of patients with stage 5 chronic kidney disease undergoing dialysis, in home peritoneal therapy. It is always important to update the knowledge, and I thank SLANH for this opportunity to continue training us. I think it's great the approach that has been taken to give nephrology nursing the primary place it deserves as the center of all dialysis therapy, without a doubt, what makes this technique work is the enormous will and dedication of these specialized professionals. . I share with you a photo of the Unit team, and I hope we get to share this great experience. Successes to all.' Below the text is a photograph of a group of people, likely the dialysis unit team. At the bottom of the screenshot is a grey bar with a profile picture of a woman, the text 'Teacher: [redacted]', a flag icon, a plus sign icon, a blue circle with the number '6' and a heart icon, a green star icon, and a dark blue button with a white envelope icon and the text 'Envíenos un mensa'.

**Sociodemographic and care characteristics in caregivers of patients on peritoneal dialysis in the region**

Among the conditions of caregivers of PD patients in the Caribbean region, the care of these patients is mainly delegated to women in the home, with marital relations and mother and daughter being the main links between the patient-caregiver dyad, whose level Educational is of the basic average secondary in most of the cases.

*Assess sociodemographic and care characteristics in caregivers of patients on peritoneal dialysis in the region*

☆☆☆☆☆ 4.31

March 6, 2020 17

**Comment »**



**Percutaneous Left Atrial Closure in Atrial Fibrillation Patients on Renal Replacement Therapy by Peritoneal Dialysis: Case Report**

The pharmacological treatment of non-valvular atrial fibrillation in patients with kidney failure on dialysis has important limitations, determined by increased risk of bleeding and the use of sub-therapeutic doses to decrease the risk of thrombosis, in this context in patients with kidney disease. With chronic dialysis requirement, other therapeutic alternatives should be considered, such as left atrial closure with a Watchman device. We report 2 cases of implantation of this device at the Hospital Universitario San José - Bogotá and a non-systemic review is made about the advances made in recent years in relation to the non-pharmacological treatment of atrial fibrillation. Regarding the use of Watchman, it has been described that it is associated with fewer hemorrhagic strokes (0, 15 vs. 0.96 events / 100 patient-years HR: 0.00 vs. 0.004), cardiovascular

**Peritoneal dialysis catheter complications**

Identify the frequency, time of presentation and type of complications of peritoneal dialysis in the first three months after implantation of the peritoneal catheter. We reviewed records of patients who had a peritoneal catheter placed, from May 17 to October 01, 2017, the study unit was the catheter, if a patient required a catheter change, it was analyzed as a separate event. From the clinical records, the information was obtained from the insertion of the catheter until three months later, the demographic, clinical data of the placement, functionality, time and type of presentation of complications were sought.

*Assess Peritoneal Dialysis Catheter Complications*

☆☆☆☆☆ 3.80

March 6, 2020 16

**Comment »**

**Acute Peritoneal Dialysis**

Acute Kidney Injury (ARF) is a global health problem, with high mortality, especially in underdeveloped countries with few resources. Peritoneal Dialysis (PD) was the first renal replacement therapy (TRS) used in ARI, replaced by Hemodialysis (HD) (1-3), until disuse in acute patients. Objectives and Methods: According to prospective design. To determine the efficacy of PD in acute patients as an alternative to TRS. Conform selection criteria and therapeutic scheme of PD in ARI (2-4). Clinical and laboratory variables were analyzed, with admission parameters, 24, 48, 72 hrs. Through SPSS.

*Assess acute peritoneal dialysis*

☆☆☆☆☆ 4.32

March 6, 2020 18

**Comment »**

## Exchange around the presented papers

caregiver and this one is motivated, the survival and quality of life for the patient will be greater. It should be borne in mind that the Primary Caregiver will develop wear and tear over time and incongruously, he may be attacked by the relatives, who never supported the patient, neither in the care of his person, nor in the economic aspects.

