OASIS Quick Start Guide:

FOR PROGRAM DIRECTORS

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Table of Contents

USEI	R GUIDE: PROGRAM DIRECTORS	
	OASIS ACCOUNT	4
	RESPONSIBILITIES	4-5
	EVALUATION TYPES	5
	EVALUATION ASSIGNMENT	5
	ACCESSING EVALUATIONS	5
	EVALUATION PERIOD	5-6
	EVALUATION COMPLETION	6
	EVALUATING STUDENTS	
	REMINDERS.	
	EVALUATIONS ABOUT YOU	6-7
	GME OFFICE INITIATIVES: RESIDENTS/FELLOWS	7
	GME OFFICE INITIATIVES: FACULY	7-8
	HAMSTER PROMOTION/TENURE	8
	OASIS PLUS	8
	RESPONSE RATES	8-9
	REPORTS FOR CHECKING COMPLIANCE	9
	GETTING HELP	9
	NDARD EVALUATION FORMS	11 15
TL()	SSARY	16-19

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:

Program Directors

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. There is a "Program Director" role in OASIS; however, most program directors opt to maintain their "Evaluator" roles in the system, as they prefer not to receive the automated OASIS emails associated with the Program Director Role. Program Directors who maintain their Evaluator roles refer to their Coordinators for access to OASIS reports in the system.

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

BREAKDOWN OF RESPONSIBILITIES



Office of Evaluation and Assessment's (OEA) Responsibilities:

- Update User Information
 - Update user list with new trainee/faculty names and emails from New Innovations
 - o Disable former trainees and faculty on user list (when directed by coordinator)
 - Contact new users by email with log-in information and instructions on using OASIS
- Rotation Schedules
 - Enter rotation schedules into OASIS using schedules input into New Innovations
- Maintain/Monitor System Usage
 - o Ensure evaluations are assigned
 - Assist in creating forms for the system
 - Assist in creating new rotations

Program Director's Responsibilities:

- Define parameters of evaluative efforts
 - o Evaluation Period
 - o Evaluation Student Performance Forms
 - o Additional Evaluation Types (360/Resident Evaluation of Program)
- Monitor Evaluation Compliance of Residents/Fellows
- Monitor Evaluation Compliance of Faculty

Program Coordinator's Responsibilities:

- Update the OEA with User Information
 - o Supply Office of Evaluation with new and existing faculty names and emails
- Check rotation information in OASIS when requested by the OEA
 - Check and correct rotation names
 - o Check and correct start and end dates for each rotation for the entire year
 - o Reviewing evaluation settings with OEA
- Make evaluation assignments for each rotation for the entire year (unless you are an OASIS plus user)
 - o Report any red dots seen on Manage Evaluators Screen to the OEA

- o Check Search and Edit Evaluations to be sure evaluations are live and being filled out for each rotation for the entire year
- o Monitor compliance of faculty and residents/fellows
- Maintain printed records for your own folders
- Update Program Director about evaluative efforts

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

EVALUATION ASSIGNMENT



Along with the OEA, you will determine the evaluative standards for your program in OASIS. Your program coordinator is responsible for assigning the evaluations accordingly.

When viewing your own list of evaluations to complete in OASIS, check to make sure that all assignments are correct. If they are not correct, you can click on the Inactivate hyperlink or contact your program coordinator.

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.

If you have "Evaluator" status in the system, then upon logging into OASIS, 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.

If you do not have "Evaluator status in the system, then upon logging into OASIS, you will be taken to the main page of OASIS. In order to access your evaluations, you will have to click on "Manage" on the toolbar and select "My Evaluations" to be taken to your OASIS evaluation inbox.

EVALUATION PERIOD



The frequency with which evaluation occurs is determined by Program Leadership. Usually, the "evaluation periods," or length of time within which an evaluation occurs, match the resident/fellow blockly schedules that coordinators input in New Innovations (unless otherwise specified). The "evaluation open/close date" or the length of time the evaluation remains available to be completed can differ from the "evaluation period." The default settings in OASIS are such that: an evaluation

will open five days before the end date specified in the evaluation period, and will remain open for an entire year.

According to these defaults, an evaluation with an evaluation period of 7/1-7/31/09 will be available to be completed on 7/26/09 and will remain open until 7/26/10.

Evaluations may be submitted at any time during the evaluation open/close date. If you fail to submit your evaluation during that time, the evaluation will no longer be available for you to complete and can only be re-opened at the purview of the OEA.

