

Trauma Informed Care (TIC) Data Analysis

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Abstract

In effort to address the issue of gun violence on the South Side of Chicago, a new curriculum in Trauma Informed Care (TIC) was developed and taught to healthcare works at the University of Chicago's medical centers.

The training consisted of a 1.5-hour session on (A) safety, (B) screening, (C) contextualizing behavior, (D) avoiding re-traumatization, and (E) discharge planning; participants self-reported their comfort, on a 10-point scale, with each of the five areas before and after training with a 78% completion rate for those that attended.

Here we investigated four questions: (1) whether there was a significant improvement in the overall (summed) score, (2) which of the five sub-categories saw the most and least improvement, (3) how a participant's role, department, and training levels affects the improvement, (4) and which groups of people were most likely to complete both surveys.

What is Trauma Informed Care (TIC)?

- Sensitively providing healthcare to those affected by violence and trauma
- Taught in a 1.5 hour workshop
- Participation was voluntary
- 5 topics:
 - a. Safety;
 - b. Screening;
 - c. Contextualizing behavior;
 - d. Avoiding re-traumatization;
 - e. Discharge planning.
- Dataset is self-reported scores (1-10) of how comfortable the participant is with each of the 5 topics (before and after workshop)

Dataset (n = 341, post-cleaning)

Variable Name	Variable Type	Example
ID	String	MI161102
Data Attended	Date	8/10/2017
Department	Factor (9)	Emergency Medicine
Role	Factor (9)	MD
Level	Factor (5)	Resident
Complete	Logical	TRUE
Pre(A/B/C/D/E)	Integer (1-10)	8
Post(A/B/C/D/E)	Integer (1-10)	10

