Using "Big Data" Learning Analytics

Or How I learned to identify students "falling off the growth chart" and evaluate competency learning curves

> Clinton Pong, MD Tufts Medical School/Cambridge Health Alliance



Conference on Medical Student Education February 9-12, 2017 • Anaheim, CA

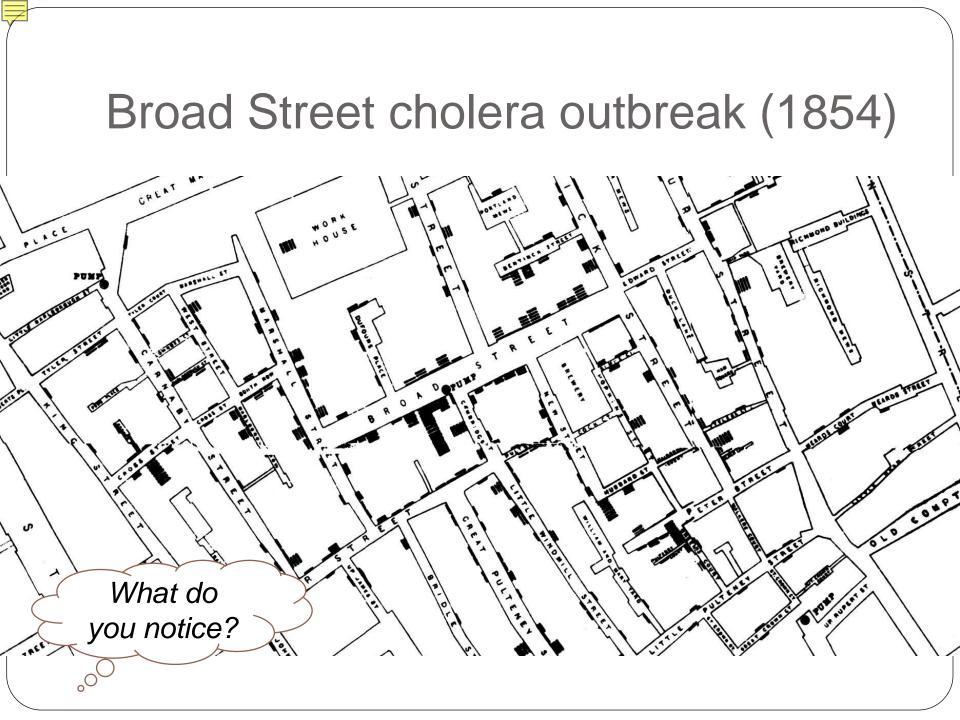
Disclosures

• none

Audience poll

- Students
- Residents
- Allied Health Prof
- IT/Tech-related
- Community Preceptors
- Clinical faculty
- Course directors
- Other





Learning Outcomes



- Describe components of learning analytics relevant to LCME/ACGME for EPA and competency development
- Analyze competency learning curves (CLC) for trends
- 3) Analyze competency measures and identify areas for improvement and faculty development





1) Learning Analytics for Smarties

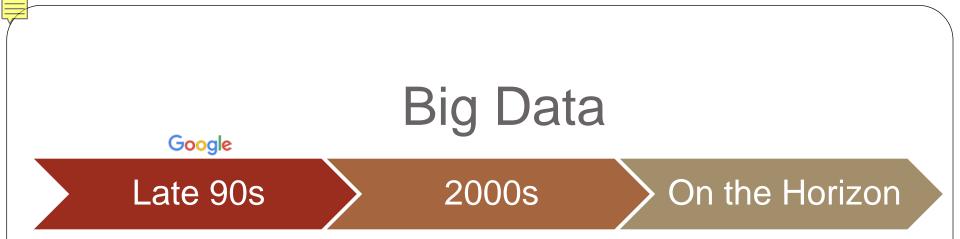
Describe components of learning analytics relevant to LCME/ACGME for EPA and competency development



Medicine is DATA. Medicine is BIG

- Big Data
- Analytics
- Learning analytics
- Examples in medicine:
 - Vital signs \rightarrow Growth chart
 - Lab tests → "Quad screen"
 - EKGs / EEGs → e-Read
 - Clinical calculators →
 Prediction of clinical outcomes