A 2  People like this comment

I LIKE IT 

REPLY 



TWO 

26 Mar 2020

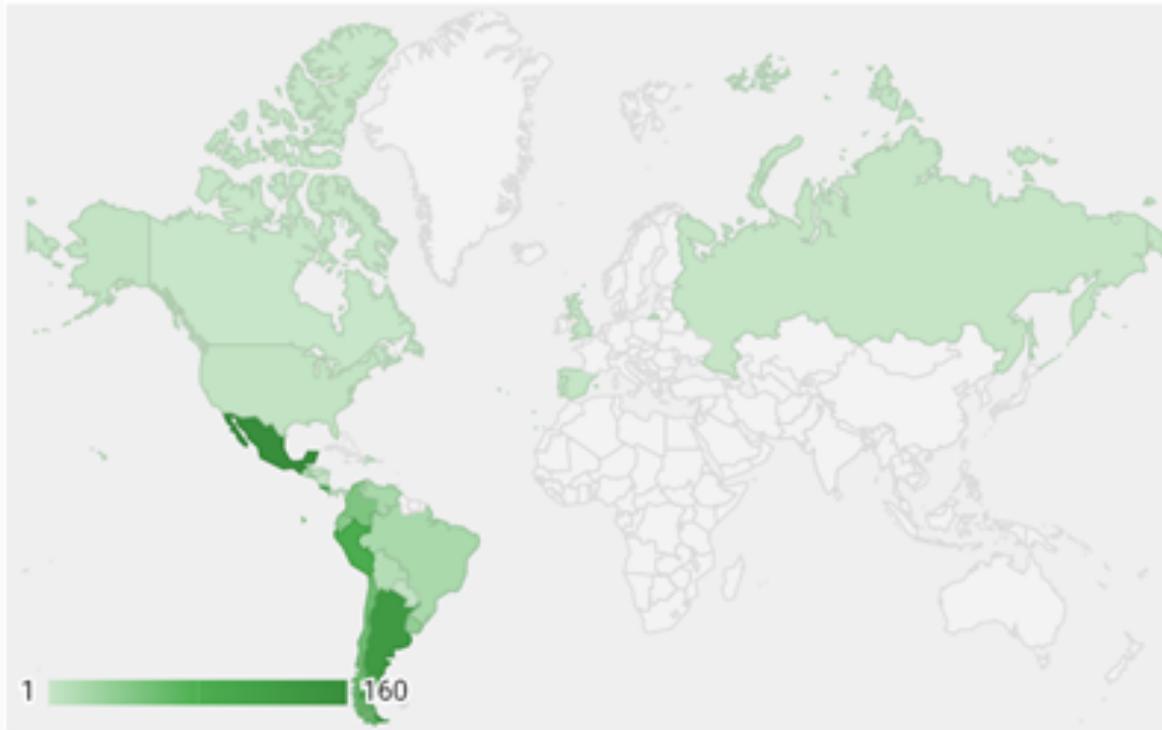
Good evening, I write from Argentina, I find this research work very interesting since it is essential to address the situation of each caregiver due to the impact on the patient's adherence to treatment and, of course, on their quality of life. I work in a pediatric public hospital, Dr. Pedro de Elizalde, Ex. Casa Cuna of the Autonomous city of Buenos Aires who receives patients from the city, from the Buenos Aires suburbs and from all over the country, where the socio-economic situation is the majority of the case is very low, presenting complications and therefore difficulties in the continuity of treatment.

