medhub

Program Administrator Training Overview

<u>Contents</u>

Administrator Portal Overview	
Trainee & Faculty Demographics	
Schedule Management	
Defining Rotation and/or Services:	
Defining Continuity Clinics and Alternate Activities:	
Faculty Scheduling	
Duty Hours	
Evaluation Creation and Management	
Creating a Non-Milestone Evaluation	
Setting Up Milestones or Subcompetencies (for Evaluations)	
Clinical Competency Committee (CCC)	
Creating Milestone Evaluations	54
Individual Manual Method	
"By Schedule" Manual Method	
Automated Method	61
Residents Identify Supervisors Method	
Self-Initiated Method	
Evaluation Functions	
Defining and Managing Procedures	
Creating and Managing Conferences	75
System Help Overview	82

Administrator Portal Overview

Urgent Tasks

On the portal page, administrators have a "task list" called urgent tasks. These are links to various tasks the administrator will need to complete. Whenever an urgent task is indicated, it will appear in red in the upper left hand corner of the portal or home page.

🛦 Urgent Tasks
Resident Absence Requests (4)
Exit Checklists for Approval (1)
New Activities - Site Required (118)
Asynchronous Learning Requests (2)
Verification Requests (1 pending)

Examples of urgent tasks include:

- 1. Resident absence requests (approving absence requests)
- 2. Expiring medical licenses (updating the expiration date, if available to programs)
- 3. Expiring site contracts (notification that a site contract is about to expire)
- 4. Evaluation request (if identified as an evaluator)
- 5. Late Evaluation notice (if identified as an evaluator)
- 6. Resident released to the training program (if another training program has released their resident or fellow to the training program's schedule)

Personal Calendar

Each user type in MedHub has a personal calendar that can be used to post calendar items pertinent to their daily or administrative activity. This is NOT the same as the rotation schedule. The personal calendar is found on the left side of the portal page. The view of the personal calendar on the portal page is a rolling week of 5 days.



Users can also view the personal calendar on a monthly basis by selecting the "View my Calendar" button. There are particular calendar items that are automatically "pushed" to the personal calendar of administrators, faculty and/or resident user types. These items are:

- 1. Conferences
- 2. Assigned clinics and shifts/calls (resident view only)
- 3. Absences (vacations, away conferences, LOAs of the resident)

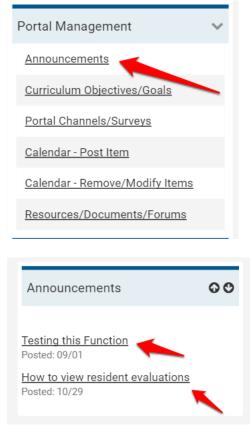
Administrators who have access to more than one training program will see conferences of all their programs in the personal calendar as well. All users can opt to add their own personal meetings and appointments to the monthly calendar. Administrators have the ability to post calendar items to the personal calendar of any faculty and resident users as well.

All user types have the ability to sync items in their MedHub personal calendar to Microsoft Outlook or Google calendars, or sync to their iPhone or Android smart phones. Other smart phones are currently not available for syncing the personal calendar. The ability to sync is found at the top of the monthly personal calendar.

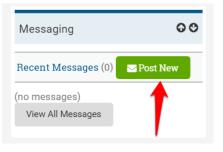
There is NOT a way to sync from Outlook or Google, or the iPhone or Android to MedHub.

Announcements and Messaging

Administrators, Program Directors and Associate Program Directors have the ability to post announcements to various users' home pages. They have an "Announcement" link where they can create and manage these announcements. These announcements are posted to the Announcement section on the left hand side of the home page. Announcements can be posted to specific users (i.e. residents, faculty) or down to the PGY level.

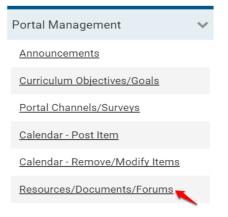


All user types have the ability to add or post messages that will be delivered to another user or a group of users within the MedHub system. This is separate from a traditional e-mail client such as Outlook, Google, Hotmail, Yahoo, etc. However, when creating a message, the user has the option to send this same message to the user's e-mail address. The e-mail address is the primary e-mail found in the demographic profile of that user.



Resources/Documents

Administrators, Program Directors and Associate Program Directors have the ability to post particular resources and documents to users' home pages. These resources/documents are posted to the Resources/Documents section on their home pages.



The administrator, Program Director or Associate Program Directors are able to upload files, Internet links as well as folders to help organize the files or Internet links. These resources are information pertinent to the individuals associated with the program.

Re	sources/Documents
	Faculty Directory Resident/Fellow Directory
	Residency Program Directory MedHub Community
	Available housing
	Friday NEW
	Items for Sale
	MedHub Training
	Program Coordinators Meeting Test Forum
	test one NEW
-	Testing 101 NEW
c	2015 GME Retreat Presentations
	Employee Assistance Program -
	YNHH Paid trainees
	Forms
C	Housestaff Policy & Procedure
_	Handbook
	Leading Edge Newsletter
G	Patient Safety Training instructions

There are permanent links under the Resources/Documents section where all users can see directory information pertinent to their training program or the institution.

- 1. <u>Faculty Directory</u> a list of faculty in the user's training program(s) that can include their pager number, cell phone, work phone, e-mail address and photo. (This information flows from the user's demographic profile.)
- 2. <u>Resident/Fellow Directory</u> a list of residents or fellows in the user's training program that can include pager number, work phone, e-mail address and photo. (This information flows from the user's demographic profile.)
- 3. <u>Residency Program Directory</u> a list of all residency and fellowship programs at the home institution that also identifies the Program Director, Associate Program Director, primary Program Administrator, and Chief Residents.
- 4. <u>MedHub Community</u> an option for MedHub users to view interactive training tools such as video tutorials, bulletin boards, forums and other documents.

Portal Channels/Surveys

Administrators have the ability to add informational channels to the home pages of users associated with their programs, as well as an on-line survey option if a program would like to poll their residents, fellows or faculty about something program specific that everyone can see.

Portal Management	\sim
Announcements	
Curriculum Objectives/Goals	
Portal Channels/Surveys	
Calendar - Post Item	
Calendar - Remove/Modify Items	
Resources/Documents/Forums	

Administrators have the ability to set-up various channels that include newsfeed channels and specific information channels for residents, faculty, and other administrators. These "channels" are ways for programs to provide other information to residents, faculty and other administrators in their program that is important and cannot be removed by the user. Only the program has the ability to remove the channel. These channels will appear on the right hand side of the user's home page.

Access

Administrators can grant particular users read-only access to particular functionality as well as grant particular faculty members mentor access.

1. <u>Read-Only Access</u> – this gives a particular user (that is usually not a faculty member or a resident) read-only ability to items such as the rotation schedule, conference schedule, procedure certifications, and resources/documents of that program. These individuals would have a MedHub log-in, but only be able to read what is available to them.



2. <u>Mentor Access</u> – this gives certain faculty members the ability to see information pertaining to individual residents. This may include evaluation information, procedure information, conference attendance information, duty hours, portfolios and demographics.

Security	~
Administrator Access	
Clinical Competency Committee	
Program Evaluation Committee	
Mentors/Mentees	
Read-Only Access	

The administrator can enable mentor access for certain faculty members as well as define what information that faculty member should be able to see of a particular resident or a group of residents. Program Directors should have mentor access to ALL RESIDENTS for all functionalities as they will be able to see the information and reporting on all of their trainees.

Learning Modules/Testing

Administrators can create learning modules in MedHub. These learning modules are simple modules made up of several components such as:

- 1. PowerPoint presentations
- 2. Uploaded files
- 3. Associated Internet links

The administrator can manage this information by delivering modules to the users who need to review them as well as report on who has accessed the modules.

Administrators can also create tests in MedHub where they can also be delivered and reported on. Tests can also be associated with the learning modules to confirm the user has reviewed the presentation, read an uploaded file, or accessed the Internet link.

Resident/Faculty Portfolios

Residents and faculty have the ability to maintain and manage their own personal information. The administrators can add to the resident or faculty portfolios (including adding CME credit for faculty) on behalf of the resident or faculty as well as review the information that has been uploaded, if needed.

Trainee On-Boarding

If this is enabled by the institution, administrators may see a link called, "Trainee Applications," "Trainee On-Boarding," "Resident On-Boarding, etc. The name of the link is customized by the institution. This functionality allows the administrator to monitor the documentation and information related to the on-boarding of incoming residents or fellows pertaining to the administrator's training program. The on-boarding information required by an incoming trainee is managed by the GME Office.

Program Accreditation

Administrators have the ability to review accreditation information pertaining to reviews, site visit/selfstudies and resident or faculty surveys. Programs can upload any required policies, correspondence and initiate program annual evaluation information. Programs can also upload surveys downloaded directly from the ACGME website.

Program Scorecards

Administrators can also monitor program scorecard information that provides dashboard data about the program. Scorecards are generated by the GME Office and any rights to enter data into particular fields is up to the discretion of the GME Office.