 Examples in education:



What we have

- Volume
- Velocity
- Variety
- Value

What we want

- Digestible
- Easy to use
- Includes all sources
- Useful and actionable

(Laney 2001)

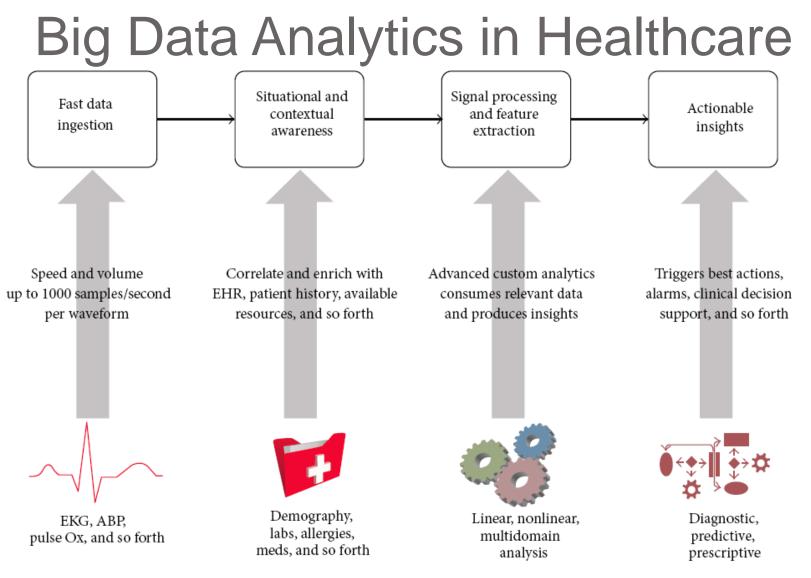
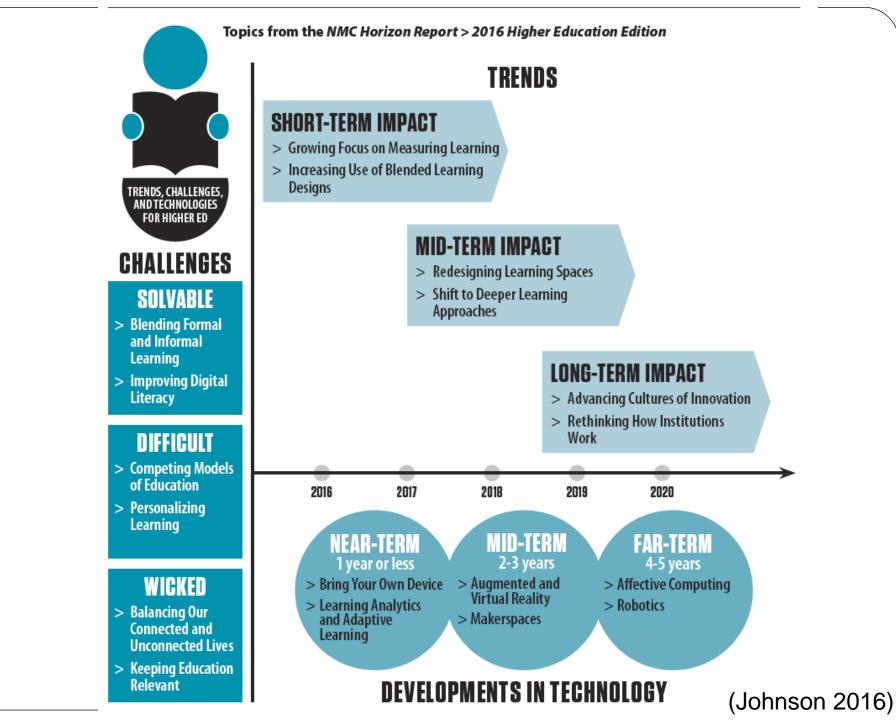


FIGURE 1: Generalized analytic workflow using streaming healthcare data.

