UC Irvine

Western Journal of Emergency Medicine: Integrating Emergency Care with Population Health

Title

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Permalink

https://escholarship.org/uc/item/6f4155zr

Journal

Western Journal of Emergency Medicine: Integrating Emergency Care with Population Health, 25(3.1)

ISSN

1936-900X

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Publication Date

2024-03-24

DOI

10.5811/westjem.20422

Supplemental Material

https://escholarship.org/uc/item/6f4155zr#supplemental

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OBSERVATIONS: Results reported with descriptive statistics. Core faculty MBI results are shown comparing Y0, Y1 and Y2 by each participant.

Results: Faculty experienced an average improvement of 4.8 points, 3.0 points and 2.5 in EE, D and PA scores demonstrating trends toward improvement in Wellness. Maslach Wellness Profiles improved in 33% and stayed the same in 53% of participants.

Conclusions: While the sample size is small, this study demonstrates unique insight to faculty wellness during a time of transition. We demonstrated a trend toward wellness improvement.

37 Change in Attendance During a Virtual Emergency Medicine Conference Day

William Dewispelaere, Adane Wogu, Nannan Wang, Spencer Tomberg

Background: Many emergency medicine (EM) residency programs transitioned in-person didactic days to virtual settings during COVID-19 (1). Virtual education has advantages including accessibility and adaptability (2). Downsides include loss of focus and effective learning strategies (3,4,5), however, changes in attendance throughout a virtual education day are not well-studied.

Objectives: This study explored learner attendance in the virtual setting by quantifying learner attrition during virtual conference days. Our hypothesis was that there would be a significant decline in attendance throughout the education session.

Methods: Design: This was a retrospective observational study that spanned 4 months at a single EM residency program where didactic conference runs for 5 hours. Each conference starts with 90 minutes of morbidity and mortality (M&M) and is followed by didactic education sessions. Observations: The number of participants logged into a virtual meeting were calculated at 30-minute intervals. Comparisons in attendance were made between subsequent intervals. We used generalized estimating equations to calculate appropriate incident rate ratios (IRR) and 95% confidence intervals (95% CI) for each time point. Colorado Multiple IRB approval was obtained for the study.

Results: Average attendance peaked at 121 participants during M&M at 8:30am (Table 1). There was a 23% decline after M&M ended at 9:00am (p<0.001). There was a decline in participation throughout the rest of the conference day (Figure 1). By the last timepoint, there were an average of 32 participants left in the meeting, which is a 74% decline from peak participation.

Conclusions: This study demonstrates a decline in participation over the five-hour education day. Our findings may support limiting the length, or frequency, of virtual

education sessions as emergency medicine residencies choose how to incorporate virtual education into their didactic learning platforms.

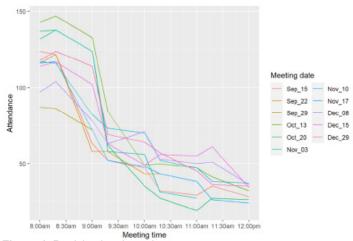


Figure 1. Participation throughout event.

Table 1. Average attendance during M&M.				
Time	(min, max)	mean (SD)	IRR (95%Cl)+	p-value
8:00am	(87, 143)	116.3 (16.3)	-	-
8:30am	(88, 147)	121.0 (16.8)	1.02 (1.01, 1.04)	0.003
8:00am	(58, 133)	92.9 (27.2)	0.77 (0.68, 0.87)	<0.001
9:30am	(52, 84)	63.4 (9.8)	0.48 (0.21, 1.08)	0.077
10:00am	(35, 71)	53.2 (11.8)	1.02 (0.58, 1.60)	0.932
10:30am	(27, 57)	44.4 (11.0)	0.80 (0.88, 0.96)	0.018
11:00am	(19, 55)	39.7 (12.2)	0.68 (0.29, 1.58)	0.370
11:30am	(20, 61)	39.4 (11.8)	1.62 (0.66, 3.51)	0.321
12:00pm	(24, 37)	31.5 (4.9)	0.63 (0.35, 1.12)	0.113

38 Learner-Driven Evaluations and Outcomes During Fourth Year Emergency Medicine Sub-Internship

Allison Beaulieu, Sofia Tuttle, Rowan Kelner, Christine Raps, Robert Stephen, Susan Stroud

Background: A learner-driven feedback model allows learners to take an active role in their growth and development. The model improves the quality and quantity of feedback received; however, it is unknown if it impacts performance.

Objectives: The purpose of this study is to assess the performance outcomes of a learner-driven evaluation model.

Methods: A retrospective observational study was employed to review 2441 evaluations from 141 medical students during a 4-week EM sub-internship at an academic center between 2021-2023. Learner-driven evaluations were completed by faculty and senior residents on a Likert scale (0-4). The relationship between number of evaluations and outcomes was analyzed using correlation and linear regression.