Closed evaluations from the previous year or more will not 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

The OASIS system automatically emails evaluation reminders. Faculty, residents and fellows who have outstanding evaluations will receive 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 Graduate Medical Education (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.

Depending on your role in the system, other faculty evaluation reports may be available either to you (if you have the "Program Director" role) or from your program coordinator (if you have the "Evaluator" role).

GME OFFICE INITIATIVES: RESIDENTS/FELLOWS

Duty Hours:

According to ACGME requirements, the training program director must establish an environment that is optimal both for house staff education and for patient care, while ensuring that undue stress and fatigue among house staff are avoided. Duty Hours are evaluated monthly and will appear in your OASIS inbox. These evaluations will open the 1st of every month and remain open until the 8th of every month.

If you do not complete these evaluations within that time, you will affect your program's compliance. Violations will be reported to program leadership monthly. Rotation name removed from report when less than 3 trainees rotated at a location.

If you are not receiving these evaluations, please check with your Program Coordinator.

Learning Climate Survey:

Residents/Fellows are asked to complete the survey in regards to their training experiences within UPHS. The GME Committee uses the data to address some very important concerns including: inadequate call room space and cleanliness, inadequate meal benefit, poor cafeteria selections and hours, excessive wait for the shuttle service to the parking garage, lack of access to food after hours.

Please instruct your trainees to:

- complete the first section with respect to their entire training experience this past year
- only complete site-specific questions for those sites they regularly rotated

The Learning Climate Survey is evaluated annually in May and will appear in your OASIS inbox. This evaluation will open in the beginning of May and remain open until the end of the academic year, June 30th.

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

Internal Review Survey:

As per the ACGME requirements, all programs must have an Internal Review mid-cycle between ACGME Site Visits. Part of the Internal Review process includes a survey which is sent to each house staff member for their input regarding the program. The survey is administered intermittently as relevant and will appear in your OASIS inbox.

If you have a question about these specific evaluations, please contact the GME Office, 215-662-3957.

GME OFFICE INITIATIVES: FACULTY

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.

HAMSTER/PROMOTION AND TENURE

Data collected from the UME and GME Evaluation systems are collated within a single reporting system called HAMSTER (Housestaff and Medical Student Evaluation Record) for reporting purposes. HAMSTER produces aggregate reports of teaching activities and evaluation for lecture and clinical teaching across the continuum from UME to GME. 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.

The comparative data are restricted to faculty in the tenure, clinician-educator, academic clinician and research tracks. It is important to note that this report does NOT capture all teaching activity. Other types of teaching not captured in the HAMSTER report includes, for example, teaching in BGS programs, teaching that was done when one was a resident/fellow, didactic teaching (i.e., noon conferences) of residents, administrative activities such as the Course Director role, or any CME teaching. For this reason, it is important that you maintain some evaluative record of these types of teaching for your own purposes. Faculty may need to request data elsewhere for other types of teaching activities. Means and comments will not display if there are fewer than 3 evaluations.

For more information on HAMSTER and HAMSTER reports, please contact Elizabeth O'Grady, the Associate Director of the Office of Evaluation and Assessment at lizi@mail.med.upenn.edu.

OASIS PLUS

The OEA has introduced a new fee program in 2008-2009 called **OASIS PLUS**. A number of programs participate in the program, which is intended for programs without the resources to monitor their evaluations and compliance. For \$1000, the OEA will assume all regular tasks associated with the maintenance of the OASIS evaluation system, such as: evaluation assignments, compliance checks, and additional compliance reports will be provided on a quarterly basis to the program director and coordinator. It is important to note, that even when participating in **OASIS PLUS**, programs are still responsible for providing evaluation scheduling information to the OEA including: the rotations names; names of residents who should complete evaluation; and the names of attending to be evaluated and complete evaluations.

For more information on OASIS PLUS services, contact Traci Dougherty at tracido@mail.med.upenn.edu.

RESPONSE RATES

Managing Evaluation Completion:

Coordinators and program leadership should take a pro-active approach to managing evaluation completion. By taking a more active approach to evaluation management, a program can expect to turn around its evaluation compliance, to improve response rates and data collection within the course of a year. There are several ways in which a program can improve response rates and evaluation data. It is clear that certain measures work well for certain programs.

