

Taking Advantage of COVID: Transitioning To and Navigating Virtual Conferences

Background

Conferences offer a venue to share ideas, present and hear about current research, and network with experts in the field from around the world [1]. Medical conferences include an added dimension of being a form of continuing medical education and thus important for post-graduate learners and practicing professionals [2]. Not only do medical conferences offer a collegial environment to discuss evidence-based guidelines and current practices, but they also allow participants an opportunity to present their work and discuss novel ideas [3]. In addition, interdisciplinary and cross-institution scientific collaborations that result from conferences can lead to well-cited research publications [4].

The COVID pandemic made it impossible to conduct traditional in-person conferences and conferences had to transition to a virtual platform. This switch, however, came with unexpected benefits. In addition to decreasing the cost of attending the conference, virtual conferences allowed continued dissemination of knowledge and learning opportunities through a virtual platform that ultimately enhanced outreach [3] by enabling participants with busy schedules and/or in distant geographic locations to attend.

Context

I had recently graduated from a three-year Internal Medicine residency program and had been a chief resident for one month when I was asked to plan a virtual conference. I had no prior event planning, let alone medical conference planning experience. It was a daunting undertaking. Conferences nowadays are often planned by administrators which can shift the focus away from the educational potential [1]. As a clinician-educator, I was in a unique position to focus on the educational aspect of the conference. This paper will discuss my experience planning and conducting a virtual medical conference. I will present my process for conducting the conference, and the lessons learned that could help other conference planners.

Medical conferences

Organizing a conference requires a tremendous amount of planning, preparation, and persistence to ensure the intended vision is met. But there is insufficient evidence and guidance on conducting effective conferences [4]. While there is no standard way to plan a conference, Rubinger et al. recommend a four-phase planning process: Pre-planning, Planning, Accomplishing conference goals, gauging Response, and Engaging participants for future conferences (PrePARE) [4]. Wyatt emphasizes that building a team to assist with planning a conference is essential [5]. Depending on the size of the conference, there may need to be several dedicated committees. Wyatt designed his guidelines with an in-person conference in mind. However, these general guidelines could also be applied to virtual conference planning.

The Process

Step 1: I considered the style, size, and duration of the conference [5]. The conference I hosted was for the southwest Texas American College of Physicians, which meant the size included eight medical residency programs in the southwest region ranging from 15 to 100 residents each. Most conferences have a budget, so it is important to estimate income and expenditure early. Based on feasibility and resources, I opted for a half-day virtual conference that allowed

attendees to work the other half of the day if needed and allowed enough time for poster/ podium presentations and speakers interspersed throughout the conference.

Step 2: Conferences should have a main purpose and a program designed to address it [5]. I started by choosing the theme “Teaching with Technology,” a particularly relevant topic to the attendees during COVID. Additionally, I invited three speakers, coined Knowledge Nuggets, where a cardiologist, infectious disease doctor, and endocrinologist could give 15-minute updates in their respective fields. As an educator, my overarching goal was to design a program that introduced participants to novel ideas and/or updates in a particular field. This was done by dispersing Knowledge Nugget speakers among breakout sessions, which also helped break up the monotony of presentations.

Step 3: A venue should be selected early on that accommodates the anticipated number of participants and meets the technology needs. If participants are traveling to the conference then the planner must also give thought to nearby accommodation options [5]. Since I was hosting a virtual conference, I needed to decide on a platform, such as Zoom, and determine the best add-on plan which dictates the number of participants allowed and the time allotted.

Step 4: The conference needs to be advertised and there needs to be a call for abstracts. Once abstracts and posters were submitted through the portal, I then determined the number of breakout sessions needed, order of presenters, the appropriate amount of time allotted for presentations and questions, and collated all of the presenters’ slides into a single PowerPoint presentation.

Step 5: Each residency program was asked to refer two judges. We had a total of nine judges, three per session (Clinical Vignette, Quality Improvement, Research). This ensured that if a scheduling conflict arose, there would still be enough judges for each breakout session and allow for more objective grading for the final awards session.

Step 6: I designed judging rubrics for the various types of breakout sessions (research, quality improvement, clinical vignettes). I created my rubrics by reviewing rubrics from other conferences, consolidating the categories down to five areas or less, and refining the judging categories to ensure verbiage was clear. My rubrics were made available on Survey Monkey and designed to be completed during the time allotted for each presentation. Abstracts and posters were sent to judges beforehand for prejudging which was essential to familiarize judges with the grading scheme and help save time judging on the day of the conference. A judge was expected to evaluate eight to twelve presentations depending on the breakout session assigned. Results were tallied and announced during the virtual awards ceremony at the culmination of the conference.

Step 7: To enhance conference participation, I hosted a creative expression competition. I intended to engage conference participants who might not have submitted an abstract. The competition consisted of a quote by Helen Keller, “Although the world is full of suffering, it is also full of the overcoming of it” to which residents could respond by submitting paintings, poems, or essays. A video of the creative expression competition pieces was made and showcased on the meeting hub and Twitter. Participants genuinely loved seeing this creative side

of residents and the video was set on a loop to be previewed during breaks and when the judging was being tallied.