(Belle 2015)



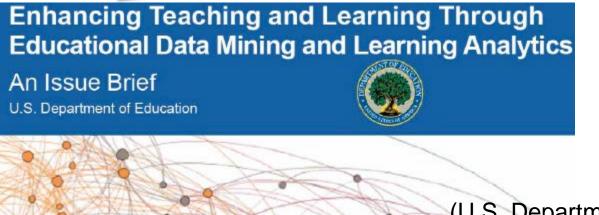
Big Data Analytics

- Descriptive analytics
 - Summarizes
 - ~80% of business analytics
- Visual analytics
 - Storytelling with graphs and charts to make insights consumable, comprehensible, and actionable.
- Comparative analytics
 - Benchmarking
 - Monitoring
 - Tracking performance or process health indicators

- Prescriptive analytics
 - Prescribes courses of action
 - i.e. IEP & coaching plans
- Predictive analytics
 - Study recent and historical data using:
 - Statistical
 - Modeling
 - Data mining
 - Machine learning
 - Etc.
 - Future performance measures

Learning analytics interprets data "on behalf of students in order to assess academic progress, predict future performance, and spot potential issues."

"Data are collected from <u>explicit student actions</u>, such as completing assignments and taking exams, and from <u>tacit</u> <u>actions</u>, including online social interactions, extracurricular activities, posts on discussion forums, and other activities that are not directly assessed as part of the student's educational progress."



(U.S. Department of Education, 2012)

Learning analytics systems apply models to answer such questions as:

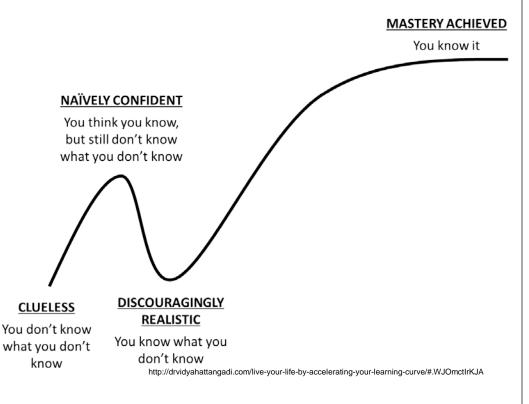
- 1. When are students ready to move on?
- 2. When are students falling behind/at risk for drop out?
- 3. What grade is a student likely to get w/o intervention?
- 4. What is the best next course?
- 5. Should a student be referred for help?

- ACGME Milestones
- Remediation
- Elective/
 Selective
- Workshops
- Faculty Development

(U.S. Department of Education, 2012)

MedEd has a "steep learning curve"

- Learning curve*
 - Visual representation of performance
- Experience curve*
 - Learning Curve
 - + deliberate practice
 - + feedback
- Competency Learning Curve (CLC)**
 - Experience curve
 - + Big Picture
 - + Big Data



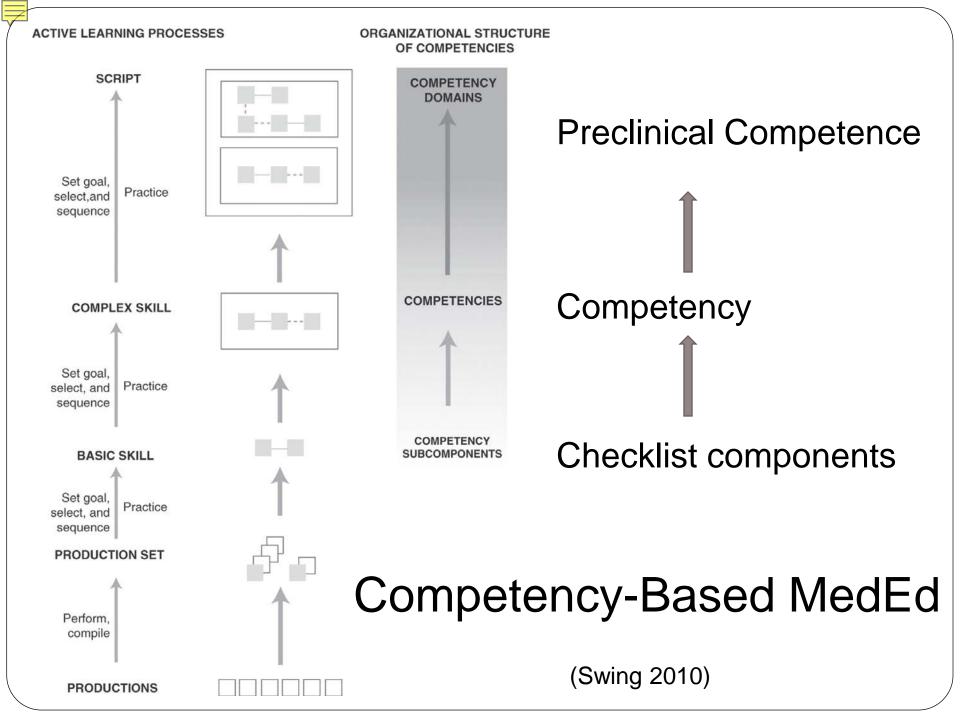
*(Pusic 2012, 2015) *Novel concept, (?!Pong 2018)

