OASIS Quick Start Guide:
FOR FACULTY

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Welcome to the manual for the OASIS Evaluation System!

OASIS is a web based evaluation system used across the School of Medicine. All types of regular course and program evaluation are available within Oasis, including evaluations of:

- Faculty
- Fellows/Residents
- Rotations
- Programs

In this manual, you will find an introductory quick start guide for the following user group:

- Evaluators

Following the quick start guide, you will find the most up-to-date samples of the standard Faculty and Course evaluation forms, as well as a glossary of frequently used OASIS terms.

We hope this manual will be a resource to you as you implement your regular programmatic evaluation. If at any time you need assistance, please contact the Office of Evaluation and Assessment (OEA) at 215-573-9701.

**LEGEND**

- = Contact Coordinator
- = handled by OEA
- = Contact OEA
OASIS ACCOUNT

Your program coordinator is responsible for obtaining an OASIS account on your behalf by contacting the OEA.

If you have questions about your Pennkey or cannot recall your Pennkey password go to http://www.uphs.upenn.edu/pennkey/reset/index.html. You cannot re-set your Pennkey password within Oasis.

If you have trouble logging into Oasis GME, or have any questions about using the system please contact Traci Dougherty  tracido@mail.med.upenn.edu

EVALUATION TYPES

In Oasis, “Evaluation of Faculty” is defined as Evaluation of Faculty by resident or fellow.
In Oasis, “Evaluation of Student Performance” is defined as Evaluation of Resident or Fellow by faculty, instructor, or other members of the health care team.
In Oasis “Evaluation of Course” is defined as Evaluation of Rotation/Program/360° by Resident/Fellow.

GME OFFICE INITIATIVES

Faculty Evaluation of Program:
ACGME requires that faculty evaluate the training program(s) in which they participate.
Any faculty member that is an active participant in a program will receive this evaluation. An active participant is defined as an individual having supervisory responsibility for residents/fellows with respect to patient care and/or research. The Faculty Evaluation of Program is evaluated annually in May and will appear in your OASIS inbox. These evaluations will open in the beginning of May and remain open until the end of the academic year, June 30th. The program director and the chair will receive the confidential aggregated results.

If you are not receiving these evaluations, please check with your Program Coordinator. If you have a question about this evaluation, please contact the GME Office, 215-662-3957.

EVALUATION ASSIGNMENT

Your program coordinator is responsible for obtaining an OASIS account and assigning evaluations for you. When viewing your list of evaluations, check to make sure that all assignments are correct.

ACCESSING EVALUATIONS

Oasis is a web-based system located at http://gme-evals.med.upenn.edu/index.html. To enter, click on Pennkey User and enter your Pennkey and Pennkey password. If you do not remember your Pennkey go to http://www.uphs.upenn.edu/pennkey/reset/index.html.

If you do not have a Pennkey, click on Non-Pennkey User and enter the username and password assigned to you. If you do not remember your username and/or password contact the OEA.
Once in the system, you will be taken to a list of all the evaluations which you have not yet submitted. To view evaluations you have previously submitted, closed, or removed, click on the link on the upper right hand corner that says Show and check the box Show Submitted and Closed. Then, you can select the year in the drop down box that you would like to view evaluation data from.

**EVALUATION PERIOD**

The length of time an evaluation stays open, or its “evaluation period” is determined by the person who assigned the evaluation. Evaluations may be submitted at any time during the evaluation period. If you fail to submit your evaluation during the evaluation period, the evaluation will no longer be available for you to complete and cannot be re-opened.

**EVALUATION COMPLETION**

To complete an evaluation assigned to you, click on the person or evaluation you would like to evaluate. You will know you have not already submitted the evaluation because its status will appear as “not started” or “started”. Once you have submitted an evaluation, it no longer appears on this screen unless you select the option to view your submitted/inactivated evaluations. Read the instructions carefully when completing an evaluation.

You do not have to complete a full evaluation form or do more than one evaluation in one sitting. You can save your evaluation and come back to it later by clicking on Save but don’t submit, I am not done. You will want to click this button often as you fill out your evaluations so that no data is lost. If you exit OASIS without clicking on either Save or Submit buttons, the system will not save your responses and you will lose them. Once you click Submit, you may no longer change your responses, the evaluation is final. If, after submitting the evaluation, you realize you made a mistake, contact the OEA.