Program Settings

For particular functionality such as scheduling, evaluations, procedures, conferences, etc., administrators can enable particular settings that are pertinent for the program. These are options the administrator can choose to turn on or off based on the needs of the program. Each functionality has its own list of settings or options.

Resident Dashboards

Administrators can create and generate particular dashboard reports on resident or fellow information. These dashboard reports combine various data elements into one report of a given resident or fellow. The administrator can also automatically generate these reports so the Program Director receives these reports on a regular basis.

Sites/Funding

This link provides the administrator a listing of sites associated with his/her training programs. Any sites that are not listed can be requested by the administrator. The request is sent to the GME Office for approval and addition to the institutional site list. Administrators will also be able to view how their trainees are funded by particular funding sources.

Task Wizards

Administrators have the ability to run particular task wizards that will help them populate information between each academic year. The GME Office determines the task wizards available to programs based on institutional process, but the common task wizard's programs may have access are:

- New schedule wizard
- Schedule population wizard
- Resident promotion/advancement wizard
- Resident termination/graduation wizard
- ERAS import wizard
- Demographic batch import wizard
- Resident to Faculty Transition wizard
- Conferences Import wizard
- Procedure Clean-Up wizard

Trainee Job Descriptions

If enabled by the GME Office, administrators can create job descriptions pertinent for each PGY level. This provides the institution the ability to understand and review the responsibilities of each PGY level, including particular supervision levels.

Newsfeed Channels/Other Dashboards

MedHub users have the ability to add particular newsfeed channels and program dashboard channels pertaining to evaluation completion summary, duty hour week submissions from the prior week, and resident absences for the week. MedHub provides users many news channel options that the user can opt to view on his/her home page as well as remove when needed. This is different than creating portal channels that are locked to users and not able to be removed from the user's home page.

Trainee & Faculty Demographics

Trainee (Resident/Fellow) Demographics

In most MedHub deployments, trainees will already be present in the training program. Any trainees that will need to be added should be provided to the GME Office. Essential information needed for GME to add is:

- First and last name of trainee
- PGY level
- Program name
- Anticipated start date
- Projected end date

Please note that the term "resident" is used throughout MedHub and encompasses all trainees within the system, this includes fellows. The training history of the resident or fellow will indicate the trainee type (i.e. resident, fellow, etc.).

To find a particular trainee:

1. Select a trainee from the "Residents" drop down list found on the MedHub portal page (i.e. Home tab).

User Management	~
Residents:	
(select resident)	Q
Faculty:	
(select faculty)	Q
<u> </u>	

2. The first page of the trainee's profile is a summary of the trainee's current information.

Resident: America, Captain (1)

Resident Summary	Resident Summar	ry		
Demographics	Name:	Captain America	Г	
Visa/Immigration				
Contact Information	Trainee Type: PGY:	Resident (effective 7/1/2016)		
Education	Status:	Active PREVIEW start date: 7/1/2016		
Certifications		Program start date: 7/1/2016		NO PHOTO
Test Scores	Department:	Internal Medicine - Primary Care		
Compliance	Program:	Internal Medicine - Primary Care		
Training History	Password Sent / Retrieve	ed: (none)		
Verification (PSV)		Last Updated:9/9/2016		
Funding				
Forms/Files				
Office Awards & Disciplinary Action				
Orientation				
Comments				
Alumni				
C Reset Password				

If a trainee has forgotten his/her password, the administrator can send him/her an e-mail by selecting the "reset password" link located in the lower left hand side of their profile.

Trainee Demographic Data Validation

To confirm that each trainee has the correct information, review the following trainee demographic data:

- 1. The correct trainees are listed in the training program (located by the drop down in the upper right of the demographic profile).
- 2. There are no trainees missing from the training program.
- 3. Trainees are at their correct PGY level (located on the summary tab or on the training history tab).
- 4. The start and end dates of the current PGY level are correct (located on the training history tab).

If any trainees are missing or any demographic information needs to be modified, including their training history information, please contact the GME Office.

To review and/or add particular personnel information of the trainee, select the links on the left hand side of the trainee's demographic profile. Important tabs to review:

1. <u>Demographics</u> – This tab provides basic demographic information of the trainee. Some fields will have write access and some fields will only have read-only access. Contact the GME Office if any fields that are read-only need to be modified.

Resident: America, Captain (1)				Save
Resident Summary	Demographics			
Demographics	Full Name:	Captain America		
Visa/Immigration		∂ ′Edit Name	Lupload	
Contact Information	Pref. or Nickname:		NO PHOTO	
Education	Username *:			
Certifications	Username :	tmpameric46	Access:	<u> </u>
Test Scores	SSN *:		Practitioner ID:	(no data)
Compliance		Canadian		
Training History	Place of Birth *:	White Plains, NY	Date of Birth *:	01/27/1988
Verification (PSV)	Gender:	Male •		
Funding	Ctry. of Citizenship:	United States		
Forms/Files	Ethnic Origin:	Not Specified		
Office Awards & Disciplinary Action				
Orientation	Benefits:	Yes •	Parking Form:	Yes T
Comments	Data Coll. Form:	Yes •	Empl. ID *:	
Alumni	Temp. SSN *:		NPI*:	
♣ <u>New Resident</u> © Reset Password	Marital Status:	Single		

2. <u>Contact Info</u> – This tab provides essential contact information of the trainee. Any read-only fields will need to be modified by GME.

Resident: America, Captain (1)				
Resident Summary	Contact Information	n		
Demographics	Email Address *:	test@medhub.com		
Visa/Immigration	Email (secondary) *:	test@medhub.com		
Contact Information	Pager *:			
Education	Home Phone *:			
Certifications	Work Phone *:			
Test Scores	Cell Phone *:			
Compliance	Pref. Contact:	Email		
Training History				
Verification (PSV)	Address #1 *:	3515 Broad Street	State *:	Michigan
Funding	Address #2 *:		Zipcode *:	48130
Forms/Files	City *:	Dexter		
Office Awards & Disciplinary Action	Country *:	United States	Last Updated *:	
Orientation	Address #1 *:		State *:	
Comments	Address #1 :		Zipcode *:	
Alumni	City *:		Zipcode :	
L+ New Resident	City :			
2 Reset Password	Country *:			

3. <u>Education</u> – This tab provides a history of past educational institutions from undergraduate through medical or dental school. Any read-only fields will need to be modified by the GME Office.

Resident Summary	Education
Demographics	Medical/Dental School:
Visa/Immigration	School Name : WA - Obsolete - Use Code 82050 (Un of Washington) (80096) • + Add School to List
Contact Information	Degree : M.D. • +Add Degree Type Graduated: Yes •
Education	Attended*: 07/01/2002 🛗 to 05/0/2010 🛗 (MM//DD/YYYY)
Certifications	to 05/0/2010
Test Scores	Graduate School:
Compliance	School Name : +Add School to List
Training History	Degree [*] : • Graduated: •
Verification (PSV)	Attended": (MM//DD//YYYY)
Funding	
Forms/Files	Undergraduate School:
Office Awards & Disciplinary Action	School Name : +Add School to List
Orientation	Degree : - +Add Degree Type Graduated: - •
Comments	Attended*: (MM/DD/YYYY)
Alumni	
<mark>& New Resident.</mark> ≎Reset Password	Education Comments:

Save

4. <u>Certifications</u> – This tab provides a listing of various certifications completed by the trainee. Any read-only fields will need to be modified by the GME Office. If any program-specific certification fields need to be added, contact MedHub support.

Resident: America, Captain (1)						
Resident Summary	Certifications					
Demographics	License:	License #:* Issued:	Expires:	Type:*	State:*	
Visa/Immigration						
Contact Information	DEA:	License #:	Issued:	Expires:		
Education	Hospital DEA:	License #:	Issued:	Expires:		
Certifications	Controlled Subst.:	License #:	Expires:			
Test Scores	ECFMG:	License #:	Issued:	Expires:		
Compliance	ACLS:	Course:	Expires:			
Training History	ACLSI:	Course:	Expires:			
Verification (PSV)	CPR/BLS:	Issue Date:	Expires:			
Funding	ATLS:	Course:	Expires:			
Forms/Files	NALS:	Issue Date:	Expires:			
Office Awards & Disciplinary Action		Issue Date:	Expires:			
Orientation	PECOS:	Effective Date: (no data)	Enrolled: (no data)			
Comments	ORP:	Enrollment #:				
Alumni	AOA Membership: NOTE: all expiration a	Member #: (no data) nd issue dates must be of the form (MM/DI	D/YYYY)			
H-New Resident		× ·	. ,			
3 Reset Password	Certifications Cor	nments:				

5. <u>Test Scores</u> – This tab provides a method to maintain particular test scores of each trainee for reporting purposes. If any program-specific test fields need to be added, contact MedHub support.
Resident: [America, Captain (1)]

Contact Information	USMILE Step 2 US:	3-Digit:	2-Digit:	Issue Date:	Examinee ID:
Education	USMLE Step 2 CK:	<u>*</u>			
		3-Digit:	2-Digit:	Test Date:	Examinee ID:
Certifications	USMLE Step 3:	Step 1:	Step 2:	Step 2 (PE):	Step 3:
Test Scores	COMLEX:	<u>*</u>			
TEST GOOLES	COMPEX.	Percentile:	Year:		
Compliance	In-Service Exam (1):	▲ Percentile:	Year:		
Training History			real.		
Training History	In-Service Exam (2):	Percentile:	Year:		
Verification (PSV)	In-Service Exam (3):	<u>+</u>			
		Percentile:	Year:		
Funding	In-Service Exam (4):	± Percentile:	Year:		
Forms/Files	In-Service Exam (5):	<u>+</u>			
Office Awards & Disciplinary Action	In-Service Exam (5):	Percentile:	Year:		
Office Awards & Disciplinary Action	In-Service Exam (6):	Percentile:	Year:		
Orientation		Percentile.	Teal.		
	In-Service Exam (7):	Percentile:	Year:		
Comments	In-Service Exam (8):	<u>.</u>			
Alumni		Score:			
	Sam Test:	<u>*</u>			
C Reset Password	NOTE: all expiration and	d issue dates must b	be of the form (MM/DD/	YYYY)	
	Test Scores Commen	its:			

6. <u>Training History</u> – This tab provides a history of post graduate training and other post-medical school events of each trainee.