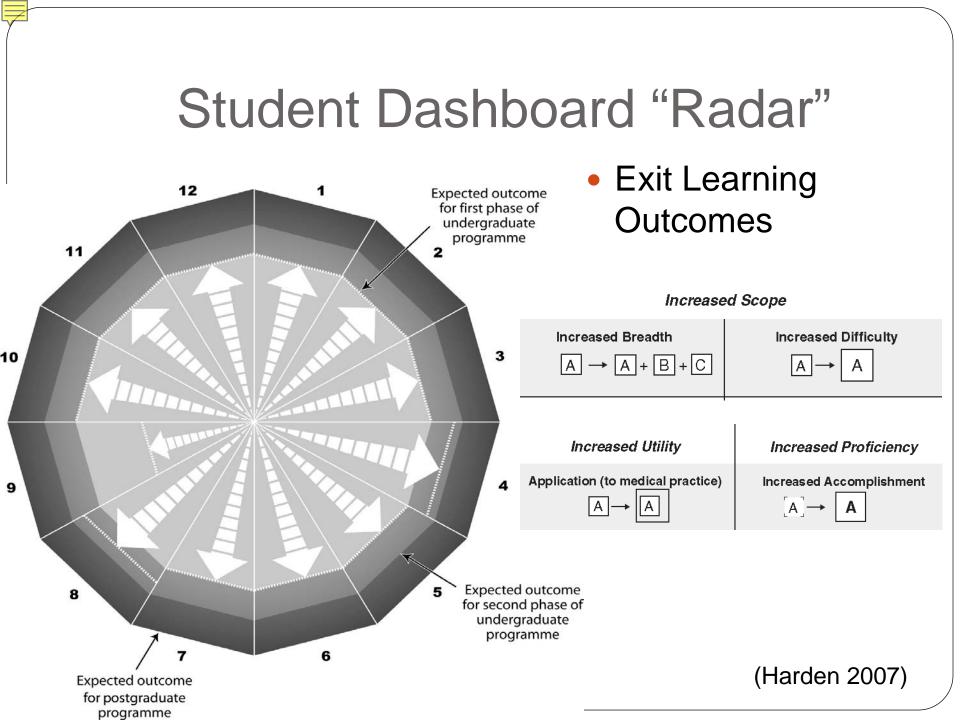


2) Competency Learning Curve (CLC)

Analyze competency learning curves for trends







Ex: Competency Assessment

Increased Utility	Increased Proficiency
Application (to medical practice) $\boxed{A} \rightarrow \boxed{A}$	Increased Accomplishment $[A] \rightarrow A$

Information Mastery

- Can formulate PICO (patient, intervention, control, and outcome) question
- Identifies patient-oriented evidence
- Lists evidence-based information sources (Dynamed, BMJ, Cochrane)
- Accesses evidence to answer a clinical question in real time