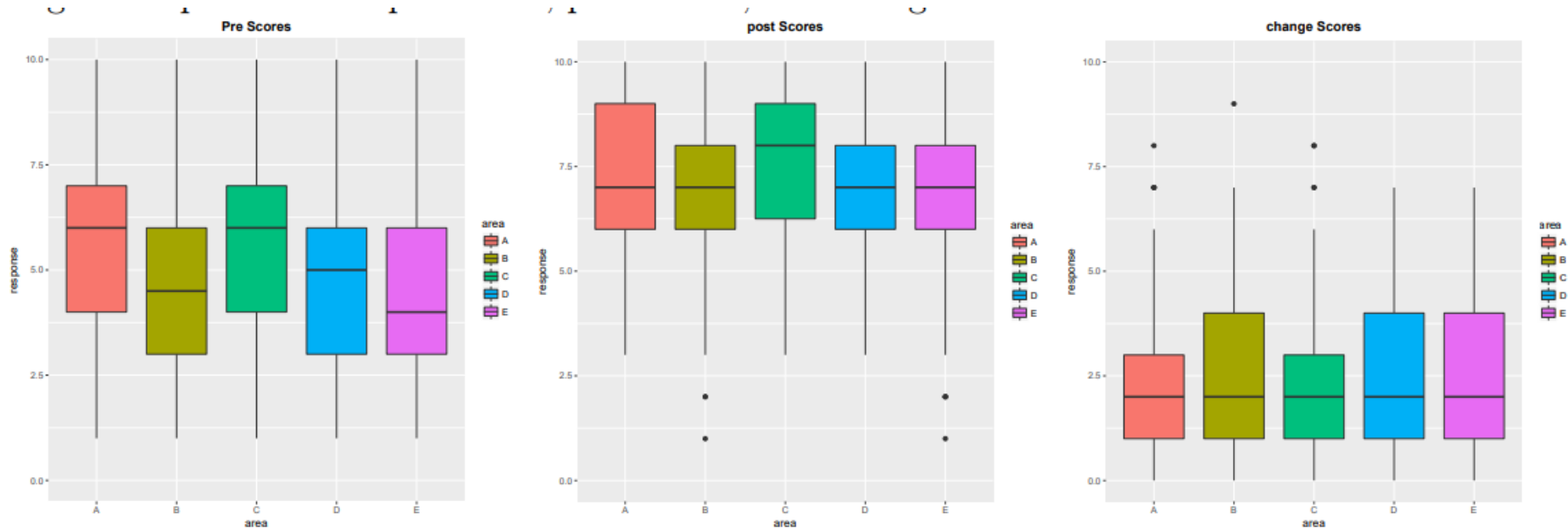
Main Questions

- Did the study improve how comfortable the participants are with each of the 5 topics?
- How does a person's role, department, etc affect their improvement?
- How does a person's role, department, etc affect if they completed the workshop?
 - E.g. Attendings are busy, maybe had to leave part-way through

Statistical Issues

- Participation in the seminars was voluntary
 - E.g. Participants who are unfamiliar with the material chose to attend
- Missing data (not missing at random)
- Subjective survey data might be difficult to compare across individuals
- Survey data might not be very reliable
- Heterogeneity in individuals extends far beyond what is available in the data
- Multiple testing
- Correlated response variables
- Bounded response variables
 - E.g. If you scored yourself a perfect 50 before the workshop, it's impossible to improve

Analysis of Individual Changes Overview



- The leftmost graph shows the spread of responses on the 5 question pre-training
- The middle shows the spread for post training
- The rightmost the spread of changes.