If you are assigned an evaluation of someone with whom you did not work, you may remove it from your list of evaluations by clicking Remove on the right side of your screen. In some cases, you will be able to add additional people to evaluate by clicking on Add a Person to Evaluate.

If you are unable to correct your own evaluation list by using the Inactivate and Add a Person to Evaluate functions, contact your program coordinator.

**REMINDERS**

Evaluation reminders are automatically emailed by the OASIS system. You will get one reminder a week from OASIS until the evaluation is either completed or closes. Additionally, some programs also send out personalized reminder emails to residents/fellows who are not keeping up with their evaluations.

**EVALUATIONS ABOUT YOU**

Evaluations about you are available for the previous three years in the School of Medicine’s House Staff and Medical Student Evaluation Record (HAMSTER). The HAMSTER system is the School’s
official teaching evaluation record for faculty. Data collected from both Undergraduate Medical Education (UME) and GME evaluation systems are collated within a single faculty report, that includes teaching activities and evaluation for lecture and clinical teaching. Evaluation data are summarized for each faculty person and comparative data are provided for everyone within the faculty person's primary department, as well as the School of Medicine overall. For more information on HAMSTER contact Elizabeth O'Grady, the Associate Director of the OEA at lizi@mail.med.upenn.edu.

Other faculty evaluation reports may be available from your program coordinator.

GETTING HELP

If you have a question about evaluations assigned to you, please contact your program coordinator. For technical assistance contact the OEA at 215-573-9701.
STANDARD EVALUATION FORMS:
Faculty and Course
### Preview Evaluation

#### Faculty Evaluation

**Evaluation of Clinical Faculty v4**

[Return to Evaluation]

### Course Information

<table>
<thead>
<tr>
<th>Date</th>
<th>Course</th>
<th>Location</th>
<th>Weeks</th>
<th>Credits</th>
</tr>
</thead>
<tbody>
<tr>
<td>01/01/2006 - 01/31/2006</td>
<td>XXX-YYY: Department Course</td>
<td>Location</td>
<td>8</td>
<td>8</td>
</tr>
</tbody>
</table>

**Evaluation Period:** 01/01/2006 - 01/31/2006

**Faculty:** Evaluator name

The EFFECTIVE faculty member shows up on time for scheduled sessions, is available for help, willingly makes time available, keeps appointments, returns emails and pages, and informs learners of how they can be contacted. The INEFFECTIVE faculty member rarely shows up on time for scheduled sessions, is not available for help, is difficult to reach, does not keep appointments nor returns emails or pages, and does not inform learners of how they can be contacted.

1. **AVAILABILITY AND ACCESSIBILITY**

<table>
<thead>
<tr>
<th>Poor</th>
<th>Fair</th>
<th>Good</th>
<th>Very Good</th>
<th>Excellent</th>
<th>N/A Not Applicable</th>
</tr>
</thead>
</table>

The EFFECTIVE faculty member is an excellent teacher, generates enthusiasm for the subject, motivates learners to teach themselves, encourages self-learning and independent thinking, stimulates critical thinking, demonstrates poise and effective role modelling, is well organized, is enthusiastic, is articulate and uses teaching aids judiciously and helpfully. The INEFFECTIVE faculty member is a poor teacher, does not generate enthusiasm for the subject, does not motivate learners to teach themselves, does not encourage self-learning nor independent thinking, does not stimulates critical thinking, does not demonstrate poise and effective role modelling, is not well organized, is not enthusiastic, is not articulate and does not use teaching aids judiciously nor helpfully.

2. **TEACHING EFFECTIVENESS**

<table>
<thead>
<tr>
<th>Poor</th>
<th>Fair</th>
<th>Good</th>
<th>Very Good</th>
<th>Excellent</th>
<th>N/A Not Applicable</th>
</tr>
</thead>
</table>

The EFFECTIVE faculty member with command of the subject, is able to convey information in a logical and understandable method, is clear about important objectives, is comfortable with questions, will admit knowledge gaps and adds to your knowledge base. The INEFFECTIVE faculty member does not seem to possess expertise of the content area, is unable to convey information in a logical and understandable method, is not clear about important objectives, is not comfortable with questions, does not admit knowledge gaps and does not add to your knowledge base.