Resident: America, Captain (1)							
Resident Summary	Training History						
Demographics	Post Graduate Histor	y.					
Visa/Immigration	Projected End Date:	06/30/2017	IRP Lir	nit Date:	(no data)		
Contact Information	Termination Date:	(no data)	Orienta	ation Date:	(no data)		
Education	Projected Start Date:	07/01/2016	Alumn	i:	(no data)		
Certifications	Post Training:	Faculty	Other *	1			
Test Scores							
Compliance	Training History Comme	ents:					
Training History							
Verification (PSV)							13
Funding							
Forms/Files	medhub		Home Schedules <u>Procedures</u> <u>Evaluat</u> Copyright © 2002-2016 MedHub, Inc All Rig				
Office Awards & Disciplinary Action	Туре:	Location/Specialty:	Funding:	Contract:	Start Date:	End Date:	Actions:
Orientation		Demo HealthCare System Internal Medicine - Primary Care Res. Code: 1400		Unapproved Rate: 7/1-1 <u>Contract</u>	07/01/2016	07/05/2017	
Comments		Internal/External Moonlighting: (0 hrs/wk)					
Alumni		LOA - Paternity Leave (paid) (pending) (31 days - 5 day training ext.)		08/01/2016	08/31/2016		
Treset Password		Unpaid Date Period	08/16/2016	08/31/2016			

7. <u>Forms/Files</u> – This tab provides both programs and GME avenues to add specific files for an individual trainee where any documentation can be kept under his/her on-line demographic profile. Both the program and the GME Office can determine if the document should be shared with the trainee.

Resident: America, Captain (1)							
Resident Summary	Forms/Files						
Demographics	Resident Files						
Visa/Immigration	File Name:				Share w/ Mentor:		
Contact Information	D Batch Folder		0 files			 	
Education	C <u>CCC/Feedback.</u>		0 files				
Certifications	D <u>cv</u>		0 files			𝖋 Modify Folder	
Test Scores	C <u>EVALUATIONS</u>		0 files				
Compliance	C <u>IM Primary</u>		0 files				
Training History	Cinstitution-Wide Folder		0 files				
Verification (PSV)	C <u>Test Folder 1</u>		0 files			 	
Funding	+ Upload File + Add Program-wide Folder	+ Add Trainee-Specific Fo	older 🛛 Search All F	iles			
Forms/Files	General Forms						
Office Awards & Disciplinary Action	Form Name:		Type: PDF		Last Printed By: (not printed)		
Orientation	Verification Letters				(int planted)		
Comments	Sent To: Sent Da	ate:	Form:		Last Printed:	Actions:	
Alumni	(none)						

Faculty demographics - Associating and/or Adding Faculty to the Training Program

Faculty should be included in the faculty pull down menu for the training program if:

- a. They regularly evaluate trainees in the training program.
- b. They need access to schedules, directories, procedure verifications, etc.
- c. They are a program director, associate program director or faculty mentor in the training program.

If none of the conditions above apply, but a faculty member who may not have an appointment with the institution occasionally evaluates the trainees, these can be added within the evaluation functionality as "outside evaluators".

To search for and associate existing faculty to the training program, follow these steps:

1. Select the magnifying glass icon to the right of the faculty pull-down menu from the Home page.

User Management	~
Residents:	
(select resident)	• Q
Faculty:	
(select faculty)	- Q
▲ <u>New Faculty Member</u>	

2. Type in the last name of the faculty member that should be associated with the training program and select <u>"search."</u>



Click on the "Add to..." link/button and the existing faculty member will be associated with the training
program and will appear in the faculty drop-down on the portal or home page.
 Search Results (5)

	- /		
	Default Program:		Actions:
Berger, Jamison	Geriatric Medicine	Active	
Berger, Katrina	Training Program 3	Active	Add to DERM
Berger, Kristofer	Ophthalmology	Inactive	
Berger, Sebastien	Training Program 2	Active	Add to DERM
Bergeron, Jewel	Medical School	Active	
New Faculty Member			

If the faculty member does not come up in the search, select the "New Faculty Member" button.

Administrators also have the option to add new faculty from the main portal page. This link can be found under the faculty pull-down menu.

User Management 🗸 🗸	
Residents:	
(select resident) • Q	
Faculty:	
(select faculty) • Q	
<u>New Faculty Member</u>	

Enter first name, last name, user name and email address of the faculty member. Select the Save button in the lower left corner to save this information.

Add New	Faculty	User
---------	---------	------

First Name:*	
Last Name:*	
Start Date:	
Username:*	Send password by email
Email Address:*	
	Save

The Faculty member will be added to the training program. Repeat this step, if necessary, until all faculty specific to that training program have been added to the faculty pull-down menu.

Removing a faculty member from the drop down list:

If there is a faculty member that needs to be removed from the drop down list because they are not a part of the training program, administrators have the ability to remove them from the list of faculty members.

1. Select the faculty member from the pull down menu that should be removed from the list of faculty members.

User Management	~
Residents:	
(select resident)	- Q
Faculty:	
(select faculty)	- a
✓ (select faculty)	
Anderson, Jill	
Anglin, Jamal	
Armstrong, Mandi	
Aylward, Mike	
Bacon, Terry	
Barker, Gustavo	
Barnhart, Cole	
Dana Ulumbanka	

2. Click on the Programs/Services tab from the faculty profile.

Faculty Member: Bacon, Terry	T		
Faculty Information	First Name *:	Terry	
Programs/Services	Last Name *:	Bacon	NO PHOTO
Forms/Files	Suffix *:		Photo:
Schedule	Salutation:	Dr. 🔻	Upload
& New Faculty Member	Title:		Signature:
<u>Archive Faculty Member</u> <u> CReset Password</u>	Specialty:		Upload
	University ID:]
	Password Sent:	2/25/2014 09:07am (EST)	

3. Select the "Add/Modify Programs" button.

Faculty Member: Bacon, Terry	•
Faculty Information	Programs:
Programs/Services	Internal Medicine - Primary Care [default]
Forms/Files	✦Add/Modify Programs
Schedule	Service Groups:
Ar New Faculty Member CReset Password	Internal Medicine - Primary Care AMB - Optimus Brdgpt AMB-1 AMB-Alleray-E

4. Uncheck the program the faculty should be removed from and click on Save.

Faculty Member: Bacon, Terry	•
Faculty Information	Programs:
Programs/Services	Anesthesiology
Forms/Files	Ambulatory Anesthesia
Schedule	Anesthesia Patient Quality and Safety Fellowship Bi Coastal Anesthesia

Please note that at least 1 program MUST be checked for each faculty member.

If a faculty member is no longer with the institution, administrators can remove the faculty member's access from MedHub as well as his/her active status and archive them if wanted.

1. From the faculty member's faculty information tab, uncheck the "Active" and/or "Access" checkbox and select Save.

Username *:	Terry.Bacon]	Active:	•
Employee ID *:]	Access:	
Staff Type:]	Review Qtr*:	(none)

Unchecking the "Active" checkbox will gray out the name of the faculty member in the drop down list in case the administrator still may need to access the faculty member's profile. Unchecking the "Access" checkbox does not allow the faculty member to access MedHub any longer.

Faculty Member: Bacon, Terry	•
Faculty Information	First Name *:
Programs/Services	Last Name *:
Forms/Files	Suffix *:
Schedule	Salutation:
Let <u>New Faculty Member</u>	Title:
<u>Archive Faculty Member</u> <u> Reset Password</u>	Specialty:
	University ID:

To archive a faculty member, once the "active" and "access" boxes have been unchecked, a link to "archive faculty" will appear. When you select this link, you will be given an opportunity to confirm that you would like the faculty profile to be archived. You will select "yes" and your faculty members profile will be archived.

Administrators also have the ability to send faculty a "reset password" e-mail in case a faculty member has forgotten his/her password. This is located in the bottom left hand side of the faculty profile.

