

Course name\_\_\_\_FOM211 OSD Female reproduction\_\_\_\_11/1/2020\_\_\_\_\_

People completing worksheet \_\_\_\_Susan Zweizig\_\_\_\_\_

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.

| Benchmark Category   | Deliverables<br>(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   |
|--|---|--|--|
| <b>A. Increase engaged learning</b><br>(small group, flipped classroom, problem-based learning, simulation, etc.)<br><br>Decrease traditional lectures | <b>Best Zoom Practices</b><br><br>1. Add Top Hat to at least 1 lecture per week<br><br><b>or</b><br><br>2. Convert 1 lecture per week to an interactive session<br><br><b>or</b><br><br>3. Transform 1 lecture per week into an interactive independent learning module | Week 1 – 2/2/2021 Dina Kandil, Lela Giannaris, Susan Zweizig :We will build a new session demonstrating anatomy and gross pathology of the female reproductive system with members of the department of pathology and anatomy – we may use tophat for interactive data<br><br>Week 2-<br><br>2/8/2021 Amenorrhea, Menopause Dhivya Kannabirran, Susan Zweizig, Laura Ferraro: We have converted two lectures to Independent learning modules<br><br>2/10/2020 Disease of the Ovary and Adnexa Susan Zweizig- We have added Top hat to one lecture<br><br>Week 3- | New interactive session on anatomy and pathology, two ILMs<br>Added tophat to one lecture a week |

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|---|---|--|-------------------------------------|
|   |   | 2/16/2020 Sharmilee Korets -<br>Disease of the cervix- added top hat   |                                     |
| <b>B. Identify and remove unintended redundancy</b>   | <p><b>Within Your Course</b></p> <ul style="list-style-type: none"> <li>Review lecture materials to align slide number with length and topic</li> <li>Provide a roadmap to help faculty link their sessions to what comes before and after</li> </ul> <p><b>Within the Entire Curriculum</b></p> <p>Identify where materials are taught in other courses and review whether to maintain in your course (OASIS search or other method)</p> | <p>Susan Zweizig will review each presentation as it comes in for redundancy - OASIS search was not successful! I need more help with finding where materials are taught in other courses</p>                        | Need help on this for female repro  |
| <b>C. Incorporate at least 1 new aspect of EACH of these 3 priority content areas</b> into the course (or block for larger courses) using the Instructional Method of your choice | 1. Antiracism, diversity, bias*   | Weeks 1,2 and 3: Content will be woven into lectures including Infection and reproduction, STDs, Complications of pregnancy Cervix disease, uterine disease, Contraception, ovarian and adnexal disease, infertility |                                     |
| Highlight or insert the aspect of choice  | 2. Social Determinants of Health: economic and social conditions that influence individual and group differences in health status (CDC) **  | Weeks 1, 2 and 3: Content will be woven into lectures including Infection and reproduction, STDs, Complications of pregnancy   |                                     |

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|---|---|--|------------------------------|
|   |   | Cervix disease, uterine disease, Contraception, ovarian and adnexal disease, infertility   |                              |
|   | 3. Health Systems Science: the principles, methods and practice of health care to patients and populations*** | New cervix cancer screening guidelines are an excellent example of how HSS influences practice and how to get best value for patients in health care<br>Similarly – breast disease and mammography |                              |
| <b>D. All course leaders, and specific small group faculty will participate in a DRIVE (Diversity, Representation and Inclusion for Value in Education) workshop activity.</b> 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. |   |  |                              |

DRIVE: Diversity, Representation and Inclusion for Value in Education: <https://www.umassmed.edu/dio/initiatives/drive/>

- A brief introduction to the DRIVE Initiative, [click here](#).
- The Curriculum Appraisal Tool, [click here](#)
- Interactive Library Guide with expanded appraisal tools and linked resources, [click here](#)
- Download sample disclosure slide for inclusion and presentations, [click here](#)
- Zoom recording of the faculty development workshop, [click here](#)
- Extensive self-education resource collection curated by Yale medical library, [click here](#)

\* Diversity: <https://www.umassmed.edu/dio/> (UMMS Diversity and Inclusion Office); Antiracism: "defined as some form of focused and sustained action, which includes [inter-cultural](#), 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.