3. **KNOWLEDGE OF/ABILITY TO TEACH SUBJECT MATTER**

<table>
<thead>
<tr>
<th>Poor</th>
<th>Fair</th>
<th>Good</th>
<th>Very Good</th>
<th>Excellent</th>
<th>N/A Not Applicable</th>
</tr>
</thead>
</table>

The EFFECTIVE faculty member excels at explaining the rationale behind clinical judgments and decisions, and uses literature and evidenced based medicane to support clinical decisions and teaching points. The INEFFECTIVE faculty member has difficulty explaining the rationale behind clinical judgments and decisions and uses literature and evidenced based medicane inappropriately or not at all to support clinical decisions and teaching points.

4. **ABILITY TO TEACH CRITICAL THINKING**

<table>
<thead>
<tr>
<th>Poor</th>
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<th>Good</th>
<th>Very Good</th>
<th>Excellent</th>
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</tr>
</thead>
</table>

The EFFECTIVE faculty member teaches how and when to appropriately use/order/perform procedures, demonstrates correct techniques, and allows the appropriate balance of independence and supervision. The INEFFECTIVE faculty member does not teach how and when to appropriately use/order/perform procedures, demonstrates incorrect techniques, and does not allow the appropriate balance of independence and supervision.

5. **ABILITY TO TEACH PROCEDURES/TECHNIQUES**
The EFFECTIVE faculty member demonstrates effective clinical problem solving based on patient information, preferences, up-to-date information, and clinical judgment. He/she teaches one how to know their own limits and when to consider referrals and consultations with other specialists. He/she models a humane and caring attitude, addresses ethical issues and teaches/emulates humanism and professionalism. The INEFFECTIVE faculty member demonstrates ineffective clinical problem solving, does not demonstrate how to recognize one’s own limits nor when to consider referrals and consultations with other specialists. He/she does not model a humane and caring attitude, does not address ethical issues nor teaches/emulates humanism and professionalism.

6. ABILITY TO TEACH CLINICAL SKILLS/JUDGMENT

The EFFECTIVE faculty member presents in a clear, organized and logical fashion. He/she invites discussions and questions, and listens attentively. Explanations are clear. Expectations are communicated clearly and fairly. Feedback timely and helpful, being clear, specific and constructive. The INEFFECTIVE faculty member rarely communicates in a helpful manner. Explanations and expectations are not clear. Questions are unwelcome. Feedback either does not occur, or it is so late or so general that it is not helpful.

7. COMMUNICATION

The EFFECTIVE faculty member exhibits professional behavior in his/her teaching. He/she is interested in teaching and has respect for learners of all levels. He/she does not belittle learners or publicly humiliate them. He/she encourages questions and debate and tolerates diverse viewpoints. He/she is careful to not show personal biases and prejudices or arrogance. The INEFFECTIVE faculty member does not act in a professional manner in regards to teaching responsibilities. He/she is not interested in teaching and shows little respect for the learner. He/she belittles learners, is impatient with or intolerant of questions. Personal biases and prejudices are conveyed to learners.

8. PROFESSIONALISM IN TEACHING

The EFFECTIVE faculty member has made it very clear that he/she is supportive of the regulations. He/She sends the message that accurate reporting is a professional responsibility; compliance with duty hour regulations is not optional. He/She supports the reform in a positive way. The INEFFECTIVE faculty member gives either explicit or implicit pressure to ignore the regulations. He/She does not support institutional goals of meeting the duty-hour regulations in terms of actual hours worked and/or reporting of hours.

9. SUPPORTIVENESS OF DUTY-HOUR REGULATIONS

The EFFECTIVE faculty member is a superb teacher, interested in learners, helps them achieve clear learning objectives, generates enthusiasm for the subject, motivates learners, and is committed to teaching. The INEFFECTIVE faculty member is not a good teacher, is not interested in learners, does not help them achieve clear learning objectives, does not generate enthusiasm for the subject, does not motivate learners, and is not committed to teaching.

