Course name	_HDB		_		
People completing	worksheet	Nahida Islam	 	 	·

Please use the following document to identify how your course will meet the following 4 benchmarks for AY 20-21. Please note that options below relate to courses that *do not* include a 'block' structure. For those that *do* include a block structure the benchmarks apply to each block.

We are focusing on Benchmarks reflecting increase engaged learning which will be part of the HDB block in the new curriculum.

We do not have the schedule for Spring 2021 so the session dates are not included.

Benchmark Category	Deliverables (pick at least one from those listed – delete those not selected)	Session date/title and responsible person for each (create new cell for each session)	1 line description of change
A. Increase engaged learning (small group, flipped classroom, problem-based learning, simulation, etc.) Decrease traditional lectures	Convert 1 lecture per week to an interactive session using an instructional method such as small group, team-based, case-based, etc. Transform 1 lecture per week into an interactive independent learning module	Introduction to Anemia -Nahida Islam	Will convert one traditional lecture to flipped classroom for spring 2021.
A. Increase engaged learning (small group, flipped classroom, problem-based learning, simulation, etc.) Decrease traditional lectures	Convert 1 lecture per week to an interactive session using an instructional method such as small group, team-based, case-based, etc. Transform 1 lecture per week into an interactive independent learning module	Iron Homeostasis and Anemia - Shrinkhala Khanna, - Nahida Islam	Will convert one traditional lecture to case based interactive session

Benchmark Category	Deliverables (pick at least one from those listed – delete those not selected)	Session date/title and responsible person for each (create new cell for each session)	1 line description of change
A. Increase engaged learning (small group, flipped classroom, problem-based learning, simulation, etc.) Decrease traditional lectures	Convert 1 lecture per week to an interactive session using an instructional method such as small group, team-based, case-based, etc. Transform 1 lecture per week into an interactive independent learning module	Megaloblastic anemia - Sakiko Suzuki, Nahida Islam	Will convert a traditional lecture to case based interactive session.
A. Increase engaged learning (small group, flipped classroom, problem-based learning, simulation, etc.) Decrease traditional lectures	Convert 1 lecture per week to an interactive session using an instructional method such as small group, team-based, case-based, etc. Transform 1 lecture per week into an interactive independent learning module	Sickle Cell disease - Patan Gultawatvichai, Nahida Islam	Will convert one traditional lecture to case based interactive session
A. Increase engaged learning (small group, flipped classroom, problem-based learning, simulation, etc.) Decrease traditional lectures	Convert 1 lecture per week to an interactive session using an instructional method such as small group, team-based, case-based, etc.	Acute Leukemia - Jonathan Gerber, Nahida Islam	Will convert one traditional lecture to case based interactive session

Benchmark Category	Deliverables (pick at least one from those listed – delete those not selected)	Session date/title and responsible person for each (create new cell for each session)	1 line description of change
	Transform 1 lecture per week into an interactive independent learning module		
A. Increase engaged learning (small group, flipped classroom, problem-based learning, simulation, etc.) Decrease traditional lectures	Convert 1 lecture per week to an interactive session using an instructional method such as small group, team-based, case-based, etc. Transform 1 lecture per week into an interactive independent learning module	Lymphomas -Andrew Gillis Smith	Will convert one traditional lecture to case based interactive discussion.
B. Identify and remove unintended redundancy	Review lecture materials to align slide number with length and topic Identify where materials are taught in other courses and review whether to maintain in your course (OASIS search or other method) Provide a roadmap to help faculty link their sessions to what comes before and after	Assistance needed with OASIS search.	(Plan OASIS search for redundancies. Review coarse materials and initiate roadmap.)

Benchmark Category	Deliverables (pick at least one from those listed – delete those not selected)	Session date/title and responsible person for each (create new cell for each session)	1 line description of change
C. Incorporate at least 1 new aspect of EACH of these 3	1. Antiracism, diversity, bias*	Hemoglobinopathies (thalassemia and sickle cell disease) -Patan Gultawatvichai, Nahida Islam	Add content on diversity and bias
priority content areas into the course (or block for larger courses) using the Instructional Method of your choice Highlight or insert the aspect of	Social Determinants of Health: economic and social conditions that influence individual and group differences in health status (CDC) **	Hemoglobinopathies (thalassemia and sickle cell disease) Patan Gultawatvichai, Nahida Islam	Update lecture content relevant to individuals, communities, and population at risk for hemoglobinopathies and complications thereof.
choice	3. Health Systems Science: the principles, methods and practice of health care to patients and populations***		

D. All course leaders, and specific small group faculty will participate in a DRIVE (Diversity, Representation and Inclusion for Value in Education) workshop activity. This will be tracked and reported centrally. Schedules are forthcoming and these should be completed early as possible. We welcome your inviting course faculty to join.

^{***}I have watched the video from past year's DRIVE workshop however I believe it will be helpful to directly participate in one such workshop. ***

- * Diversity: https://www.umassmed.edu/dio/ (UMMS Diversity and Inclusion Office); Antiracism: "defined as some form of focused and sustained action, which includes inter-faith, multi-lingual and inter-abled (i.e. differently-abled) communities with the intent to change a system or an institutional policy, practice, or procedure which has racist effects" Anti-racism Digital Library; Bias as defined by the DRIVE initiative: Disproportionate weight in favor or against one thing, person, or group compared with another in a way usually considered to be unfair; A preference or inclination, favorable or unfavorable, which inhibits impartial judgment. A tendency to think, act or feel in a particular way.
- ** and the Healthy people 2020 list: economic stability, education, health and health care, neighborhood and built environment, social and community context
- *** Health (HC) delivery structures and processes; HC policy and economics; patient and family-centered care; health system improvement; value-based care and evidence-based medicine; systems thinking; population and public health; HC ethics and law; interprofessional care and teaming; clinical informatics.