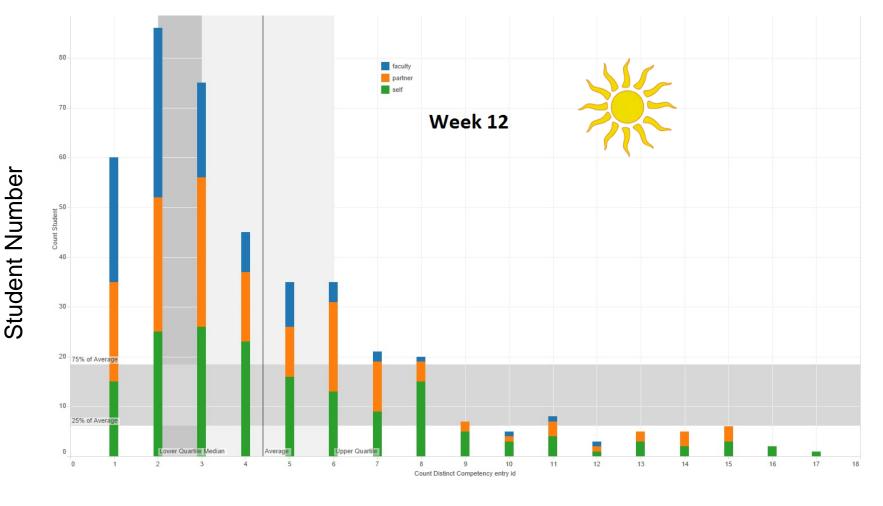


Competency-based Apprenticeship in Primary Care (CAP) @Tufts

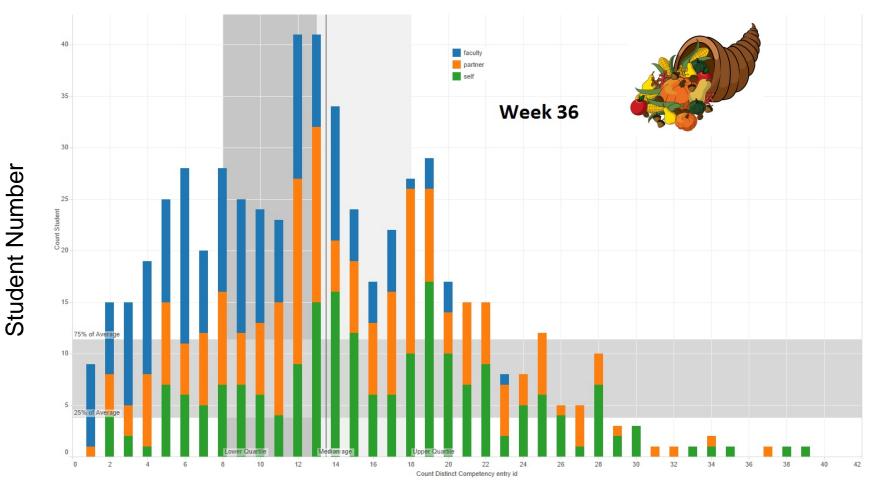
- Competency-Based Checklists
 - 50 in total
 - 26 mandatory \rightarrow 28 \rightarrow 30
- n = 180-200 students,
- p = ~90-100 pairs w/ 90-100 preceptors
- C = 10,000 checklists/year
- Sound familiar? You know nothing, John Snow!