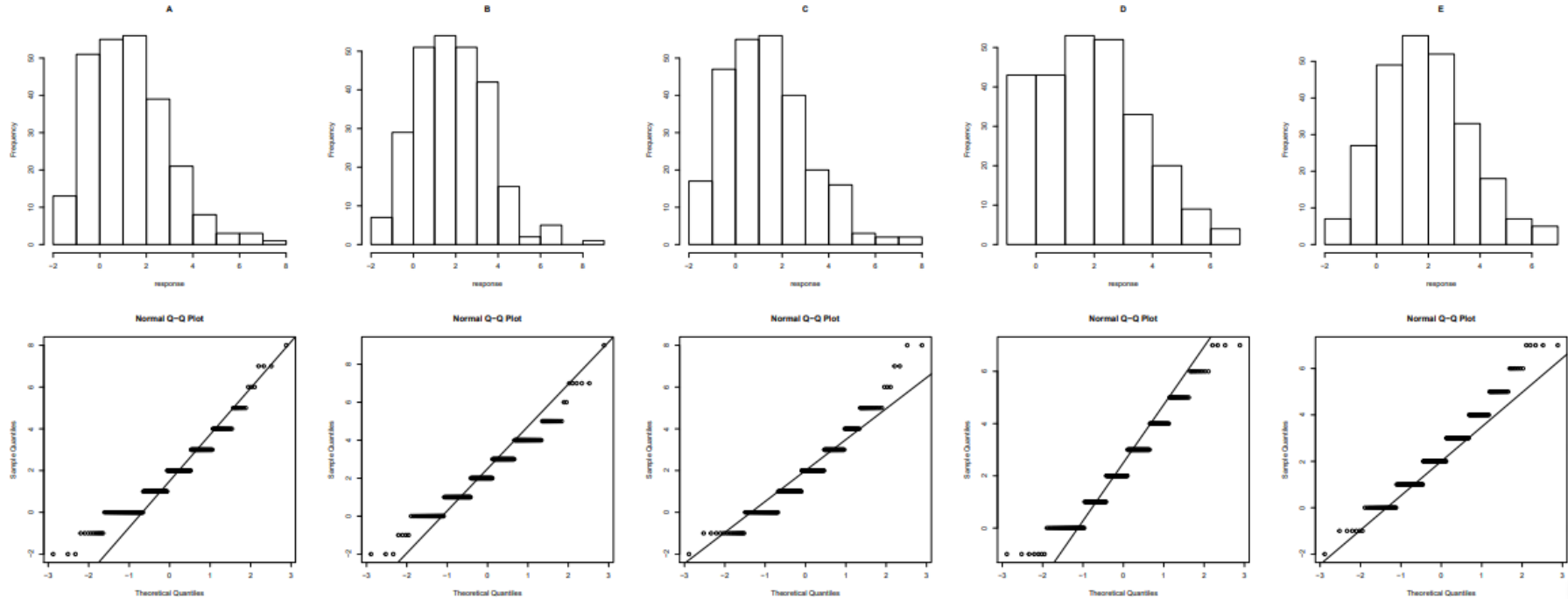
Analysis of Individual Changes

- The change boxplot can be condensed into the following statistics
- We can see that the changes are in general positive, but that the spread ranges from somewhat negative to almost a jump that covers the whole scale
- **We need to ensure that these changes are normally distributed**

	A	B	C	D	E
change_min	-2	-2	-2	-1	-2
change_q25	0	1	1	1	1
change_median	2	2	2	2	2
change_q75	3	4	3	4	3
change_max	8	9	8	7	7

	A	B	C	D	E
change_mean	1.76	2.34	1.85	2.38	2.39