Faculty Member: Bacon, Terry	
Faculty Information	First Name *:
Programs/Services	Last Name *:
Forms/Files	Suffix *:
Schedule	Salutation:
&+ New Faculty Member	Title:
<u>Archive Faculty Member</u> <u>Reset Password</u>	Specialty:
	University ID:

Schedule Management

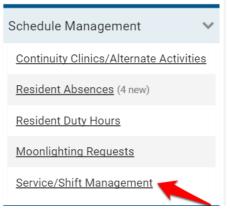
There are five steps to build a master rotation schedule in MedHub:

- 1. Defining rotations and/or services
- 2. Defining continuity clinics/alternate activities
- 3. Recording resident absences (i.e. vacation, sick time, away conferences, other leaves of absence.)
- 4. Creating shifts and calls/defining service-based clinics
- 5. Populating the master rotation schedule with these kinds of activities and services

Defining Rotation and/or Services:

Services in MedHub are defined as the activities that a trainee is scheduled to for days at a time. Programs often call services "rotations". Trainees should be scheduled to services every day of their active training, including vacation days.

1. From the main MedHub portal page {Home}, select the "Services/Shift Management" link under the Schedule Management section.



2. Select the "Add Service" button for the appropriate academic year. Service Management

Services	Service Groups	Shifts/Calls
Click on a service below to	modify its settings. You ca	n change its order on the ro
Academic Year:	Schedule:	
July 1, 2018 - June 30, 201 Service:	19 ▼ IM-Primary ▼ Site(s):	
(none)		
+ Add Service ↓ ^A ₂ Re	eorder Alphabetically	

- 3. Enter the following information for the rotation and/or service:
 - Service name
 - Service abbreviation
 - Service group (leave as "create new group" unless you have a split schedule.)
 - Service type select appropriate patient care type. If unsure, select "Patient Care-Mixed/Other."
 - Trainees per rotation (identifies the number of trainees that normally rotate on this service at the same time)
 - Primary site select appropriate location for this rotation
 - Scheduling method (leave as "standard")
 - Select the "Submit" button
 - Repeat this process for each rotation/service as this will create a list of rotations/services that will populate the master rotation schedule.

<u>łome</u> » <u>Services</u> » New	Service
New Service	
Academic Year:	July 1, 2018 - June 30, 2019
Service Name:*	
Abbreviation:*	
Service Group:*	(create new group)
Service Type:*	Patient Care - Mixed/Other 🔻 🛛
Cost Center:	
Trainees per Rotation:	(undefined) 🔻 🛛
Primary Site:* [<u>multiple sites</u>]	6 Million Dollar Man Medical Rehabilitation Center 🔻 🛛
Scheduling Method:*	Standard 🔻 🖸
Activity Description:	

(optional - for audit)

Submit

Defining Continuity Clinics and Alternate Activities:

A Continuity clinic is defined in MedHub as a regularly occurring activity – usually a half day – where the same trainee is expected to go to that activity for a contiguous period of time. The activity <u>may not</u> occur every day during the rotation period, but intermittently on a regular basis for the same trainee. <u>This kind of activity is not necessarily</u> <u>directly associated with a rotation or service.</u> To define and schedule a trainee to these clinics or activities:

1. Select Continuity Clinics/Alternate Activities link from the MedHub portal page (Home) under the Schedule Management section.



2. Define and/or review clinic work periods by selecting the "Define Clinic Work Periods" link. Continuity Clinics/Alternate Activities

Clinic Definitions	View by Resident	View by Faculty	View by Clinic
ol: : (A .: : D	c		
Clinic/Activity De	ennitions		
Clinic/Activity:			Clinic Functions
(no clinics defined)			Define Clinic Work Periods
Add Clinic/Activity Def	inition		Clinic Reports
			Clinic Summary

a. There is a list of default clinic work periods already available. However, administrators can add more clinic work periods if needed. To create additional work periods, select the "Add CC/AA Work Period."

Work Periods

Work Period:	Times:	Hours:	Status:
AM	8:00am-12:00pm	4.0	Active
AM/PM	8:00am-5:00pm	9.0	Active
<u>PM</u>	1:00pm-5:00pm	4.0	Active
Add CC/AA Work I	Period		

3. To define the continuity clinic/alternate activity information, select the "Add Clinic/Activity Definition" button.

Continuity Clinics/Alternate Activities

Clinic Definitions	View by Resident	View by Faculty	View by Clinic
Clinic/Activity De	efinitions		
Clinic/Activity:	Site:	Status:	Clinic Functions
(no clinics defined)			Define Clinic Work Periods
Add Clinic/Activity Def	inition		Clinic Reports
			Clinic Summary

- 4. Enter the following information of the continuity clinic or alternate activity:
 - Name of the clinic or activity
 - Abbreviation
 - Site location of the clinic or activity
 - Resident Slots identifies the number of trainees that rotate at this clinic or activity
 - Faculty Slots if the program chooses to schedule faculty clinics, this identifies the number of faculty that are scheduled to this clinic or activity
 - Select "Submit"
 - Repeat this process for each continuity clinic/alternate activity as this will create a list of clinics/activities

Add Clinic/Activity Definition

Active •
6 Million Dollar Man Medical Rehabilitation Center 🔻
1 •
(none) 🔻
(none) 🔻
Submit

5. Schedule trainees to a continuity clinic or activity by selecting the "View by Resident" tab.

Clinic Definitions	View by Resident	View by Fac	ulty	Viev	v by Clinic	
linic/Activity De	finitions					
Clinic/Activity:	Site:		Statu	s:	Clinic Functi	ons
Away Elective	Elective	- Away	Active	2	Define Clinic Wo	ork Period
Bridgeport Hospital	Bridger	ort Hospital	Active	e	Clinic Report	s
BH Activity	Appoin	tment Complete	Active	è	Clinic Summary	
ost Call Day - Norwal	<u>k Hospital</u> Norwal	k Hospital	Active	9		
Fraining - Norwalk Ho	spital Norwal	k Hospital	Active			

6. Select the appropriate trainee to be scheduled to this clinic or activity for the correct academic year.



7. Click on the "Add Clinic/Activity" button.

Clinic Definitions	View by Resident	View by Facult	y View b	y Clinic	
esident: America, C.	(1)	7/1/2016-6/30/2017	•		
Add Clinic/Activity					
<u>Date:</u> <u>Clinic/Activit</u> y	<u>r: Site: Period:</u>	<u>Hours:</u> <u>Status:</u>	<u>Pre-Populate:</u>	Actions:	
(none)					

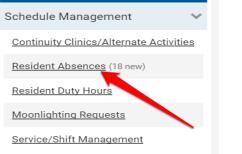
- 8. To add a clinic or activity for a particular trainee:
 - Select either the *single clinic* or *multiple clinic* options.
 - Select the clinic or activity to be assigned to this trainee.
 - Identify a date range that this particular trainee will be scheduled to this clinic or activity (i.e. 1 month, all year, etc.).
 - Select the appropriate clinic work period for this clinic or activity.
 - Opt to pre-populate the trainee's duty hour time sheet with these hours.
 - Identify the day of the week this trainee will be scheduled to this clinic or activity.
 - Identify how often this trainee will be scheduled to this clinic or activity.
 - Save by selecting the "Submit" button.
 - Repeat the process for the remaining trainees who also have clinics or such activities.
 - Once all clinics have been added for each trainee, this will automatically populate the master rotation schedule (View "by resident-details") as well as their individual schedule.

Add Clinic/Activity

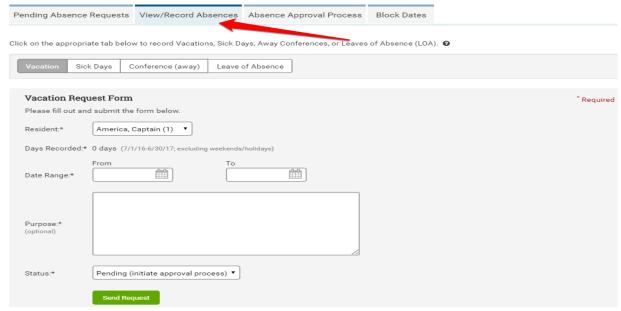
Resident: Academic Year: Method:	Dr. America, Captain July 1, 2016 - June 30, 2017 Multiple Clinics Single Clinic
Add Multiple C	linics
Clinic/Activity:*	Chase Clinic •
Date Range:*	From: To: (MM/DD/YYYY) (MM/DD/YYYY)
Period:*	ICU W AM (12:00am-10:00am)
Status:*	Pre-populate duty hours
Day of Week:*	Sunday Monday Tuesday Wednesday Thursday Friday Saturday Shift/Ctrl to select multiple
	Submit

Recording Trainee Absences:

- Absences in MedHub include vacations, sick days, away conferences, and various leaves of absence (LOA).
 - 1. From the main MedHub portal page, select "Resident Absences."