- By establishing an evaluation policy, programs can effectively clear up some
 of the gray areas of evaluation, such as the minimum number of evaluations to
 be completed per resident per block, minimum amount of time spent together
 that requires an evaluation, repercussions for evaluators/residents, who are
 continuously non-compliant.
- Coordinators should keep track of evaluations that have been completed and that have not been completed outside of OASIS. An easy way to do this is to staple a resident schedule on each resident's folder. When you print out a completed evaluation for a resident/fellow folder, highlight the block of time which corresponds with the evaluation you printed on the schedule on their folder. This way you will have a visual outside of OASIS of what you still need and can be sure of what evaluations you do have for resident/fellow meetings with program leadership.
- Evaluation reminders are sent via e-mail by the OASIS evaluation system to each user who hasn't completed evaluations and will contain a detailed list of the outstanding evaluations, as well as an HTTP link to the system. It may be helpful for a Program/Coordinator to send out personalized reminder emails to their residents/fellows/faculty about evaluation completion, in addition to those sent out by the system.
- Coordinators can set OASIS so that faculty cannot inactivate an evaluation without providing an explanation. This can be a helpful tool in keeping track of incorrect assignments. Generally, an evaluator may explain that they never worked with the resident, but Dr. X did. Then, you know you need to make a new evaluation assignment and you know the correct evaluator.
- OASIS offers several types of reports that demonstrate evaluation compliance, completion statistics, and include email addresses for ease of mailing. Pulling these reports regularly would be a great way for Program Leadership to have a better picture of evaluation completion. Statistical completion limits could even be set for faculty and residents--75% of all evaluations assigned must be completed, etc.
- Including a sentence about evaluation timeliness and compliance in recommendation letters written on behalf of residents/fellows or faculty for promotion and tenure would also be great way of increasing response rates.

• Generally speaking, if you wish to receive more evaluation data, you can help by emphasizing the importance of filling out evaluations to your students.



These are only a few examples of how coordinators/program directors can improve their management of evaluation collection.

Please consult with Jen Lapin and Traci Dougherty to discuss more about measures that would help with improving response rates.

REPORTS FOR CHECKING COMPLIANCE

Oasis has special reports for checking compliance on the rotation, individual, and program levels. See your coordinator for more information.

GETTING HELP

If you have a question about evaluations assigned to you, please contact your program coordinator.

For technical assistance, contact the OEA for help:

Jennifer Lapin is the Director of Graduate Medical Evaluation and Research. jlapin@mail.med.upenn.edu

Traci Dougherty is the Coordinator of Graduate Medical Evaluations tracido@mail.med.upenn.edu

STANDARD EVALUATION FORMS: Faculty and Course



Course	Calendar	Students	Users	Manage	Con	figure	Accou	ınt	
Email Std. Performance		nce Course	Faculty	Classifications		Question Pool		Mu	It Choice Pool

Home → Administration → Manage → Manage Evaluations → Preview Evaluation

Preview Evaluation Faculty Evaluation Evaluation of Clinical Faculty v4 Return to Evaluation Course Information Date Course Location Weeks Credits 01/01/2006 - 01/31/2006 XXX-YYY: Department 8 Location 8 Course

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

0	0	0			
Poor	Fair	Good	Very Good	Excellent	N/A Not Applicable

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



The EFFECTIVE faculty member is an excellent teacher 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



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



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

Poor Fair Good Very Good Excellent N/A Not Applicable
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 ones 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
Poor Fair Good Very Good Excellent N/A Not Applicable
The EFFECTIVE faculty member presents in a clear, organized and logical fashion. He/she is 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
Poor Fair Good Very Good Excellent N/A Not Applicable
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 repsonsibilities. He/she is not interested in teaching and shows little respect for the learner. He/she belittles learners, is inpatient with or intolerant of questions. Personal biases and prejudices are conveyed to learners.
8. PROFESSIONALISM IN TEACHING
Poor Fair Good Very Good Excellent N/A Not Applicable
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
Poor Fair Good Very Good Excellent N/A Not Applicable
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
Poor Fair Good Very Good Excellent N/A Not Applicable
11. Total Number of Half-Days Contact

10.	OVERALL ASSESSMENT OF TEACHING
	Poor Fair Good Very Good Excellent N/A Not Applicable
11.	Total Number of Half-Days Contact
12.	Comments



Calendar Students Course Users

Email Std. Performance Course Faculty Classifications Question Pool Mult Choice Pool

Home Administration Manage Manage Evaluations Preview Evaluation

Preview Evaluation

Course Evaluation

Rotation Evaluation Form

Return to Evaluation

Configure

Course Information

Date	Course	Location	Weeks	Credits
01/01/2006 - 01/31/2006	XXX-YYY: Department Course	Location	8	8

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
- - 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 a 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 inactive 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.