change_sd	1.72	1.75	1.80	1.79	1.74

Normality of Individual Changes



- The histograms and quantile plots are for the changes of A,B,C,D, and E
- **We can see that the changes are in fact skewed to the right, something that we need to be aware of during out t-tests**

T Tests and CIs for Individual Changes

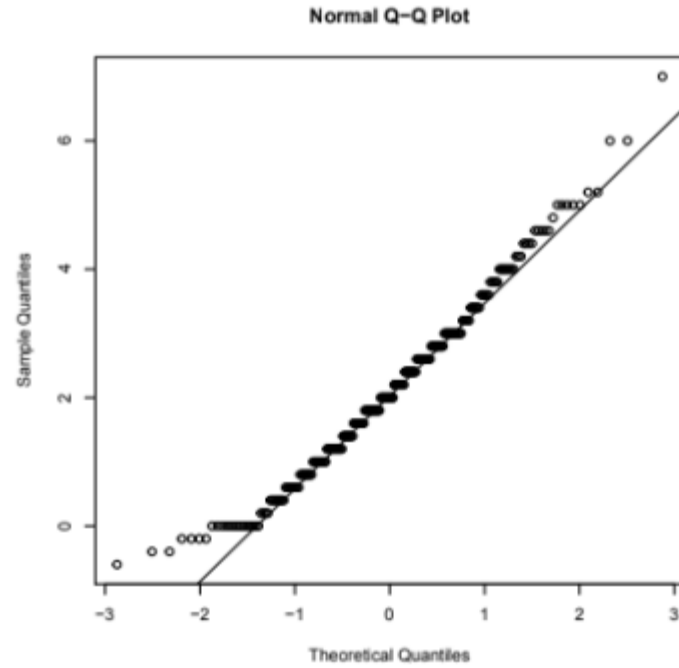
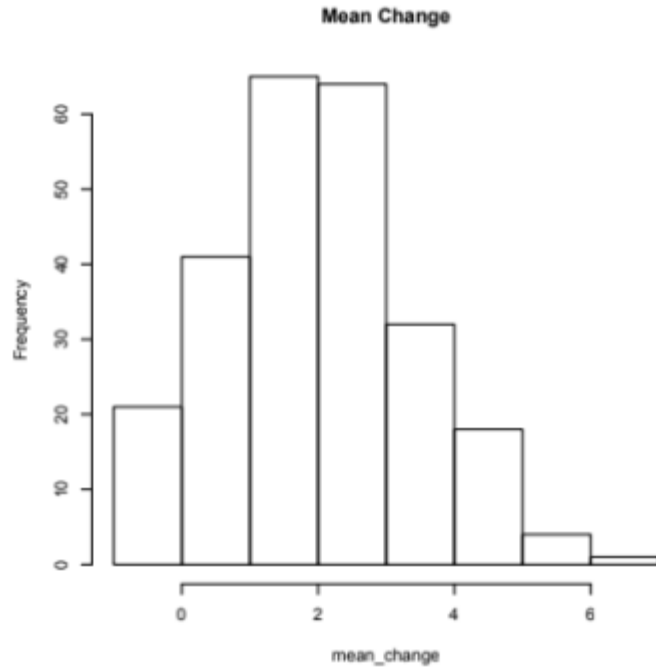
Here we show the 95% confidence intervals for the change in responses and the accompanying p-value for a paired (one-sample) t-test