2. Select the "View/Record Absences" tab.

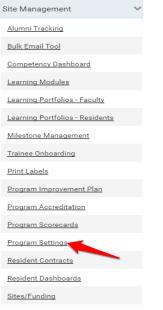


- 3. Identify the type of absence to be recorded by selecting one of the tabs and ensuring the appropriate trainee is selected.
 - Select the date(s) for the absence.
 - Define the purpose for the absence (if needed).
 - Change the status from Pending to Approved (by program).
 - Select "Send Request" button.
 - Repeat same steps for additional absences for all trainees.
 - Once all absences have been added for each trainee, this will automatically populate the master rotation schedule.

Vacation Sid	k Days Conference (away) Leave of Absence
Vacation Red	guest Form
Please fill out ar	nd submit the form below.
Resident:*	
Days Recorded:*	• 5 days (7/1/16-6/30/17)
Date Range:*	From To
Purpose:* (optional)	
Status:*	Pending (initiate approval process)
	 ✓ Pending (initiate approval process) Approved (by program) Reject Request

The program can opt to use MedHub as their absence approval work flow process where the trainee can request absences using this system.

1. To enable this option, select the "Program Settings" link from the portal page under the Site Management section.



2. Select the "Schedules" tab and find the option, "Allow Residents to Request Absences." This should already be turned on by default. If the program chooses not to use MedHub's absence request workflow, uncheck the setting and save.

General Schedules Procedure	es Evaluations Conferences	Duty Hours Custom Alerts
Schedule Settings		
Email Residents Service Curriculum Objectives:	(do not email objectives) 🔹 🛛	
Email Residents Clinic Curriculum Objectives:	(do not email objectives) 🔹 🛛	
Deliver Curriculum Objectives:	For all assigned services •	
Faculty Scheduling:	<mark>~</mark> 0	
Display Faculty in Weekly Activity View:		
Email Admin when Releasing Resident:	•	
Enable Team-based Functions:	0	
Populate Service-based Clinics/Shifts:	7 Day(s) before Rotation 🔹	
Track Clinics for Visiting Residents:	<mark>~</mark> 0	
Track Clinics (individual) for Faculty:	<mark>~</mark> 0	
Schedule Interfaces		
Schedule Interfaces Enable Amion Interface:	(logon)	Ø
	(logon)	
Enable Amion Interface:		Ø
Enable Amion Interface:		
Enable Amion Interface:	(site)	
Enable Amion Interface:	(site) (user login) (api key)	
Enable Amion Interface:	(site) (user login) (api key)	
Enable Amion Interface: Enable OpenTempo Interface:	(site) (user login) (api key)	•
Enable Amion Interface: Enable OpenTempo Interface:	(site) (user login) (api key) •	• • • • • • • •
Enable Amion Interface: Enable OpenTempo Interface: Enable QGenda Interface:	(site) (user login) (api key) (company key)	
Enable Amion Interface: Enable OpenTempo Interface: Enable QGenda Interface: Enable ShiftAdmin Interface:	(site) (user login) (api key) (company key) (company key)	0
Enable Amion Interface: Enable OpenTempo Interface: Enable QGenda Interface: Enable ShiftAdmin Interface:	(site) (user login) (api key) (company key) (company key)	0

3. Once this is enabled, trainees will be provided a link on their MedHub home page to request any scheduled absences. To set up an absence approval process for the training program, return to the "Resident Absences" link from the portal page and select the "Absence Approval Process" tab.

Absence Requests

Pending Absence Requests	View/Record Absences	Absence Approval Process
<u>Vacation Requests</u> (1 new) <u>Sick Day Requests</u> (0 new)	<u>Away Conferen</u> Leave of Absen	ce Requests (5 new) ice Requests (12 new)

4. The current default set-up flows from the trainee to the program administrator. However, administrators can define other individual who need to participate in the approval process. For vacation approvals, the administrator can select the "add step" button to include those individuals that need to approve such requests.

Vacation App	roval Process
1. Request i	nitiated by Resident
2. Request p	processed by Program Coordinator
Add Step	

5. The administrator selects the individual(s) that need to approve the request.

Vacation Approval Process
1. Request initiated by Resident
2. Then, approved by
One/Any of the following 🔻
Chief Resident(s) Program Director Service Head(s)
Submit
3. Request processed by Program Coordinator
Add Step

6. The administrator can determine, in sequential order, which individual(s) need to approve first before the request flows to the next individual(s). Each "add step" indicates the flow of the approval process.

Vacation Approval Process	
1. Request initiated by Resident	
2. Then, approved by Chief Resident(s)	remove
3. Then, approved by Program Director	remove
4. Request processed by Program Coor	dinator

Add Step

Those individuals selected to receive absence request notifications (i.e. chiefs, program directors, service heads) will receive an e-mail notifying them they've received an absence request. They will also see this same alert on their MedHub portal page under Urgent Tasks.

This same process can be followed for away conference approvals as well.

Creating Shifts and Calls:

A Shift and/or call is defined in MedHub as a regularly occurring activity where a *different* trainee could be expected to go to that activity over a contiguous period of time. The shift and/or call is consistent, but the trainee is not. To define these shifts or calls:

1. From the main MedHub portal page (Home), select the "Service/Shift Management" link under the Schedule Management section and then select one of the rotations or services that was previously created.

Academic Year: July 1, 2016 - June 30, 2017 ▼	Schedule:	
Service:		Site(s):
Barium Service YNHH		Yale New Haven Hospital
Body CT - YNHH		Yale New Haven Hospital
Body MR		Yale New Haven Hospital

- 2. Once a service or rotation is created, shifts and calls can be defined for that particular rotation A shift/call can be shared with one or more specific rotation(s) or for all rotations occurring in the program. From the update service page, there are three types of shifts/calls in MedHub:
 - **Standard service hours** this is usually a shift that occurs every weekday during the same times (example: Monday Friday 8:00a 5:00p). To set standard rotation or service hours, select the gray "Standard Services Hours" and complete the following:
 - Ensure the Shift Status is "Active."
 - Opt to pre-populate the trainee's duty hour timesheet with the standard service hours.
 - \circ $\;$ Select the start time and end time of a standard work day for that rotation or service.
 - Select days of the week.
 - Opt to reproduce these same standard service hours across all other rotations or service that have been created and do not already have standard service hours.

Shift Name:	Туре		Users:	Shift Period:	Orde
[Standard Service Hours]	0 (d	efault)	Residents	(inactive)	
KBH Weekend Shift/Call	Shift/	Call	Res/Fac	(varies)	
+ Add Shift/Call					
	0 T				
	ft Type:* ft Status:*	Active	d Shift Hours ▼		
	ty Hours:*	(none)		• Ø	
Du	ty Hours."	(none)			
Pri	mary Worl	k Period:	0		
Sta	irt Time:	8:00am	•		
En	d Time:	5:00pm	•		
Da	ys:		nday		
			nday		
			esday		
			dnesday		
		C Thu	ursday		
		🔽 Frie	day		
		Sat	turday		
Not	e: At least o	ne day is re	equired with a shi	ft time of at least 1/2	hour.
Op	tions:	Pro	pagate across	all services with und	defined

- **On-site shift/call** An on-site shift/call is where the trainee is expected to be in the hospital for a specified period of time.
 - Select the "Add Shift/Call" link located under the Standard Service Hours link. Shifts/Calls

Shift Name:	Туре:	Users:	Shift Period:	Order:
[Standard Service Hours]	(default)	Residents	(inactive)	
KBH Weekend Shift/Call	Shift/Call	Res/Fac	(varies)	
+ Add Shift/Call				

• Select the on-site shift/call option to create certain shifts for the rotations/services or to create an in-house call. Click "Submit."

Add Shift/Call			
Shift/Call Type:	On-site Shift/Call 🔻	Submit	

- Define the particular shift or in-house call by:
 - Creating a shift/call name
 - Creating an abbreviation for this shift/call
 - Define the number of trainee slots number of trainees that are on this shift/call at a given time
 - Defining faculty slots (optional) number of faculty that are on this shift/call at a given time
 - Choose the appropriate site where this shift/call occurs
 - Opt to pre-populate duty hours on the trainee's duty hour time sheet
 - Opt to share this same shift or call with other rotations/services
 - Define the primary work period for this shift/call, including days of the week this shift/call occurs (note: a time with the (+1) designation means the shift/call time begins on one day and ends the next day)
 - Select "Submit."

Shift Name:*	OB Long Call	Primary Work Period: 😡
Abbreviation:*	OBLC	Start Time: 8:00am 🔻
Resident Slots:*		End Time: 5:00pm
aculty Slots:*		Da Sunday
Student Slots:*		Monday
Site(s):*	6 Million Dollar Man Medical Rehabilitation Center 💙 9	Tuesday
	6 Million Dollar Man Medical Rehabilitation Center 🔻 🗹	Vednesda
	[select multiple]	Thursday
Shift/Call-Specific Pager:	Use specific number:	Friday
Shine Gall-Specific Fager.		Saturday
Autogeneration:*	None Populate weekends	Note: At least one day is required a the shift time must be at least 1/2 h
Call:*	Call (notify paging) 🔻	
Duty Hours:*	Populate Duty Hours 🔻	
Date Period:	Entire Academic Year	
	Start Date: End Date:	
	n/a (MM/DD/YYYY)	

• **Home call** – Home call is used when a trainee is <u>NOT</u> expected to be at the hospital unless he/she is called in. The only difference between creating a home call and the on-site shift/call above is that their duty hours cannot be pre populated because it's difficult to determine if the trainee will be called into the hospital. Follow the same steps above to add home call, however, select "home call" in the drop-down when adding a shift/call type and submit.