10. OVERALL ASSESSMENT OF TEACHING

11. Total Number of Half-Days Contact

12. Comments
Course Evaluation

Rotation Evaluation Form

Course Information

<table>
<thead>
<tr>
<th>Date</th>
<th>Course</th>
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</table>

Evaluation Period: 01/01/2006 - 01/31/2006

Patient Care

1. Appropriate Degree of responsibility for patient care and clinical cases.
   - 1 2 3 4 5 N/A

2. Availability and helpfulness of attendings
   - 1 2 3 4 5 N/A

3. Educational Value of fellows (and specialty residents)
   - 1 2 3 4 5 N/A

Communication

4. Clear statement of goals and objectives at start of the rotation
   - 1 2 3 4 5 N/A

5. Clear statement of resident/fellow responsibilities at start of rotation
   - 1 2 3 4 5 N/A

6. Overall quality of feedback and evaluation
   - 1 2 3 4 5 N/A

Medical Knowledge

7. Ability to attend scheduled conferences
   - 1 2 3 4 5 N/A

8. Educational value of teaching rounds, conferences, and sessions.
   - 1 2 3 4 5 N/A

9. Time for reading and cognitive development
   - 1 2 3 4 5 N/A
Practice Based Learning

10. Opportunity to develop clinical judgment
    1  2  3  4  5  N/A

11. Appropriateness of the workload of this rotation
    1  2  3  4  5  N/A

Professionalism

12. Professionalism of working relationships between residents/fellows and other staff
    1  2  3  4  5  N/A

13. Overall sense of teamwork and atmosphere
    1  2  3  4  5  N/A

Systems-Based Practice

14. Availability of supplies and equipment
    1  2  3  4  5  N/A

15. Exposure to quality assurance, practice improvement, and cost containment activities, as they pertain to this rotation
    1  2  3  4  5  N/A

16. Helpfulness of clerical staff
    1  2  3  4  5  N/A

17. Ability of the processes, systems, and teams encountered during this rotation to prevent errors from happening
    1  2  3  4  5  N/A

18. Overall quality of the facilities
    1  2  3  4  5  N/A

Overall

19. Overall education value
    1  2  3  4  5  N/A

20. Comments:
OASIS GLOSSARY
of Terms
**Academic year:** Defined in the Administration module, an Academic Year is assigned a Start and End date and divided into blocks typically of equal length. The Academic Year starts July 1 and ends June 30th.

**Ad-hoc reports:** a custom document provided on the evaluation data gathered; these are generated by the OEA by request with enough notice; reports can be individual data or aggregate data.

**Aggregate data:** describes data that is combined and averaged from several sources, in this case several difference evaluation forms to give a holistic view of performance

**Assignment:** is an evaluation connection that has been associated with a specific person or between people in relation to specific start and end dates and a rotation

**Bi-directional:** going in both directions; most evaluations within OASIS are assigned bi-directionally so that faculty evaluate residents/fellows and vice versa; also called two-way street.

**Block:** intervals that compose an Academic Year. Rotations and blocks typically start and stop on the same dates, although Rotations may span several blocks or be contained within one block.

**C:** is an abbreviation for a Course Evaluation, a type of evaluation in the system. Course evaluations are generally an evaluation of a particular rotation within a program.

**Close Date:** refers to the date that an evaluation becomes no longer available to a user in the system to complete; generally, a year from their open date

**Closed:** status that means evaluation was not been completed within a certain window of time and since has expired and cannot be completed; these evaluations show up red in OASIS.

**Compliant:** description which refers to any users without any outstanding course, faculty and student performance evaluations in the OASIS system.

**Course roster:** List of all the residents/fellows enrolled for each start date or block of a rotation within an academic year

**End Date:** determines when the evaluation period or time of interaction ends; appears on the Evaluation Forms; can refer to the actual time a trainee interacted with an evaluator.

**Evaluation Period:** Defined by the Start and End dates of a Session or of a block within an academic year. These dates will appear on the Evaluation Forms; can refer to the actual time a trainee interacted with an evaluator.

**Evaluator:** anyone who is assigned an Evaluation form for rating a person or rotation is considered an Evaluator.

**Evaluators:** OASIS refers to faculty/attending/staff as evaluators in the system.

**F:** is an abbreviation for a Faculty Evaluation, an evaluation of a faculty member.

**Form:** an evaluation form is an assemblage of Questions, Competencies, and Grade Scales.

**GME Office:** The Graduate Medical Education Office supervises over 50 ACGME-accredited specialties and subspecialties. They manage the institutional and program standards, as well as the evaluation requirements of the Accreditation Council on Graduate Medical Education (ACGME). Their office is located in 210 White. Their main number is 215-662-3957.
Grouping: refers to information is viewed on a particular screen; in several places, you can modify the view, including how the data is grouped; e.g. on the search and edit screen, you can group by evaluator, student, evaluation, start dates.