All confidence intervals do not include 0, indicating that the changes are significant

This is further supported by the remarkably low p-values, **indicating that the variables are both significant and mitigating our concern over the non-normality aspects of the changes**

	lower	upper	p
A	1.54	1.97	1.3e-40
B	2.12	2.55	3.9e-59
C	1.63	2.07	3.0e-42
D	2.16	2.60	1.1e-58
E	2.18	2.61	1.6e-60

Analysis of Mean Change - normality checks



Analysis of mean changes - hypothesis tests

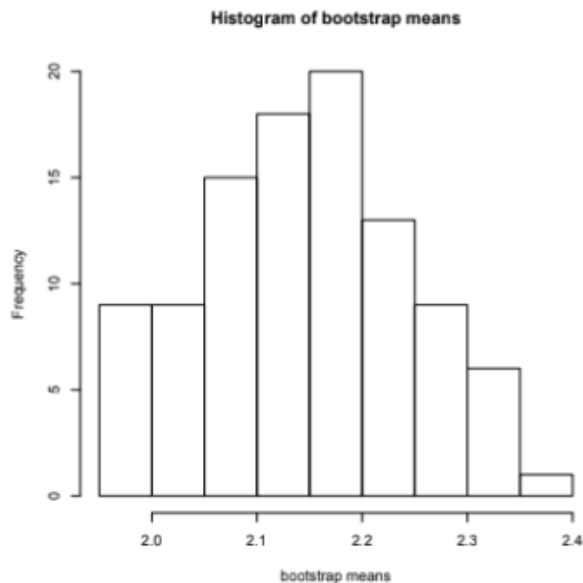
Parametric (T-test)

- CI: [1.96, 2.32]
- P-value: 5.5×10^{-65}

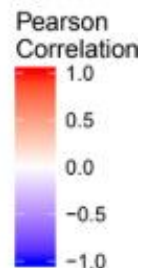
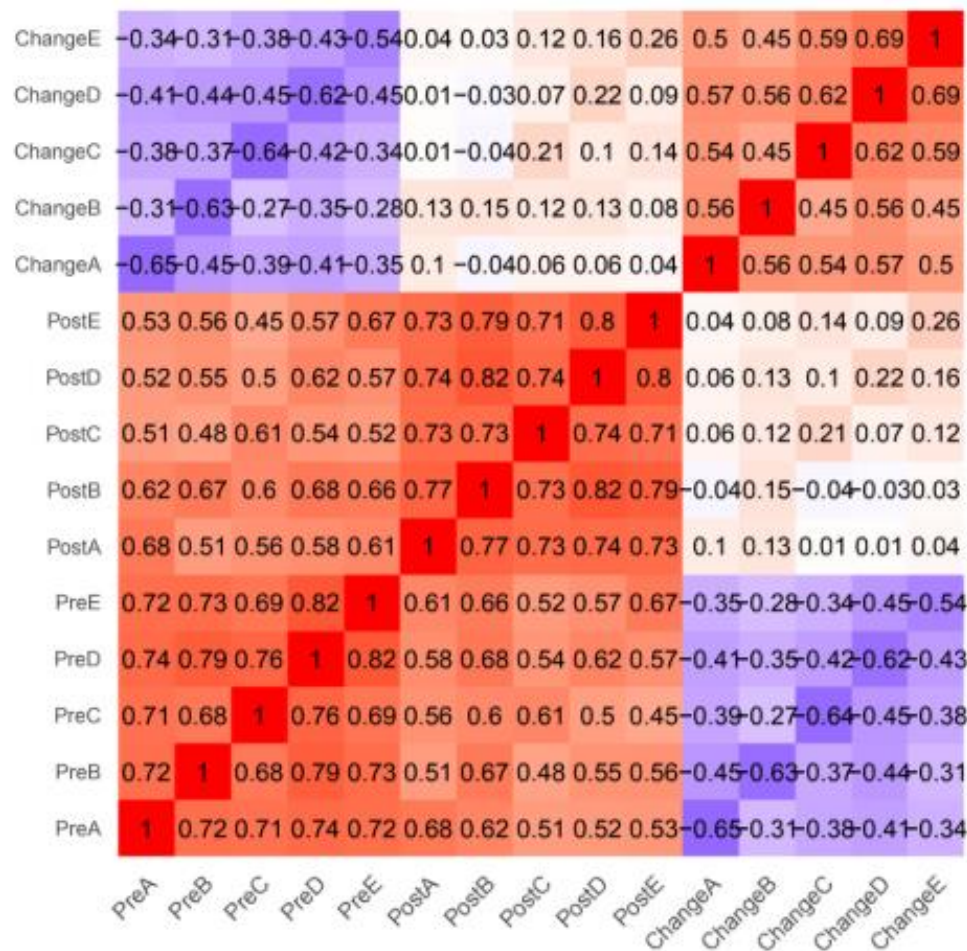
Nonparametric (bootstrap)