Shift/Call Type: Home Call ▼ Submit	Add Shift/Call			
	Shift/Call Type:	Home Call	•	Submit

Defining Service-Based Clinics:

In addition to creating shifts/calls for a particular service or rotation, programs can also define clinics that are associated with a particular service and only occur while a trainee is rotating on that service.

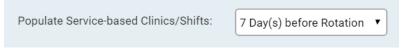
1. From the service's "update service" page, locate the "Add Clinic" link found just under the shifts/calls.

Clinics 😧			
Clinic:	Period:	Day(s):	
(none)			
+ Add Clinic			

2. Select the clinic that is associated with the service and identify the days of the week and the work period (i.e., AM, PM, etc.) the clinic occurs. Submit.

Clinic*:	Away Elective 💦 🔻
Trainees*:	In-House House Staff
	Rotators
	Visiting Resident
Period/Days* (one required)	* AM • PM • •
	Sunday Sunday Sunday
	Monday Monday Monday
/~	Tuesday Tuesday Tuesday
	Wednesday Wednesday Wednesday
	Thursday Thursday Thursday
	Friday Friday Friday
	Saturday Saturday Saturday

3. Once submitted, this tells MedHub that whenever a trainee is scheduled to a particular service, a defined number of days before the service begins, the trainee will be automatically scheduled to the clinic. To determine when the trainee should be scheduled to service based clinics, the setting can be enabled under Program Settings, "Schedule" tab.



Populating the Master Rotation Schedule:

Once all of the rotations/services, clinics, shifts/calls, and absences are defined, the administrator can populate the master rotation schedule.

1. Select the "Schedules" tab found on the top navigation menu from the MedHub portal page (Home).

A Home	Residents >	Faculty >	Schedules >	Procedures
				Di

2. Ensure the "By Resident" view of the rotation schedule is selected.



3. Click on the pencil in the corner of any rotation period. This will bring up a number of drop downs where the particular rotation/service and the start and end dates of those activities can be chosen.



4. Select the rotation/service and a date range when a specific trainee is on a particular rotation/service. If the trainee is scheduled to multiple services within the same rotation block, the administrator can choose the start and end date of each service within the rotation block. If two or more services overlap and both services occur simultaneously, the administrator will need to select the checkbox with a "P" to indicates the primary service. **The "P" ONLY needs to be selected IF the services occur at the same time during the rotation block period.**

	Augu		
Service:*	Start:*	End:*	P:
Body MRI - Research Elective	8/01 🔻	8/15 🔻	
Diagnostic Radiology Elective	8/01 •	8/15 🔹	×
Bone - Musculoskeletal Plain Films - YNHH 🔻	8/16 🔻	8/31 •	•
(none) •	8/01 •	8/31 •	•
	Subr	nit	

5. Repeat until all activities on the rotation schedule have been populated for the entire academic year. If the program has trainees who rotate to other programs the administrator can "release" the trainees to the programs that own the services or rotations where their trainees will rotate. This prevents duplication of rotations/services across the institution. There are 3 questions to consider to help determine if a trainee should be released to another program:

- Who/which program maintains the call schedule of the trainees on that service or rotation?
- Whose/which program's core faculty is staffing/supervising trainees on that service or rotation?
- Who's delivering the evaluations to those faculty of that service or rotation?

To release a trainee to another program:

1. Click on the pencil in the corner of that particular rotation period.



2. From the bottom of the rotation/service pull-down menu, select "Release to another Program."

Service:*	Start:*	End:*
(none)	9/21 -	10/18 -
✓ (none) Autopsy Cytopathology >> Release to another Program		10/18 -

3. Select the training program in which the trainee will be rotating.

(select program) Anesthesiology		End:*
- Adult Cardiothoracic Anesthesiology		
- Ambulatory Anesthesia		
 Anesthesia Patient Quality and Safety Fellowship Bi Coastal Anesthesia 		
- Critical Care Anesthesiology		
- Obstetrical Anesthesiology		
- Pain Medicine	-	10/18
- Pediatric Anesthesiology	_	
- School of Medical Learning		
- Internal Medicine Clerkship	-	10/18
Bionic Institute of Neuromuscular Medicine (BINM)		
Child & Adult Psychiatry		
Coordinator Training		
- Training Program 1	-	10/18
- Training Program 10	_	
- Training Program 11		
- Training Program 12		10/18
- Training Program 13		10/18
- Training Program 14		
- Training Program 15		
	•	
	2	

4. The administrator can either select the rotation/service the trainee will be rotating in that program or the administrator can choose to have the program administrator from the other program schedule the trainee to that rotation/service.

Select Service:		
(select service)	9/21 -	10/18 -
✓ (select service) ADULT CARDIOTHORACIC ANESTHESIOLOGY		
>> ANES-CARD's admin will schedule CARD Schedule		10/18 -
 Cardiac Anesthesiology OR Cardiac Cases OR-TPV Thoracic & Peripheral Vascular Cases Service Test A 	•	10/18 -

It's recommended to select "Admin will schedule," especially if the administrator does not know on which service the trainee will be rotating. The program administrator from the other program will receive an e-mail as well as an alert on his/her Home page to schedule a released trainee, assuming this is selected under Program Settings>Schedule Tab

5. If the administrator chooses to have the other program's administrator schedule his/her trainee and submits, the administrator will see a red RELEASE on the rotation schedule for that block period. This means that the trainee has been released to that program BUT is not yet scheduled to a rotation.



6. Once the program administrator from the other program has scheduled the trainee to one of their services, the service that is owned by the other program will appear in black on the schedule. This is how a program administrator will know if one of their trainees, who has been released to another program, has been scheduled to a rotation.

	July
Body CT	

Populating Shifts/Calls:

1. To schedule the appropriate shift and/or call for a trainee on a particular service/rotation, from the main rotation schedule select the particular rotation/service that has been scheduled for that trainee. This will take the program administrator to the shift/call schedule where the administrator can schedule trainees to those particular shifts and/or calls.



2. Locate the shift or call and select the trainee that will be assigned to this shift/call by choosing his/her name from a pull down menu. The number of pull downs is determined by the number of trainee slots that were entered when defining the shift/call. If the program has identified faculty slots when defining the shift/call, these will be indicated on the shift/call schedule in blue.

	SEPTEMBER 2016						
Sunday						Saturday	
				1	2 KBH ?.00am-4:00pm (none) (none) (none)	3 KH (100 <i>m</i> -4.00 <i>pm</i> (none) (none) (none)	

3. Select "submit" at the bottom of the shift/call schedule to save changes.

After populating the master rotation schedule by adding the rotations/services, assigning shifts/calls, and scheduling clinics, the administrator has identified where each trainee is working throughout the academic year. Activities identified in red are either absences or continuity clinics/alternate activities (CC/AA) which "trump" the primary rotation activity. To see this detail, make sure you are in the view "By Resident (Details)" or you can also view these activities in the individual schedules tab located at the top of the master rotation schedule view.

July	August	September	October	November	December
DERM CC/AA 7/4 (HS), 7/5 (CC), 7/6 (Mcgirt), 7/6 (Edwards), 7/7 (Edwards),	SMB CC/AA 8/16 (CC)	GI VAC <u>9/5, 9/15-9/16</u> CC/AA 9/1 (Liver), 9/6 (GI	SMA CC/AA 10/14 (CC), 10/24 (CC)	<i>€</i> ERIM ^P ED-Intern	<u>sme</u>
7/8 (CC), 7/12 (CC), 7/13 (Mcgirt), 7/15 (CC), 7/18 (CC), 7/19 (CC), 7/20 (Mcgirt), 7/22 (CC), 7/25 (CC), 7/26 (CC), 7/27 (Edwards), 7/27 (Mcgirt), 7/28 (Edwards), 7/29 (BLOCK)		Clinic), 9/7 (CC), 9/8 (Liver), 9/8 (SYM), 9/13 (Gl Clinic), 9/14 (CC), 9/20 (Gl Clinic), 9/21 (CC), 9/22 (Liver), 9/23 (BLOCK), 9/27 (Gl Clinic), 9/28 (CC), 9/29 (Liver)			

Verifying the Schedule has been Successfully Populated

After following all of the steps above and fully populating the schedule(s) with trainees, select the "Reports" tab from the MedHub portal page. Find the "Scheduling Reports" section and select the "Resident Scheduling Errors" report. This report will identify any gaps in the schedule or any overlaps of activities. If it is error-free, you have correctly assigned all trainees to an activity for their entire appointment of the academic year.



