

Improving REMS Service Plans Based on Time Series Predictive Modeling

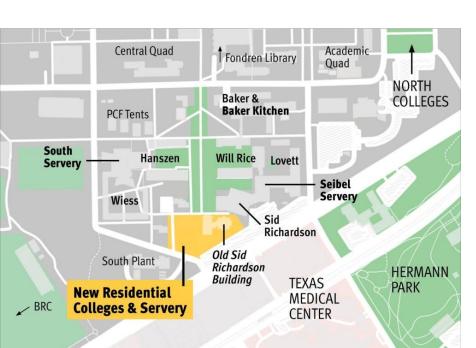
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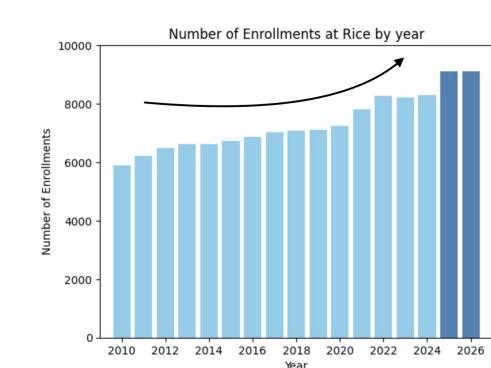


Introduction

Rice Emergency Medical Services (REMS) serves the Rice community and provides them with accessible medical care.

Due to an expected addition of around 700 students to the student body in the next 3-5 years, Rice plans to build two new residential colleges to accommodate demand.





REMS would like to predict the expected increase in demand for the next 3-5 years, since this would allow them to be more prepared for the future. With our help, REMS can foster a safer and healthier Rice campus.

Objectives

After discussion with REMS, our team determined there were three primary objectives that our project aimed to solve. Each objective was approached separately, with its own data and modeling sections.



Objective 1: Use past call data in order to predict call volume (number of calls) in the next 3 years.





Objective 3: Use financial information, including equipment and educational budgets, to predict future expenditures.

Data Description

The data was given to us by REMS in many different formats, sizes, and shapes. We **extracted the data** and separated relevant information, based on the different objectives.

	Time Range	Data Volume (# periods x # features)	Important Features
Obj 1 Call Volume	2006 - 2023	139 x 6	Call Volume, Special Events
Obj 2 Staff Growth	2016 - 2023	8 x 7	Volunteer, Paid Staff, Employees
Obj 2 Training Needs	2010-2023	14 × 3	Total Staff
Obj 2 OC Room Usage	2017 - 2023	84 x 5	N/A
Obj 3 Expenditures	2016 - 2022	9 x 7	Call Volume, Staff Count, Enrollment

Modeling

1. Time Series Models

ARIMA(p,d,q): catching trends and forecasting

p: influence of past values

d: difference in the data to make it stationary (mean, variance remain constants)

q: smoothing past errors



SARIMA(p,d,q)(P,D,Q)_m: (Seasonal ARIMA)

Seasonality: cycles that occur at regular intervals p,d,q: same as ARIMA

P,D,Q: seasonal p,d,q

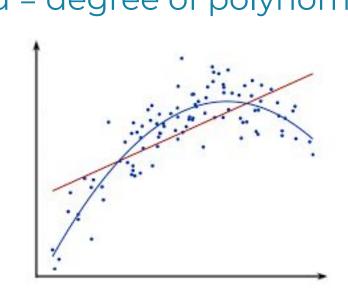
m: frequency; number of observations per cycle

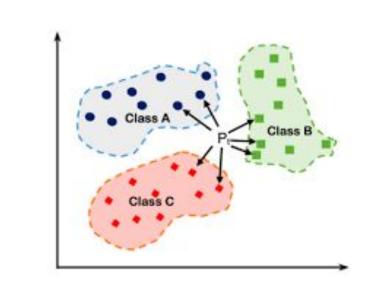
2. Regression Models

Due to the low data volume for select datasets, in particular for Objectives 2 & 3, we applied:

Polynomial Regression (d) d = degree of polynomial

K-Nearest-Neighbors (n) n = number of neighbors



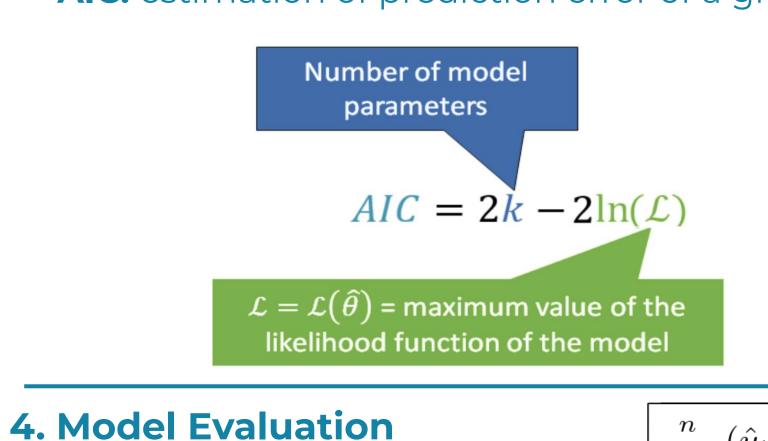


3. Parameter Tuning

ACF: correlation of a time series with itself at different lags

PACF: correlation of a times series with itself at different lags after removing the influence of correlated lagged values in between

*AIC: estimation of prediction error of a given model



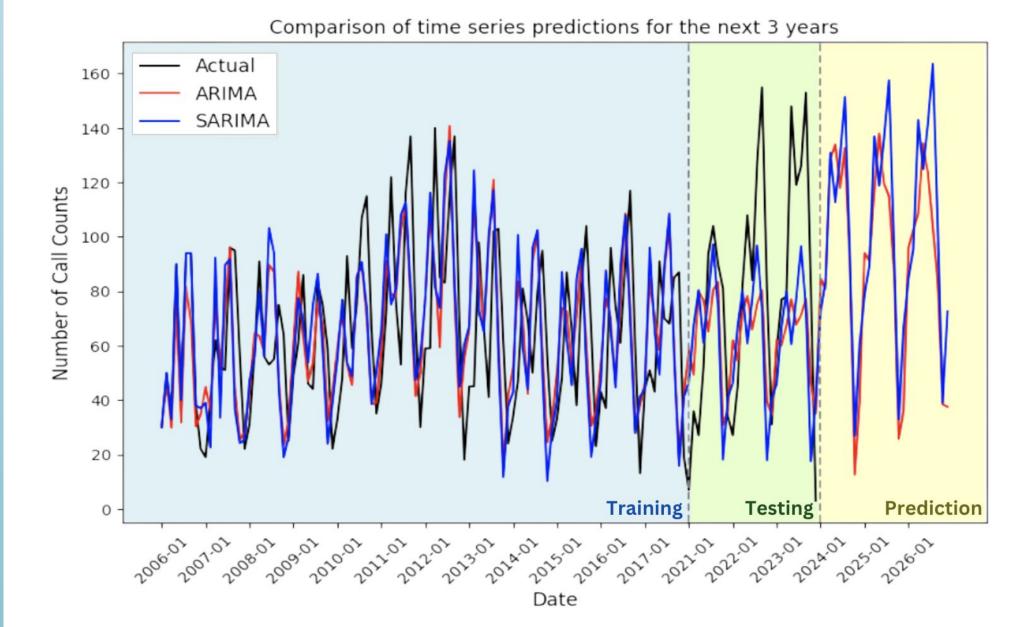




RMSE = 1

Result — Objective 1

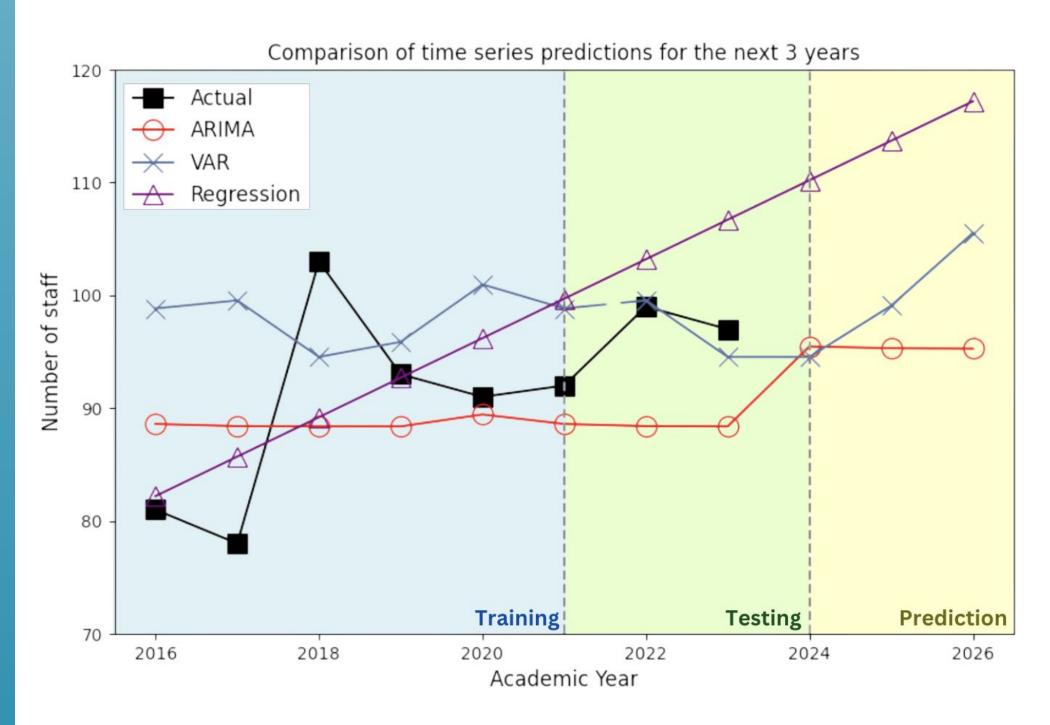
Time Series Models like ARIMA and SARIMA were trained and predictions for call volume were made for the next 3 years.