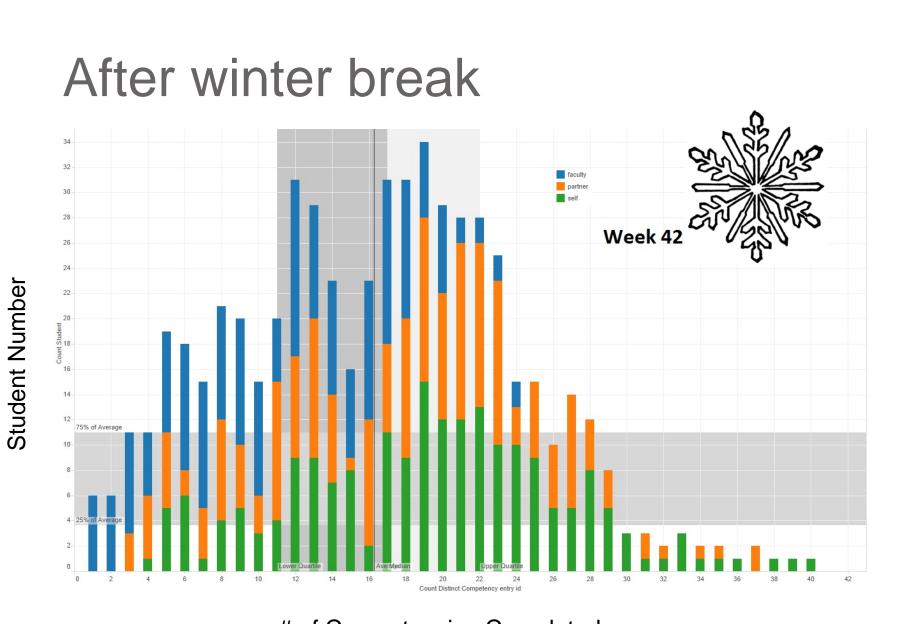
What does a "map" of the development of student competence look like?

MS1 x4 sessions (before summer break)



