e-Learning analysis, assessment, and ID review

OPWL 551
Summer, 2022
Alexis Bolick
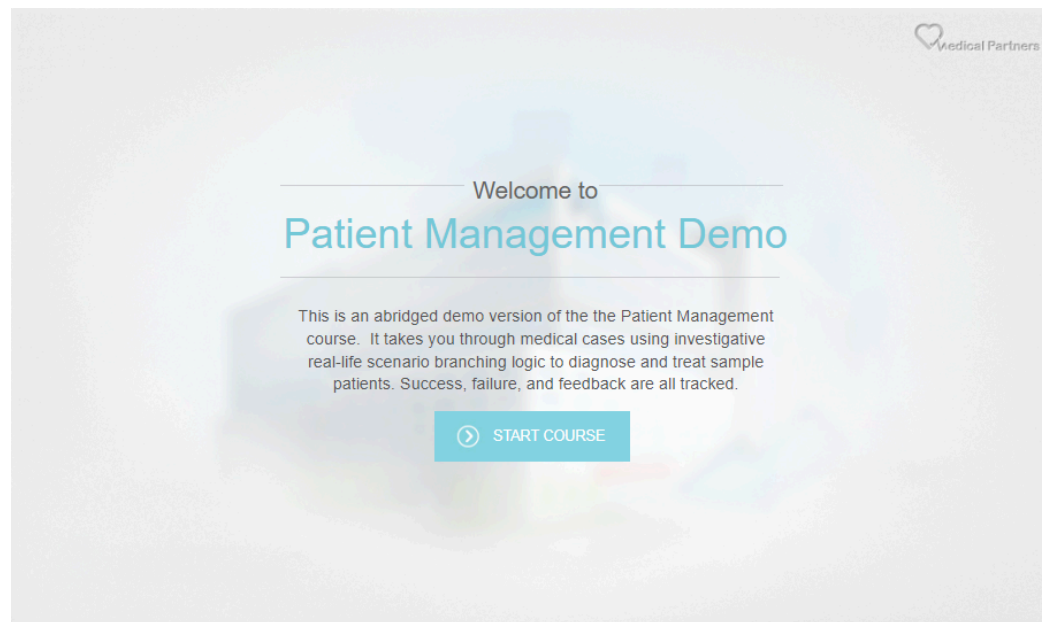
Title of scenario-based e-learning

Patient Management

Hyperlinked URL of scenario-based e-learning

Patient Management

Screenshot of splash or landing page

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Description of how you found the scenario-based e-learning object

After several Google searches of "e-learning scenario performance examples," I came across a list of interactive examples that placed you in various scenarios. I then chose the model that best displayed an on-the-job scenario performance check. While the example provided is only a demo, I could still complete 2/3rds of it, which I believe gave me an appropriate grasp of the scenario as a whole due to its repetitive nature.

Analysis

What workplace performance does this scenario-based e-learning support?

(mark all that apply, infer if necessary, from Clark 2013, ch 1)
_x_ Accelerate expertise
_x_ Build critical thinking skills
_x_ Build skills impossible/impractical to gain on the job performance
_x_ Promote learning transfer
__ Gain a return-on-investment
__ Motivate learning
__ Exploit technological resources effectively
_x_ Engage a target audience that already has basic job familiarity

What are the instructional goals?

(from Clark 2013, ch 1)

The goal is to take the learner through various real-life scenarios to understand further if they can use branching logic to diagnose and treat patients while testing time, budget, and patient management skills.

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Who are the learners?

(mark all that apply, infer if necessary, from Clark 2013, ch 4)
__ Novice
__ Some experience
_x_ Apprentice
_x_ Experienced
__ Mixed
__ Other:

What are the scenario-learning domain(s)?

(mark all that apply from Clark 2013, ch 2)
__ Interpersonal skills
_x_ Compliance
_x_ Diagnosis and repair
_x_ Research, analysis, and rationale
__ Tradeoffs
__ Operations
__ Design
__ Team coordination
__ Other

What are the terminal learning objectives?

(from Clark 2013, ch 4 & 7)

Once the course has finished, learners should be able to understand if they can properly analyze, diagnose, and recommend proper treatment for a variety of new patients they have only basic information on.

What are the enabling learning objectives?