A 2  People like this comment

I LIKE IT 

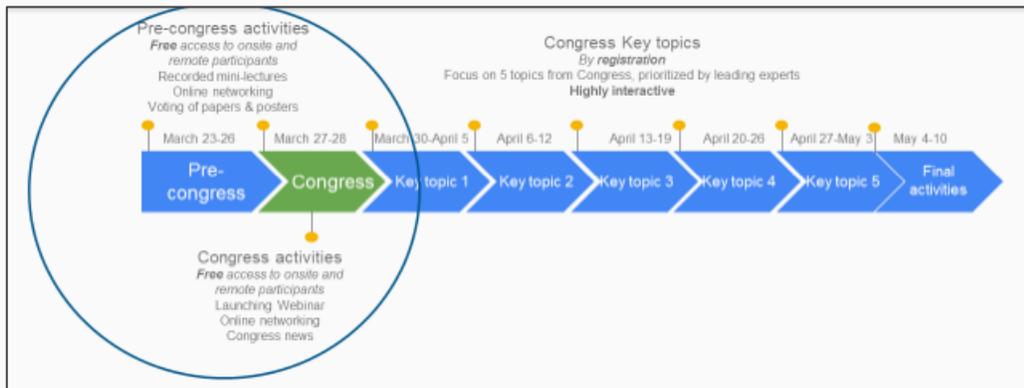
REPLY 

## Distribution of registrants to the extended congress



Country	Participants	Percentage
Mexico	160	20.70%
Argentina	131	16.90%
Costa Rica	94	12.10%
Peru	85	11.00%
Chile	57	7.40%
Colombia	48	6.20%
Ecuador	41	5.30%
Uruguay	35	4.50%
Venezuela	21	2.70%
Brazil	20	2.60%
El Salvador	18	2.30%
Guatemala	16	2.10%
Bolivia	14	1.80%
Portugal	5	0.60%
Honduras	5	0.60%
Paraguay	5	0.60%
United States	4	0.50%
Panama	3	0.40%
Spain	3	0.40%
Dominican Republic	3	0.40%
Other	6	0.80%
<b>TOTAL</b>	<b>774</b>	<b>100.00%</b>

# A more developed extended congress model



## Satellite sessions

In native languages  
Distributed geographically  
Live, hybrid, or virtual  
By Registration or free  
Congress news in local languages  
Tutors in local languages

## Congress highlights

In native languages  
Distributed geographically  
Live, hybrid, or virtual  
By Registration or free  
Tutors in local languages

Formal stakeholder analysis of this new type of meeting is necessary

## Winner-take-all dynamic: examples from the entertainment industry

“... advances in digital technologies foster concentration and a winner-take-all dynamic (...). New technologies increasingly give people around the world access to the most sought-after television programs, movies, books, and opera performances.”

Elberse, Anita. *Blockbusters: Why Big Hits - and Big Risks - are the Future of the Entertainment Business*. Faber and Faber, New York, 2013. Chapter 5

Questions and comments



# How the University of Virginia is implementing some of these concepts (I)

- Actively utilizing web-based technologic platforms– multiple vendors-- UVA has an institutional license for Coursera (MOOC) that augments our other platforms and broadens our abilities to pivot to meet the needs of our departments, CME affiliates and joint provider organizations.
- Consistently building and recommending to course directors and leadership, the benefits– organizational and financial, of creating asynchronous learning opportunities

# How the University of Virginia is implementing some of these concepts (II)

- The sequential and asynchronous learning in combination with live sessions, is consistent with the ABMS continuing certification vision— and provides opportunities to truly create communities of practice (which we have talked about forever!).
- Creates the opportunity for CME/CE providers to demonstrate leadership, creative problem solving and support to healthcare teams/organizations whose resources are focused on the pandemic

## Take-home messages

- Meetings of the future will be more intensive in the integration of technology.
- The Extended Congress design is an example of the formats that will be used, and it acts as an insurance policy for live events.
- The current main stakeholders will continue to have an important role in the new state of affairs.
- Those organizations that move faster in the implementation of new models will concentrate more of the share.
- In order to move fast, trial-and-error in a systematic way is necessary.

# Additional resources:

The Difference Between Emergency Remote Teaching and Online Learning:

<https://er.educause.edu/articles/2020/3/the-difference-between-emergency-remote-teaching-and-online-learning>

Survey Results: How Is COVID-19 Changing the Business Events Industry?

<https://www.pcma.org/survey-results-covid-19-changing-business-events-industry/>

# Discussion, questions and comments

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