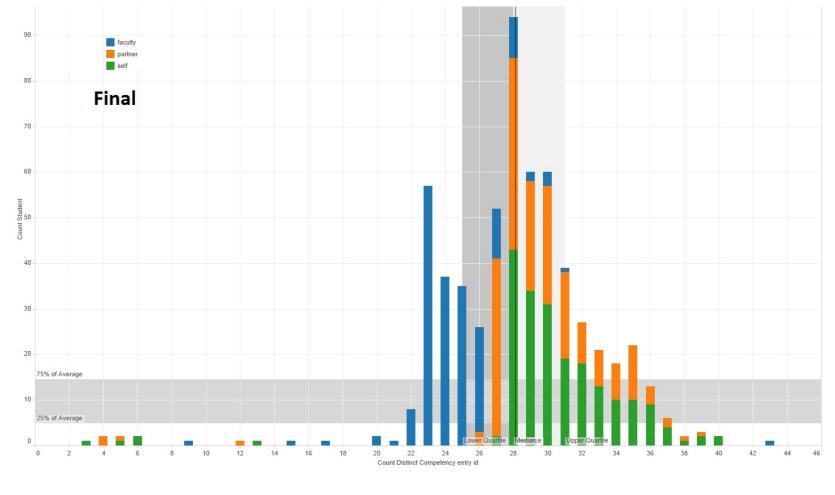
Before Thanksgiving



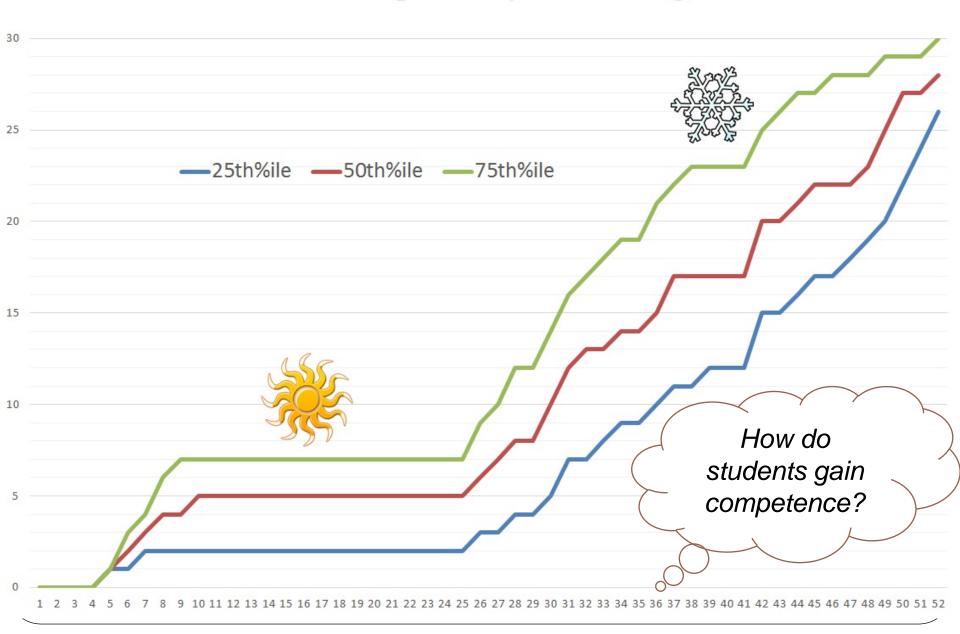


Pass = 28 competencies

Student Number



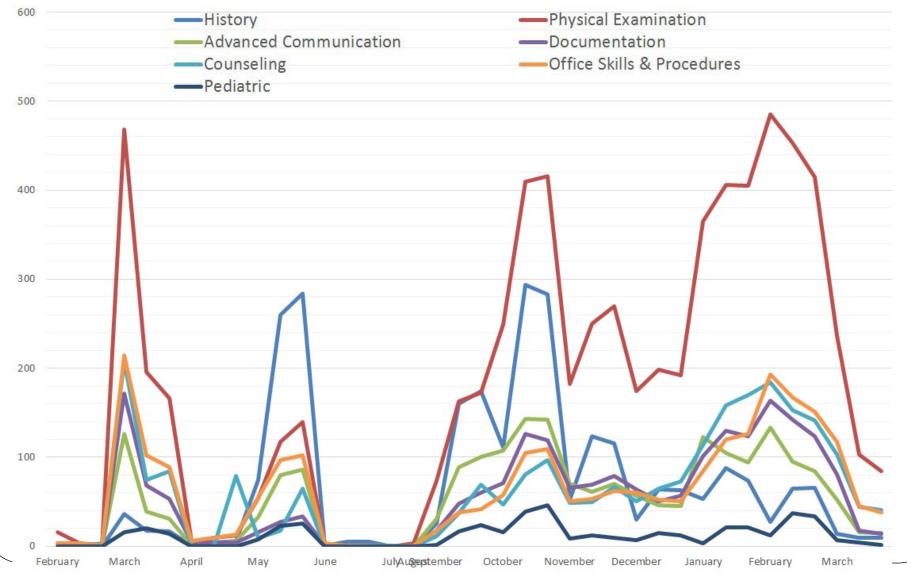
TOCA: Competency Learning Curve



Anticipated order of progression...

History \rightarrow PE \rightarrow Communication \rightarrow Documentation \rightarrow Counseling \rightarrow Office Skills/Procedures

CAP Competencies (2016)