	ARIMA (10, 0, 1)	SARIMA (0, 1, 2) (0, 1, 1) ₉
Training RMSE	28.61	31.89
Testing RMSE	39.39	41.85

Result — Objective 2

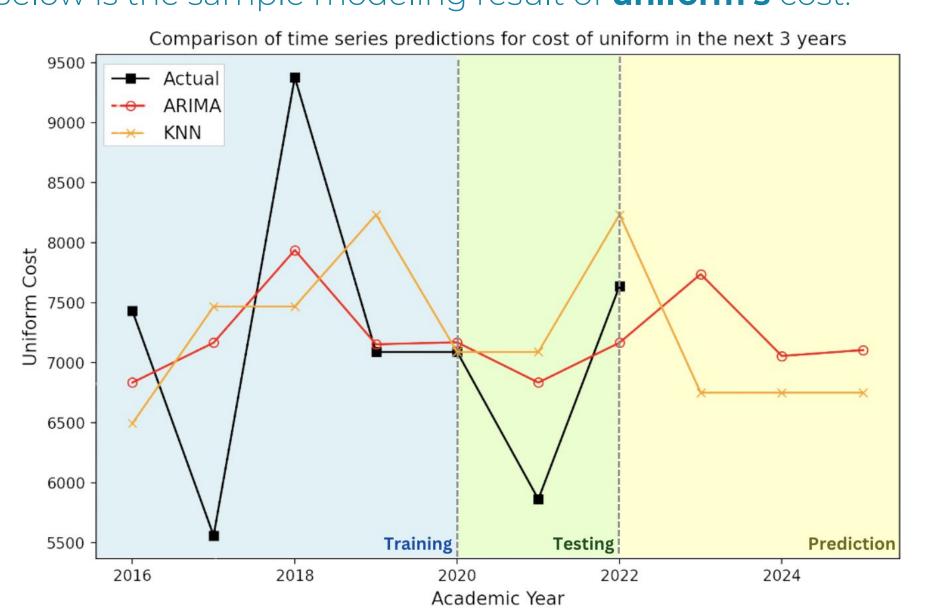
Comparing the results predicted by 3 models, we expect a steady increase in the total number of staff for the next 3 years that will lead to increased budgetary needs due to the cost of training, staff paychecks, and off-campus rooms..



	ARIMA (1, 1, 1)	VAR (2)	Polynomial Regression (d = 1)
Training RMSE	9.09	13.87	7.46
Testing RMSE	7.08	4.21	7.55

Result — Objective 3

Models analyzed and predicted five different kinds of expenditures, including uniform, insurance, IC (In Charge staff) housing, vehicle maintenance, and medical supplies. Below is the sample modeling result of **uniform's** cost:



	ARIMA (2, 0, 1)	KNN Regression (neighbor = 2)
Training RMSE	1002.45	1377.11
Testing RMSE	764.05	964.40

Conclusion

The project predicts an expected increase in demand for REMS services over the next 3 years, highlighting the need for enhanced resources to continue REMS' quality services and ensure a safer and healthier Rice campus that should be reflected in increasing budget estimates.

Objective 1

- **Higher call volume** for months with higher call counts like October and April when there are more special events
- Call volume for other months will stay relatively constant

Objective 2

- Rising need for training and resources based on 3 models
- Budget increase to accommodate additional training hours and staff paychecks

Objective 3

- Might not need to largely increase the budget for the five kinds of expenditures except medical supplies
- Due to the small dataset, the predictions for all kinds of expenditures will become more accurate as time goes on

Acknowledgements

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