- CI: [1.98, 2.33]
- P-value: 0

Histogram of bootstrap char



Correlation Plot

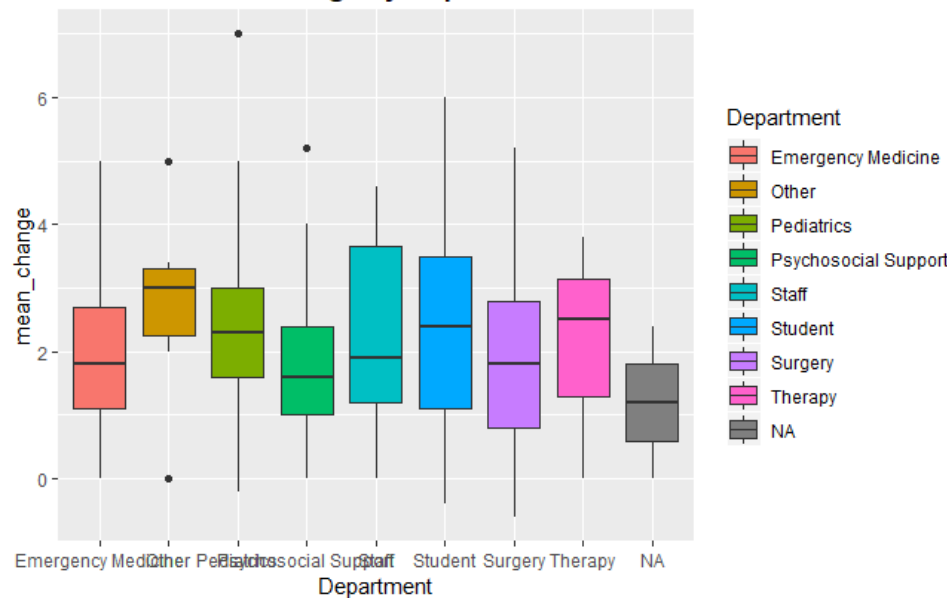


Correlation analysis

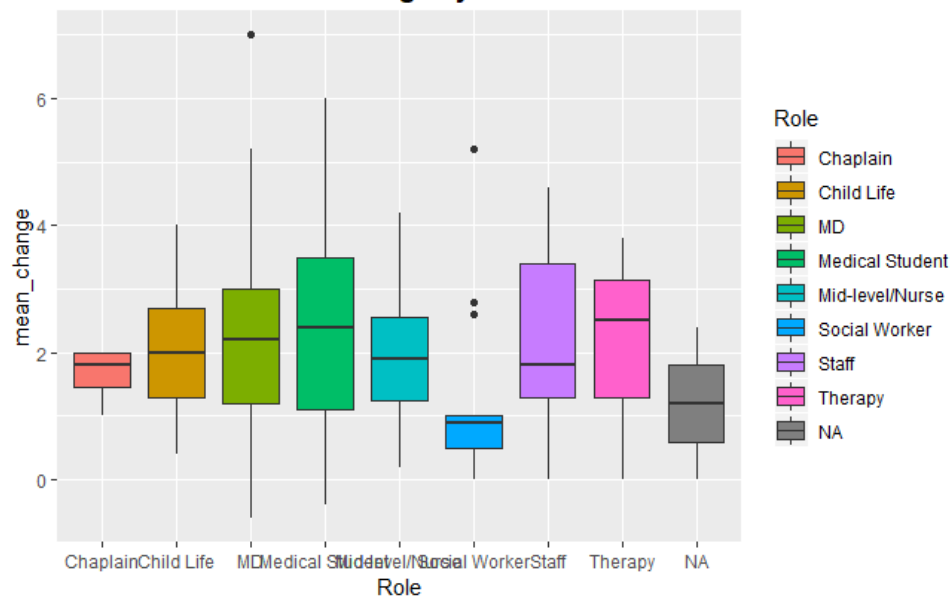
- High positive correlation within **pre** blocks
- High positive correlation within **post** blocks
- Moderate positive correlation within **change** block
- Positive correlations between **pre** and **post** scores (especially diagonal)
- **Pre** and **change** are moderately negatively correlated (especially diagonal)
- Little correlation between **post** and **change** (small positive on diagonal)

Analysis of Response by Department, Level & Role

Mean change by Department

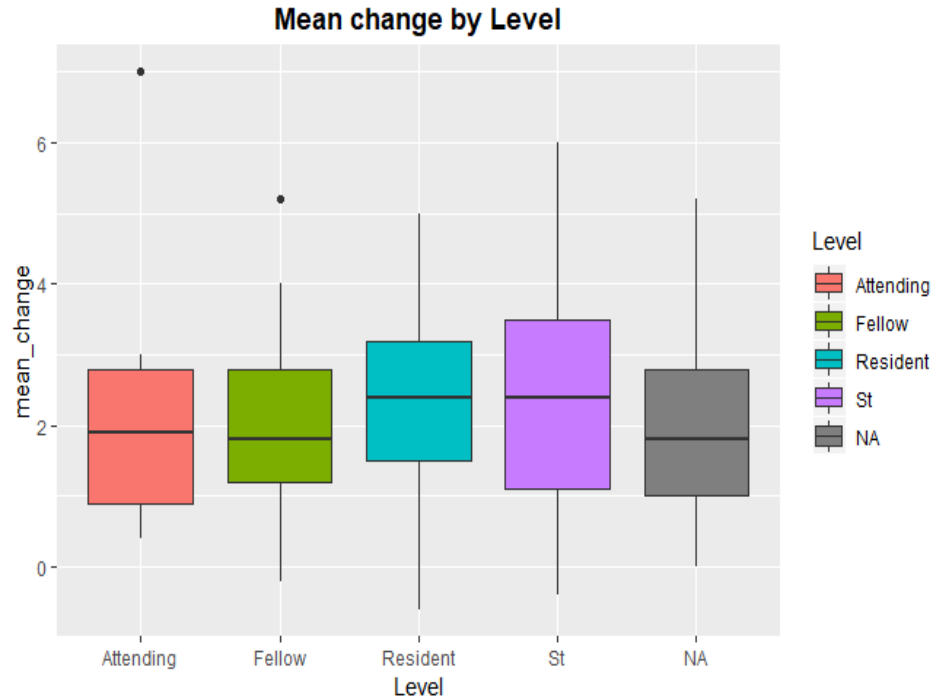


Mean change by Role



Box Plot of Mean Change separated by Department and Role

Analysis of Response by Department, Level & Role



*Only observations where
Roles = “MD” or “Student” have
Level*

Role= “Student” → Level = “St”

Box Plot of mean change separated by Level

One-Way ANOVA

- Are mean changes affected by any of the 3 factors?