(from Clark 2013, ch 4 & 7)

Throughout the course learners need to understand what questions are appropriate to ask to ensure they are using hospital resources, as well as patient time, appropriately.

Complexity of responses

(mark all that apply from Clark 2013, ch 4)
__ One outcome
_x_ Multiple outcomes
_x_ High solution precision
__ Low solution precision
_x_ Limited interface response options
__ Multiple interface response options
__ High social presence
__ Medium social presence
_x_ Low social presence

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Interface response options

(mark all that apply from Clark 2013, ch 4)
__ Yes or no
__ Multiple choice
_x_ Checklist
__ Links
__ Pull-down menu
__ Drag and drop
_x_ Object select
__ Slide bar
__ Type in
_x_ Virtual world
__ Classroom
__ Social media:
__ Search engines:
__ Other:

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Scenario settings

(mark all that apply from Clark 2013, ch 5)
__ Office, meeting room
__ Computer
__ Technical shop, laboratory
_x_ Clinic, hospital, surgical suite
__ Equipment and instrument panels
__ Factory
__ Field site, such as oil well, combat zone:
__ Other:

Trigger event

(mark all that apply from Clark 2013, ch 5)
__ Phone call:
__ E-mail, text message:
_x_ Interview: The learner's third and final interview for a physician's assistant position is on-site at the hospital where the learner meets with multiple patients to further evaluate/diagnose/recommend an appropriate treatment
__ Failure or crisis:
__ Murphy's Law scenario:
__ Other:

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Does your scenario outcome require identification and analysis of data?

(mark all that apply from Clark 2013, ch 5)
_x_ No
__ Yes

If yes, mark all that apply:

Navigation to data sources
__ Graphic representations
__ Tabs
__ Other:

Save accumulated data for later reference
__ Clipboard
__ Electronic files
__ Notepad
__ Spreadsheet
__ Worksheet
__ Other:

Representation of data
__ Documents:
__ Charts, graphs:
__ Interviews:
__ Objects:
__ Other:

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Types of guidance provided

(mark all that apply from Clark 2013, ch 6)
__ Faded support:
__ Simple to complex scenarios:
__ Open vs. closed response options:
_x_ Interface navigation options: The learner goes through the analysis/ diagnoses in phases rather than all at once
__ Training wheels:
__ Coaching and advisors:
__ Worksheets:
__ Feedback:
__ Collaboration:

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Instructional approaches

(mark all that apply from Clark 2013, ch 7)
__ Tutorials:
__ Expert solution demonstrations:
__ Questions in demonstrations to promote engagement:
__ Cognitive modeling examples to illustrate tacit knowledge:
__ Example repositories linked to organizational knowledge base:
__ Traditional instructor:
__ Socratic instructor:
__ Scenario facilitator:
__ Other: N/A there were no instructional approaches in the module, the learner was essentially on their own during the entire course until they received the feedback at the end stating whether they had made the correct choice or not

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Feedback features

(mark all that apply from Clark 2013, ch 8)
_x_ Specific: When an incorrect answer was chosen the learner receives specific medical rationale as to why
__ General:
_x_ Instructional: The learner is given information about the accuracy of their solution (ex. Correct diagnosis but incorrect treatment)
__ Intrinsic:
__ Immediate:
_x_ Delayed: Feedback is only provided after the module has been completed, rather than after each choice
_x_ Solution: The learner is provided with rationale behind what the correct solution is
_x_ Process: The learner is taken through the diagnosis process to assist them in learning what caused the correct diagnosis
__ Learning:
__ Reflection:
__ Checklist:
__ Rubric:

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Assessment rubric

Now that you have your analysis complete, we'll move onto the assessment with a rubric. In this phase, you will use the rubric to determine if the scenario-based e-learning object incorporates good design decisions. Enter a number (i.e., 3, 2, or 1) in the right column for each criteria and level of performance you observe.

The rubric is based on Clark, R. C. (2013). *Scenario-based e-learning: Evidence-based guidelines for online workforce learning*. San Francisco, CA: John Wiley & Sons.