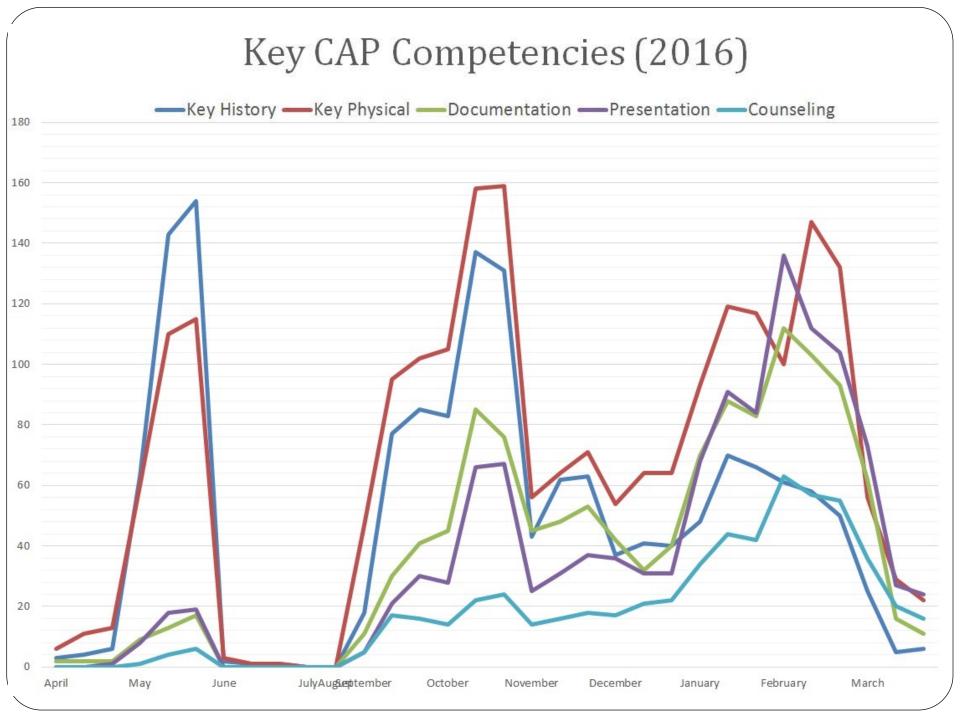


Most Utilized Competencies

- History
 - HPI
 - Social History
- Physical Examination
 - Vital Signs
 - Pulmonary exam
 - Abdominal exam
 - HEENT exam
 - CV exam
 - Neck exam
 - Eye & Fundoscopic exams
 - Extremity exam

- Advanced Communication
 - Establishing Rapport
- Documentation
 - Updating the Med list
 - SOAP Note
- Counseling
 - Information Mastery

When do students complete these competencies?





3) Next Steps

Analyze competency measures and identify areas for improvement and faculty development



Areas of Lowest Competence

(by incomplete TOCA count)

- History
 - Cultural History
- Physical Examination
 - Pelvic exam (FEMALE)
- Advanced Communication
 - Explaining lab results
 - Geriatric assessment
 - Communicating with a consultant
 - Explaining a new medication to the patient
 - Cross cultural communication
- Prenatal care
- Pediatric care
- Office Skills & Procedures
 - Office procedures (EKG/venipuncture/imms/POC tests)
 - Skin tag removal
 - Wart destruction
 - Peak flow

Reasons

- Cultural competency
- Patient population
 - Lacking Peds/OB/♀/geriatrics
- Team-based care for office procedures
 - not done by the preceptor
- ? Other ?

Action Plan

- Reflective writing on culture and medicine
- Field trips (swapping pediatric pairs with adult medicine pairs)
- Interprofessional education streamline student documentation of learning in a Community of Practice
- Student skills workshops
- Faculty development on TOCA & Big Data
- Dashboard/Radar



http://rba-africa.com/rba-spreads-with-south-african-communities-of-practice/

SOAPY note: Y=Your Action Plan

- What goals do you have?
- What is feasible?
- What is your next step?



http://rba-africa.com/rba-spreads-with-south-african-communities-of-practice/

References

- Belle A, Thiagarajan R, Soroushmehr SM, Navidi F, Beard DA, Najarian K. Big Data Analytics in Healthcare. Biomed Res Int. 2015;2015:370194. Review. PubMed PMID: 26229957;
- Ronald M. Harden (2007) Learning outcomes as a tool to assess progression, Medical Teacher, 29:7, 678-682
- Johnson, L., Adams Becker, S., Cummins, M., Estrada, V., Freeman, A., and Hall, C. (2016). NMC Horizon Report: 2016 Higher Education Edition. Austin, Texas: The New Media Consortium
- Laney, D. Meta Group. 2001. February. 3D Data Management: Controlling Data Volume, Velocity, and Variety. [url http://blogs.gartner.com/doug-laney/files/2012/01/ad949-3D-Data-Management-Controlling-Data-Volume-Velocity-and-Variety.pdf] accessed 2/2/17.
- Pusic MV, Kessler D, Szyld D, Kalet A, Pecaric M, Boutis K.Experience curves as an organizing framework for deliberate practice in emergency medicine learning. Acad Emerg Med. 2012 Dec;19(12):1476-80
- Pusic MV, Boutis K, Hatala R, Cook DA. Learning curves in health professions education. Acad Med. 2015 Aug;90(8):1034-42.
- Swing SR; International CBME Collaborators.. Perspectives on competency-based medical education from the learning sciences. Med Teach. 2010;32(8):663-8.
- U.S. Department of Education, Office of Educational Technology, Enhancing Teaching and Learning Through Educational Data Mining and Learning Analytics: An Issue Brief, Washington, D.C., 2012.