Department, Level, Role

- Ran one-way linear regression model for mean change on either one of the factors, and performed ANOVA on them
- From the high p-values in each of the ANOVA tables, no evidence any of these factors (on their own) is significant predictor of change

Factor	Department	Role	Level
ANOVA P-Value	0.2113	0.3443	0.644

Analysis of Variance Tables (One-Way)

ANOVA Table for Department

	Df	Sum Sq	Mean Sq	F value	Pr(>F)
tic\$Department	7	19.44	2.7767	1.3873	0.2113
Residuals	236	472.35	2.0015		

ANOVA Table for Role

	Df	Sum Sq	Mean Sq	F value	Pr(>F)
tic\$Role	7	15.96	2.2802	1.1309	0.3443
Residuals	236	475.83	2.0162		

ANOVA Table for Level

	Df	Sum Sq	Mean Sq	F value	Pr(>F)
tic\$Level	3	3.81	1.2696	0.5572	0.644
Residuals	155	353.15	2.2784		

Two-Way ANOVA

- Are mean changes affected by 2-way interactions of the factors?
- Ran two-way linear regression model for mean change on pairs of the factors, and performed ANOVA on them
- From the high p-values in each of the ANOVA tables, no evidence any pair of these factors is significant predictor of change

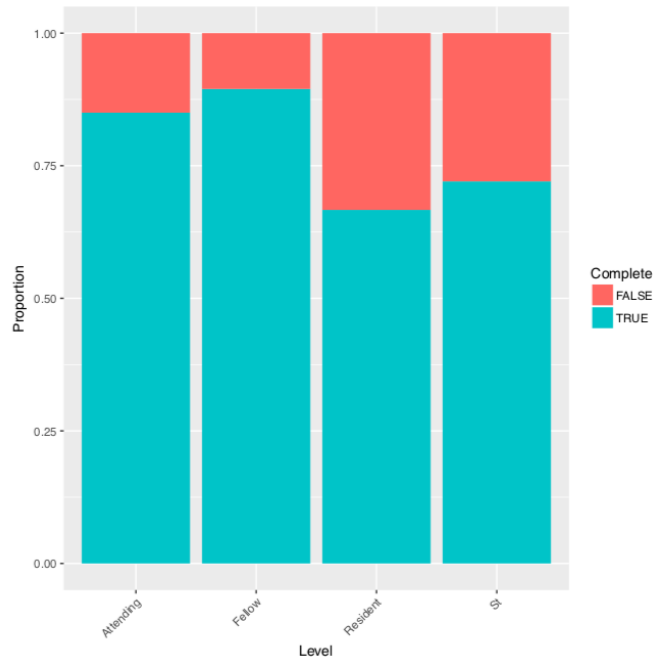
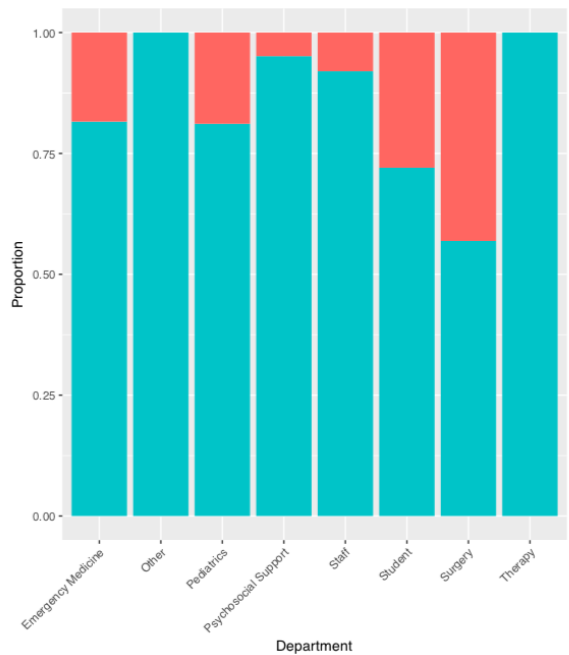
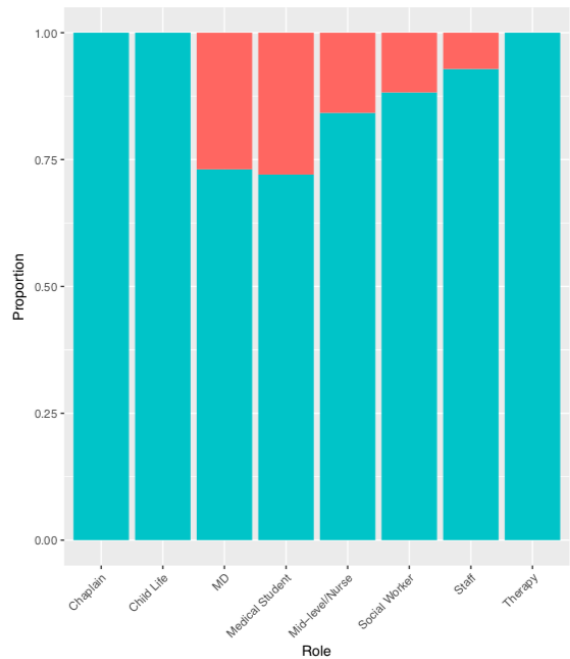
Department:Role

```
Response: mean_change
Df Sum Sq Mean Sq F value Pr(>F)
tic$Department      7  19.44  2.77674    1.3784 0.2153
tic$Role             4   7.82  1.95576    0.9708 0.4242
tic$Department:tic$Role 2   1.20  0.59861    0.2972 0.7432
Residuals          230 463.33  2.01449
```