Schedule Lockout

On the 15^{th*} of each month, program administrators will be locked out of their schedules for the month prior. Administrators will receive an e-mail 7-10 days in advance of the 15th notifying them of the schedule lock-out so they may ensure that all scheduled activities and duty hours are up-to-date. If a program administrator does need to edit previous scheduling information and is locked out, the GME Office will need to be contacted to unlock prior rotations for any revisions.

*Note: Each GME office can elect to change the date of lock-out. Please contact your GME office for details on your institutions lock out period.

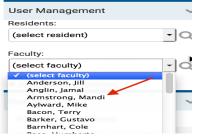
Faculty Scheduling

To ensure faculty are associated to activities for evaluation matching and delivery using the "by schedule" method, the administrator must assign faculty to these activities so MedHub can make those matches when delivering evaluations. There are a couple of methods administrators can choose to ensure the faculty member is scheduled appropriately:

- Service Group
- Individual Services

Scheduling to a Service Group

1. Select a faculty member from the faculty pull-down menu on the MedHub portal page (Home).



2. Click on the Programs/Services tab on the faculty's profile.

(Search Faculty

Service Groups:

(ocaron radary
Faculty Member: Anderson, Jill
Faculty Information
Programs/Services
Forms/Files
Schedule
New Faculty Member Carter Password

3. Select the services to which this faculty member is permanently assigned and therefore evaluates trainees that may rotate on to this service.

Internal Medicine - Primary Care	
AMB - Optimus Brdgpt	
AMB-1	
AMB-Allergy-E	
AMB-Backup	
AMB-McNair - Private Office-Wo	
AMB-Urgent Care NH	

4. If the faculty member is permanently assigned to this service, to view their permanent assignment on the master rotation schedule, select Program Settings from the home page and find the option, "Display Permanent Faculty Assignments" under the Schedules tab.



This setting will show any faculty members who are permanently assigned to a particular service (i.e. service group) during the academic year on the master rotation schedule, "Services (All)" view. Faculty appear in red.

Scheduling to Individual Services

2.

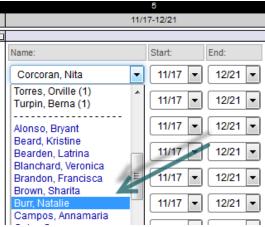
To schedule a faculty member directly to a particular service for a specified duration of time (especially if they are not permanently assigned to that service), the administrator can either schedule the faculty member into the rotation schedule or schedule him/her into a service or clinic directly from his/her faculty demographic profile.

1. To schedule a faculty member directly to the master rotation schedule, select the Schedules tab in the navigation bar and select the view type, "Services (All)."

4	Academic Year	\	/iew Type			
	July 1, 2016 - June 30, 2017 🔻		Resident	Resident (Details)	Service	Services (All)
Select the icon in the master rotation schedule that looks like a pencil.						

	September	
(none)	J PQ	

3. From the pull down menu, select the faculty member that will be on this particular rotation or service for a specified period of time. It may not always match the rotation block period. Faculty will appear in blue in the pull down list. Submit.



4. The faculty member will appear on the master rotation schedule "by service" for the specified period of time.

<u>Baird, B.</u> (10/20- 10/31)	đ
------------------------------------	---

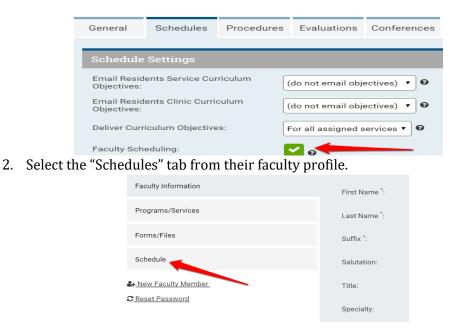
 The scheduled information on the master rotation schedule is also displayed on the schedule tab of the faculty member's demographic profile.
 Eaculty Schedule:

Academic Year: July 1, 2	2016 - June 30, 2017	V			
Service/Clinic Name:	Туре:	Start Date:	End Date:	Actions:	
Away-Union	Service	10/20/2016	10/31/2016	₩Modify	×Delete

Instead of scheduling the faculty member directly to the service on the master rotation schedule, the administrator can schedule the faculty member from his/her demographic profile.

1. Select a faculty member from the faculty pull-down menu on the MedHub portal page (Home).

Note: If this tab does not appear, go to "Program Settings" from the MedHub portal page and select the "Schedules" tab. Check the option, "Faculty Scheduling" and save the settings.



3. Select the "Add Service" or "Add Clinic" button to schedule the faculty member to the appropriate activity. Assign the service or clinic and designate the start and end dates of that particular activity. Submit.

Academic Year: July 1,	2016 - June 30, 2017	•			
Away-Union	Service	10/20/2016	10/31/2016	₩Modify	×Delete
Add Service Service:*		Start Date:*	End Date:*		
- Away-Union		MM/DD/YYYY	11/19/2016 MM/DD/YYYY	Submit	

4. The service or clinic will then be assigned to the faculty member. The information from the faculty member's scheduling tab will flow over into the master rotation schedule.



Once the administrator has scheduled the faculty into the rotation schedule, this will allow MedHub to make evaluation matches with trainees rotating into those activities.

For outside faculty to whom the program occasionally sends evaluations but does not need a MedHub profile, set them up as "outside evaluators." * If these individuals ever verify procedures, do NOT add them as outside evaluators, but create a MedHub profile for these faculty instead.

*see "Evaluation Functions" section for instructions on how to add an outside evaluator.

Program Settings

Home>Program Settings> Schedule Tab

There are a variety of program settings related to schedule tasks. In MedHub, the"?" next to the setting will open a knowledge base article on that setting if you need further information. Program Settings

General	Schedules	Procedures	Evaluations	Conferences	Duty Hours	Custom Alerts
Schedule	Settings					
Email Resid	ents Service Cu	urriculum	5 Day(s) before R	otation 🔻 😡		
Objectives: Email Resid	ents Clinic Curr	iculum	(do not email obj			
Objectives:			· · · · · ·			
	iculum Objectiv	res:	For all assigned s	ervices • Ø		
Faculty Sch			~ 0			
	ulty in Weekly A					
	n when Releasi m-based Functi		•			
	ervice-based Cli		7 Day(s) before R	otation •		
	s for Visiting R		•			
Track Clinic	s (individual) fo	or Faculty:	~ 0			
Schedule	Interfaces					
Enable Aml	on Interface:		yaleane		Ø	
East	Topper - Ini		Add Amion Int	terface		
Enable Oper	nTempo Interfac	e. ((site)			
			(user login)			
		ĺ	(api key)			
			0			
Enable QGend	a Interface:		ipany key)			
		0				
Enable ShiftAd	dmin Interface:		(validation key)	Ø		
Enable SpinEu	ision Interface:		(authentication key)	0		
			(,)			
Resident A	heancae					
		_				
Allow Residen	its to Request Ab	sences: 🔽 🛛				
Notify Resider	nts of Approved A	bsences:				
Block Dates fo Conferences:	or Vacations/Awa	y 🗌 e)			
Absence Appr Holidays/Wee	oval - Remove					
Hide Sick Day	s from Resident/I	Faculty				
View: Displav reside	nt absences in 'b	v service'				
rotation view:						
Rotation Schedu	ules					
Resident PGYs:		D, 1, 2, 3, 4, 5, 6, 7, 8, 9				
Schedule Name:*	(ANES				
Default Schedule Vie	ew:*	By Resident 🔹				
Resident Ordering:*		By PGY, then Last Name	•			
Schedule Display Op	otions:*	('By Resident' views only) Hide Trainee Levels				
		Display Incoming Re	esidents at Bottom of Scher Faculty Assignments ('Servi			
		Repeat Rotation Per		Ce - All Oller View Only)		
Public View of F	Rotation Schedule					
Enable Public View:*			https://	preview.medhub.com/func	tions/schedule/)?p=anes (program-specific)
		_			and a second difference with the second s	(program specific)
		Display absence schedule @				
Please contact MedH	tub Support if you need to o	livide your rotation schedules	s differently by PGY			
		Save Settings				

Duty Hours

Programs are expected to monitor trainees' duty hours to ensure they comply with ACGME duty hour requirements. To ensure that trainees are in compliance, MedHub provides functionality to assist programs in monitoring and reporting duty hour submissions.

Program Administrators have the capability to view and edit duty hour submissions completed by the trainee. To review duty hour submissions, locate the "Resident Duty Hours" link located on the MedHub portal page (Home).



The initial view will display a timesheet of the first trainee located in the drop down along with the current week in the top right hand corner. To review a prior week's timesheet of a particular trainee, locate the trainee's name from the drop down and the week.