Criteria	Exemplary	Minor concerns	Serious concerns	Score
	3 points	2 points	1 point	Enter:
1. Use of scenario-based e-learning *If directive, assess appropriate use of directive e-learning.*	Scenario-based e-learning content is for learners with some prior experience and supports one or more of the following: rare occurrence tasks, critical thinking skills training, strategic tasks, compliance-mandates, to compress time, or manage risk *Or, directive e-learning is for learners with no prior experience, common tasks, or rigid procedures.*	e-Learning content may support learners with no prior experience but does support at least one of the following: rare occurrence tasks, critical thinking skills training, strategic tasks, compliance-mandates, compresses time, manages risk. *Or, directive e-learning is for learners with some prior experience, common tasks, or rigid procedures.*	It is unclear why a scenario-based e-learning design was chosen. *Or, it is unclear why a directive e-learning design was chosen.*	3

2. Complexity of responses	The complexity of responses are appropriate for the learning goal, learners expertise, and motivation levels	The complexity of responses are on target for the learning goal but not for the learners expertise and motivation levels	The complexity of responses are not appropriate for the learning goal, learners expertise, or motivation levels	3
3. Interface response options	The interface response options are appropriate for the learners' expertise level and learning objectives	The interface response options are a bit of a stretch for the learners' expertise level and learning objectives	The interface response options are inappropriate for the learners' expertise level and learning objectives	3
4. Scenario settings *If not scenario-based, assess images in place of scenario-settings.*	The scenario setting(s) is/are appropriate for the scenario-learning domains, learners, and learning goals. *Or, images are appropriate for the learning domains, learners, and learning goals.*	The scenario setting(s) is/are a bit of a stretch for the scenario-learning domains, learners, and learning goals. *Or, images are a bit of a stretch for the learning domains, learners, and learning goals..*	The scenario setting(s) are inappropriate for the scenario-learning domains, learners, and learning goals. *Or, images are inappropriate for the learning domains, learners, and learning goals..*	3
5. Trigger event	The trigger event is appropriate for the scenario-learning domains and goals	The trigger event is a bit of a stretch for the scenario-learning domains and goals	The trigger event is missing or inappropriate	3
6. Types of guidance	The types of guidance are varied and appropriate for the learners' expertise levels, scenario-learning domains, and goals	The guidance is appropriate for the learners' expertise levels, scenario-learning domains, and goals	The guidance is not the best match for the learners' expertise levels, scenario-learning domains, and goals	2

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7. Instructional approaches	The instructional approaches are appropriate and varied for learners' expertise levels, motivation, prior knowledge, scenario settings, domains, learning goals, objectives	The instructional approaches are appropriate for learners' expertise levels, motivation, prior knowledge, scenario settings, domains, learning goals, objectives	The instructional approaches are not the best for learners' expertise levels, motivation, prior knowledge, scenario settings, domains, learning goals, objectives	1
8. Critical thinking	Actions taken, decisions made, cues used, rationale, rules of thumb, and monitoring, are used throughout the e-learning to support learners' critical thinking.	Multiple different content-sensitive learner actions, decisions, or rationale, are required throughout the e-learning.	Content-sensitive learner actions or decisions are only required in one or two spots in the e-learning.	3
9. Feedback	All feedback (i.e., Intrinsic, instructional, delayed, immediate, specific, general, solution, process, learning, reflection, checklists, rubrics) designs are all appropriately provided for learner actions and feedback is integrated throughout the scenario.	A variety of feedback types are provided and appropriate for learner actions.	Feedback is limited or not appropriate.	2
10. Interface	Navigation is intuitive	Navigation instructions are clearly explained	Navigation is difficult	3
11. Interactions	All function properly.	-------	Do not all function properly.	3