Personal Reflections

There were many unique aspects of my planning. First, I collated all of the presenters' poster slides into a single PowerPoint presentation that was controlled by the host of the breakout session. Allowing the host control to present all of the presenters' slides took the burden off of presenters of having to share their slides, limited time wasted between switching presenters, and also limited the number of technical complications.

Another distinctive planning strategy I used was to place residents from the same program in the same breakout room. This allowed program directors, supervisors, and colleagues from the same program to be in one breakout session to see all their peers present rather than flipping between breakout sessions and adding a burden to the administrator responsible for admitting them to each breakout room.

Another unique aspect of my conference that I am most proud of was the resident Twitter team that I created for the conference. Leading up to the conference, they tweeted updates and reminders about the upcoming conference. They also tweeted pearls and questions during the conference. Not only did the Twitter team make the conference more interactive, but it also allowed me the unique opportunity to teach, mentor, and provide a unique experience for my trainees to get involved in creating a social media presence as part of the planning committee.

The platform used for the virtual conference was Zoom. While having a practice session before a virtual conference is likely not unique, I made sure to schedule two practice sessions the Monday and Thursday before the conference. This way most participants could attend at least one practice session and keynote speakers, presenters, and I could practice the technical and logistical aspects of running through the program, sharing slides, and using the microphone.

The conference was well attended with over 45 participants. I received over 30 messages in my zoom chat after the conference about "how interactive the conference was" and an overall "great virtual experience." "The conference was unique and dynamic. This may be one of the few times where attendees preferred a virtual vs. an in-person experience."

After the conference, I conducted a self-reflection and feedback session to reflect on the conference and make improvements for future cycles. I made a list of what went well and didn't go well at the conference. Next, I asked colleagues and supervisors who attended the conference for feedback. The feedback I would have given myself after reflecting on the implementation of the conference would have been to clearly outline expectations for judges. One judge chose to type their questions into the chat rather than unmute their microphone. This forced the moderator of the session to read the judge's questions on their behalf and detracted from the interactive atmosphere that had been created.

The first lesson I learned early on was to speak to previous conference organizers and take note of what they had to say. Figure out what worked and what barriers they encountered. Don't try to recreate the wheel.

The next lesson I learned was to be flexible concerning team dynamics and member participation. Initially, the planning committee consisted of myself and two other past chief residents. However, both colleagues were deployed which presented many challenges. Two weeks before the conference, I reached out to a current chief who helped co-moderate a clinical vignette session since two sessions were running simultaneously. Don't be afraid to invite others to the planning and implementation team, even if it is approaching the date of the conference; Collaboration is key.

Conclusion

For a first-year faculty member with no conference planning experience, my virtual conference was a success. I created an interactive conference through a virtual platform and had a wide array of expert speakers from various medical fields and unique opportunities like the creative writing expression competition and a resident-led Twitter team. Learning to reflect on creating, organizing, and implementing the conference was not only important for self-regulated learning but also leads me back to lesson one which prepares me to share my own experiences with those who hope to host a virtual conference in the future.

While this piece was about hosting a medical conference, the lessons learned can be generalized to any field. There is little guidance for those who want to host a conference whether it be in person or virtual [6]. Organizing a conference can be overwhelming and hopefully, the feedback and lessons shared can offer practical advice on how to approach such a daunting task. We have faced unprecedented times during the COVID pandemic which has impacted how we conduct conferences. Rather than shy away from a virtual platform, we should appreciate and celebrate it as a way to enhance participation and the dissemination of knowledge.

Disclaimer: “The views expressed are those of the authors and do not reflect the official views or policy of the Department of Defense or its components.”

References

- [1] Alan Skelton. 1997. Conferences, conferences, conferences? *Teaching in Higher Education* 2, 1 (Mar. 1997), 69-72. DOI:10.1080/1356251970020106
- [2] Swaptagni Das, Manan Shah, Amey Mane, Vishal Goyal, Vikram Singh, and JayeshLele. 2018. Accreditation in India: Pathways and mechanisms. *J Eur CME*, 7 (Jan. 2018) 1454251.
- [3] Manoji Kamal, Suresh Bhargava, and Sunil Katyal. 2022. Role of conferences and continuing medical education (CME) in post-graduate anaesthesia education. *Indian Journal of Anaesthesia* 66, 1 (Jan. 2022), 82–84. DOI: https://doi.org/10.4103/ija.ija_1102_21
- [4] Luc Rubinger, Aaron Gazendam, Seper Ekhtiari, Nicholas Nucci, Abbey Payne, Herman Johal, Vitals Khanduga and Mohit Bhandari. 2020. Maximizing virtual meetings and conferences: a review of best practices. *International Orthopaedics* 44 (Aug. 2020), 1461–1466. DOI: <https://doi.org/10.1007/s00264-020-04615-9>
- [5] Jonathan Wyatt. 1999. Organising a medical conference. *Journal of Accident & Emergency Medicine* 16, 3 (May 1999), 223–226. DOI: <https://doi.org/10.1136/emj.16.3.223>

[6] Sharad Hari Gajuryal, Resha Shrestha, Narayan Satyal, and Basant Pant. 2020. Organizing a Medical Conference: Management Perspective. *Nepalese Medical Journal (Online)* 3,1 (Jun. 2020), 328–331. DOI: <https://doi.org/10.3126/nmj.v3i1.28650>