Inactivate (verb): status meaning that the evaluation is not available to be completed (but not closed); all users in OASIS have the right to inactivate an evaluation and evaluations can be inactivated at any time; generally, users must provide a reason as to why they are inactivating a particular evaluation, this information appears in the system log for that individual evaluation;

Log: an automated systematic recording of data that gives details about the occurrences to a particular evaluation since it’s creation in the system. Here you can view when the evaluation was completed, inactivated, closed, reminders that have been sent out by the system, who accessed the evaluation, as well as the various statuses the evaluation has held.

M: (mean) the average value of a set of numbers

N: (number) the number of data collected, in this case N usually refers to evaluations.

New Innovations (NI): New Innovations Residency Management Suite is a tool that assists medical schools, hospitals and private practices in the area of medical education and department administration, to unify data into a centralized data warehouse and to complete tasks, historically performed using multiple, incompatible methods, through one common interface.

Non-compliant: description which refers to any users with outstanding course, faculty and student performance evaluations in the OASIS system; a report in OASIS provides this information.

OASIS: OASIS is a web based bi-directional evaluation system used across the School of Medicine to assist you with the majority of your evaluation needs, including faculty evaluating residents and fellows and visa versa, and residents and fellows evaluating rotations.

OEA Office: The Office of Evaluation and Assessment is located in Suite 100, Stemmler Hall.

Open (verb): status meaning that the evaluation is available to be completed; evaluations are open in the system (and viewable on the search and edit evaluations screen) once that have been successfully assigned within OASIS on the manage evaluators screen; evaluations that have been previously inactivated can be opened again

Open (noun): status that means evaluation is ready to be completed but has not been yet; these evaluations show up green in OASIS.

Open Date: refers to the date that an evaluation becomes available to user in the system to complete, that automated weekly evaluation reminders will be sent out from; generally evaluations become available to be completed five days before the start date and stay open for a year from their open date

Peer Evaluation: refers to an evaluation between two users with the role of “student” in the OASIS system; these evaluations are not able to be viewed individually in the system by program coordinators.

PDF: is a file format created by Adobe Systems in 1993 for document exchange; this format is non editable

Pennkey: an individual's username within the PennKey authentication system; Paired with an associated password, a PennKey is required to authenticate an individual's identity to many of Penn's networked systems and services.
PGY: (Post Graduate Year), the number of years past medical school graduation the trainee is; not be with confused with PRG or year in program.

Re-assignment: assigning an evaluation again; when an evaluation connection that has been associated with a specific person or between people in relation to specific start and end dates and a rotation needs to be altered to be correct

Red dot: refers to symbol that appears on the manage evaluators screen; this designates (as described in the Legend on that screen) that no evaluation exists for this association. THIS IS AN INCORRECT ASSIGNMENT. It means that no evaluations are being collected for this assignment. Please contact that OEA if you see a red dot immediately.

Release (verb): evaluations are released into the system (and viewable on the search and edit evaluations screen) once that have been successfully assigned within OASIS on the manage evaluators screen

Reminders: automated email messages that are sent weekly from the OASIS system that inform users of their specific outstanding evaluations; an evaluation has to be correctly assigned and open in order for reminders to be sent out by the system automated.

Report: a document provided on the evaluation data gathered; there are several different types of reports in the OASIS system available at any time that show different data; custom ad-hoc reports are also generated by the OEA by request; reports can be individual data or aggregate data.

Rotation: A block of time a trainee spends working for a specific Department or Division for the purpose of gaining specific types of experiences and skills. Typically, a block is a month or 4 weeks, but it can be as little as one full day; rotations are defined by start and end dates.

SD: (standard deviation) a measure of how spread out your data is, or the average amount by which scores in a distribution differ from the mean

SP: is an abbreviation for a Student Performance Evaluation, an evaluation of a trainee.

Start Date: determines when the evaluation period or time of interaction begins; appears on the Evaluation Forms;

Students: OASIS refers to residents/fellows as students in the system.

Submitted: status that means evaluation has been completed and is ready to be printed; these evaluations show up white in OASIS.

Trainee: a physician at any level of GME in a program accredited by the ACGME. Participants in accredited subspecialty programs are also considered trainees;

User Account: give to access OASIS by the OEA; includes the username and password with which you log on to the account; and the permission given to access certain departments, rotations, reports, and evaluations.

Username: is the handle that a person uses within OASIS which is connected to their user account.