12. Chucks	Content is chunked into small enough pieces that you can easily follow but doesn't interrupt the flow.	Chunks are large but you can easily navigate to where you left off.	Chunks are large and there is no way to get back to where you left off or so small the flow suffers.	3
13. Progression	Is logical and elegant throughout the object	Is logical throughout the object	Seems disjointed or does not build on previous screens	3
14. Engagement	Multiple motivational engagement elements are used (e.g., stories, images, examples, narration)	Only one or two cases or story is/are used but it/they include(s) multiple relevant images.	Stories or cases are not used, only brief examples. Images may or may not be relevant.	2
15. Images or video	Good quality (e.g., focus, lighting, background)	Mediocre quality; you can generally tell what they are but one or more is/are difficult to see or interpret	Poor quality; at least one image or video is too small or very blurry.	3
16. Audio *If none, score 3.*	Good quality (e.g., volume, tone, pace, inflection, no distractions)	Mediocre quality; you can make adjustments that allow you to access the information	Poor quality; you can't hear some or all of the audio	3
17. Length	Module(s) is/are 6 - 15 minutes	Module(s) is/are 15:01 - 20 minutes	Module(s) is/are longer than 20 minutes	3
18. Accessibility minimums	Screen descriptions, closed captions, image alt tags, are provided and logical.	Closed captions, image alt tags, are provided.	No clear evidence of accessibility considerations in e-learning object	3

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	Total point score	50
	Qualitative score *(see qualitative scoring guide below)*	Better, or best

Qualitative scoring guide

Better, or best = 47 - 54 points

This module is an e-learning exemplar demonstrating significant evidence of effective instructional design.

Good, accomplished = 38 - 46 points

This module meets the basic criteria for e-learning instructional design.

Needs work = less than 38 points

I bet you could offer some suggestions to help improve the instructional design significantly for this e-learning.

ID Review

Now that you have assessed the e-learning object with the rubric, it's time to provide an ID Review.

As you've read, it is important to always point out what was done well first when you provide compassionate critique. This act demonstrates **kindness and your credibility** as a **professional**. It is also a much more **efficient** way to **influence others' behavioral changes**.

Therefore, be sure to **frame** your constructive **feedback in the positive** (e.g., "I'd like to see you do more of x because research has shown that it helps learners do z). **Avoid** framing your feedback in **the negative** (e.g., "You did a lot of y and it decreases readability, which inhibits learners from efficiently learning to do z). Guess what? This works for all situations where feedback is requested from you. **:-)**

For each criteria that you did **not** mark as exemplary, explain in your comments:

- what was done well,
- what (x) could be improved (*choose one or two most pressing characteristics),
- why you think (x) could be improved (grounded in evidence-based practice from the readings or other reputable sources), and
- a description of the changes that could be made to improve (x).

* I ask you to choose one or two most pressing characteristics because you will likely choose to limit feedback to those characteristics that would add the most value for learners if you perform an ID review for a colleague in the workplace.

Criteria	Your comments
6. Types of guidance	**Done well:** As the learner goes through the analysis/ diagnoses in phases rather than all at once, they can concentrate on each step more, rather than becoming overwhelmed, which simulates how a real-world experience would occur. **Improvements to consider:** There is very little guidance provided. Adding in a collaborative exercise could be beneficial.

	Why you think these improvements are needed: Adding a collaborative aspect to the exercise would provide a dual purpose: to test the learners' interpersonal skills while providing assistance. **Guidance on how to make the improvements:** There could be an icon at the bottom of each page with a human silhouette indicating they could ask another professional within the hospital their second opinion on the task at hand.
7. Instructional approaches	**Done well:** While no instructional approaches were provided, each section of the module was quick to get through, so the learner is provided feedback quickly. **Improvements to consider:** Providing instructional resources within the module could be beneficial. **Why you think these improvements are needed:** This addition could help mimic a real-life scenario as medical practitioners often have access to resources. This could further test the learners' ability of resource utilization in a time crunch. **Guidance on how to make the improvements:** A quick reference resource could be embedded within each module page. Within the module, there are a few incorrect diagnosis pathways, so to further test the learner, resources on the incorrect pathways could be mixed in with resources on the correct paths.
9. Feedback	**Done well:** Thorough and specific feedback is presented immediately after each patient, rather than at the end of the module. **Improvements to consider:** Feedback could be provided after each step within the module, ex. After "patient history," "initial evaluation", etc. Due to feedback only being provided after the exercise has been completed, the learner is unsure if they are on the correct path to diagnosis until after treatment has been administered, which could have potentially lethal implications in real life. **Why you think these improvements are needed:** If the learner is provided with acute feedback, they would have the opportunity to reevaluate their decisions using critical thinking skills to ensure a better

	outcome for the patient. This would also help ensure fewer hospital resources would be used, which is one of the key learning components of the module. **Guidance on how to make the improvements:** Feedback should be added after each small decision is made throughout the module.