Department:Level

```
Response: mean_change
Df Sum Sq Mean Sq F value Pr(>F)
tic$Department      4  15.819  3.9548    1.8364 0.12493
tic$Level            2   2.786  1.3930    0.6469 0.52518
tic$Department:tic$Level 6  23.937  3.9894    1.8525 0.09289
Residuals          146 314.417  2.1535
```

Analysis of completion rates



Chi-Squared Tests

- Are certain characteristics associated with completeness?
 - Department
 - Role
 - Level
 - MD Students vs. all others
 - Doctors vs. all others
 - Doctors and MD students vs. all others
 - Doctor, MD student, and nurses vs. all others
 - Surgeon, Pediatrics, Emergency Medicine, and students vs. all other departments
 - Surgery vs. all others

Chi-Squared Tests

- Are certain characteristics associated with completeness?
 - Department: $p\text{-value} = 3.9 * 10^{-5}$
 - Role: $p\text{-value} = 0.009$
 - Level
 - MD Students vs. all others
 - Doctors vs. all others: $p\text{-value} = 0.053$
 - Doctors and MD students vs. all others: $p\text{-value} = 8.4 * 10^{-5}$
 - Doctor, MD student, and nurses vs. all others: $p\text{-value} = 0.0001$
 - Surgery, Pediatrics, Emergency Medicine, and students vs. all other departments
 - Surgery vs. all others: $p\text{-value} = 4.8 * 10^{-5}$
- Bonferroni correction for multiple testing: $p\text{-value}/\#$ of tests
 - 11 tests → almost all stay significant
 - New threshold approx $p=0.005$

Summary

- 1) The changes in each content area were found to be positive at a 0.05 significance level using one-sample t-tests backed up by a nonparametric bootstrap
- 2) The overall change was not found to be impacted by department, level, or role in one and two-way ANOVA regression
- 3) The completion rate was found to be affected by Department, being a doctor/student/nurse, and being in surgery by using chi-squared tests on two-way tables, and correcting for multiple comparisons