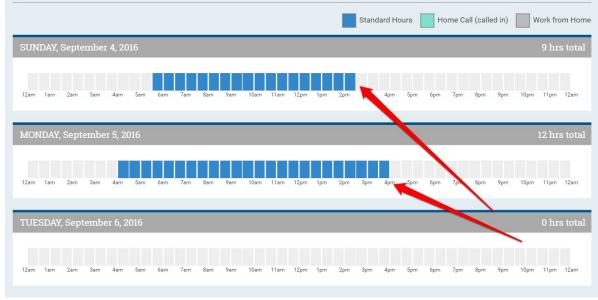
Weekly Duty Hours

Weekly Duty Hours	Duty Hours History	Duty Hours Statistics	Duty Hour Review	s															
	Andrade, Cody	(CHF)	• 9/4	I-9/10/20	16	•		Gra	phica	al Int	erfac	e 🔻							
	Weekly Comp	liance Checklist		0			Aug	ust 2	016				s	epten	nber	201	6		Incomplete Duty Hours
	Maximum of 80 t	otal hours	0.0 hr(s)		SUN	MON	TUE	WED	тни	FRI	SAT	SUN	MON	TUE	WED	тни	FRI	SAT	Compliant Duty Hours
						1	2	3	4	5	6					1	2	3	-
	Days off (1 requir	ed)	7 day(s)		Z	8	9	10	11	12	13	4	5	6	7	8	9	10	Non-compliant Duty Hours
	Single work perio	d - 24 hours duty/28 hours total			14	15	16	17	18	19	20	11	12	13	14	15	16	17	View Demo
	maximum				21	22	23	24	25	26	27	18	19	20	21	22	23	24	
	8 hour breaks be	tween work periods (must)			28	29	30	31				25	26	27	28	29	30		

The weekly submission of that trainee will appear so the administrator can review how the trainee submitted his/her hours, especially if any violations occurred during that particular week. Please note that there are 2 types of duty hour views: a standard interface or a graphical interface. The standard interface is a set of drop down options that the trainee can choose when populating their start and end times for each day.

		Standard Hours Home Call (called in) Work from Home
SUNDAY, September 4, 2016	1	0 hrs total
	Type: (standard)	
more entries		
MONDAY, September 5, 2016		0 hrs total
	Type: (standard) (standard) (standard) (standard)	

The graphical interface allows the trainee to select the start and end times directly rather than through a drop down.



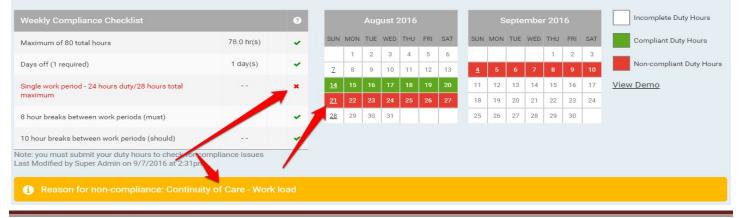
To switch views, locate the link, "Use Standard Interface" or "Use Graphical Interface" on the timesheet.



On the top of the timesheet is a weekly compliance checklist that lists the basic duty hour rules that are tracked in MedHub. If a trainee is in compliance after submitting his/her weekly timesheet, each duty hour rule will be checked off in green.

Weekly Compliance Checklist	_	?
Maximum of 80 total hours	46.0 hr(s)	,
Days off (1 required)	2 day(s)	~
Single work period - 24 hours duty/28 hours total maximum		~
8 hour breaks between work periods (must)		~
10 hour breaks between work periods (should)		-

If a trainee is not in compliance with the duty hour rules, the duty hour rule that is violated or potentially violated will show up with a red "x" and the week on the calendar will be shaded in red.



MedHub Coordinator Training Document

When a trainee submits his/her timesheet and a violation is present, the trainee will be forced to submit an explanation of non-compliance which will be indicated at the bottom of the weekly compliance checklist. <u>Please</u> <u>note that MedHub is a proactive system</u>. This means that for those duty hour rules that are averaged over 4 weeks (i.e. 80 hours, 1 day off in 7) will appear as a violation for that given week even though when the program runs their 4 week or monthly duty hour reports, most likely the violation will not appear. The potential violation gives the program a warning and something to consider when reviewing duty hour submissions. It does not mean that the trainee violated those particular duty hour rules, but to provide the program information that a true violation could occur if not monitored. Trainees will still be asked to submit an explanation for those duty hours that are potentially violated for a given week.

Trainees only have 2 weeks to document their duty hours, the current week and the prior week. Anything before the prior week is locked to the trainee. There is not a way to "unlock" prior timesheets for trainees to complete. If a trainee does not complete his/her duty hours for the prior week, he/she will receive an e-mail along with an urgent task on their home page regarding incomplete duty hours. Since there is no "unlock" for trainees, the program administrator can log those hours on behalf of that trainee, if necessary.

Program Administrators have the ability to review various duty hour information and reports. To review historical duty hour submissions, select the "Duty Hours History" tab. This provides a quick analysis of duty hour submissions over the rolling year.

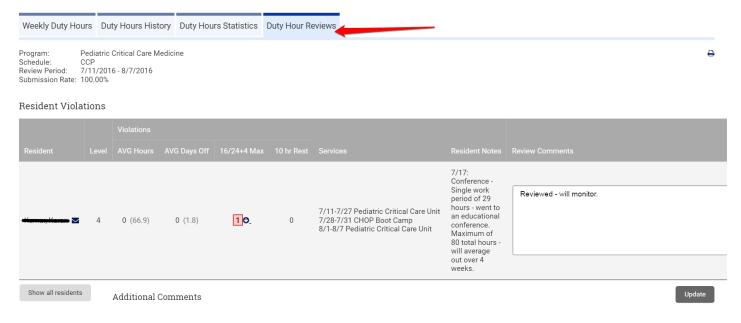
Weekly Duty Ho	ours	Duty Hours Hi	story Dut	y Hours Statistics D	uty Hour Reviews	
						Resident
Dates:	Hours	: Calendar Days Off:	Absences:	Compliance (Reason)	: Program Notes:	Duty Hours Hist
<u>1/1 - 1/2/16</u>	0.0	0	0			11 5
<u>1/3 - 1/9/16</u>	0.0	0	0			96
<u> 1/10 - 1/16/16</u>	0.0	0	0			72 62.5 67
<u>1/17 - 1/23/16</u>	0.0	0	0		355	
1/24 - 1/30/16	0.0	0	0			24
<u>1/31 - 2/6/16</u>	0.0	0	0	22	-12	
<u>2/7 - 2/13/16</u>	111.5	5 1	0	✗ Continuity of Care- Maximum of 80 total hours: 111.5 hrs Sing work period of 16 hou exceeded No 10 hour break between work periods	le ırs	Under Start
<u>2/14 - 2/20/16</u>	0.0	0	0			The Interactive Charts functionality requires the Shockwave plugin. If your browser does not have this plugin, please <u>click here</u> to download and install.

To run duty hour statistical reports, select the "Duty Hour Statistics" tab to choose particular statistics to get various components of information the program may need.

Duty Hours Statistics									
Weekly Duty Hours Duty Hours History Duty Hours Statistics Duty Hour R									
Use this section to calculate duty hour statistics. These results can be used to answer some com									
L	Statistic: Identify maximum work periods over date range								
 Identify maximum work periods over date range Identify maximum work periods per service over date range* Average duty hours per week (excluding home call) Date Range*: Average days per week of in-house call (excluding home call and night float) Residents scheduled to more than 60 hours of in-program shifts (EM) Residents scheduled for more than 6 consecutive nights of Night Float* 									
* Data ranga can pat a		Work Periods per Service" statistics	report						

* Date range can not cross academic years for the "Work Periods per Service" statistics report. * Night Float is defined as any call/shift that contains "Float" in the name and crosses midnight. To review duty hour submissions that have violations, select the "Duty Hour Reviews" tab. The administrator can review the violation and make any comments about the violation that occurred. However, only the Program Director can check off that the duty hour violation was reviewed; comments made by the administrator do not indicate that the duty hour review was completed, but only partially completed. The Program Director has final sign-off.

Review Period



Programs can run multiple duty hours reports under the Reports tab, however, MedHub recommends that programs run the Duty Hour Compliance Report to get accurate reporting results since this report takes into consideration the averages of certain duty hour rules. This report should assist programs in making determinations about true violations that occurred over a given period of time.

Evaluation Creation and Management

From the MedHub portal page (Home), select the "Evaluations" button located on the top navigation menu.

😭 Home	Residents >	Faculty >	Schedules >	Procedures	Evaluations	Conferences
				Inte	ernal Medicine - Pr	rimary Care

There are two major components to evaluation functionality:

- 1. Evaluation creation (non-milestone and milestone)
- 2. Evaluation delivery

Creating a Non-Milestone Evaluation

Administrators have multiple options for creating a new evaluation form:

- Designing a new form
- Copying an existing form (once you already have a form created) You'll use this option if an existing form is locked and has been delivered, but it should either no longer be used or it needs to be modified.
- Copying an existing form from other program within your institution (this is available if another program has agreed to share their evaluation with other programs).
- Copy an existing form from another MedHub client (this is available if another program at another MedHub client institution has agreed to share their evaluations with other MedHub clients).
- 1. From the Evaluations tab, select the "New Evaluation Form" button.

Evaluation Forms	
Modify/Print Form:	
(select evaluation)	•
New Evaluation Form	
Manage Evaluation Forms	

2. To design a new draft evaluation form, select the "Design New Form" tab.

New Form - Design New Form

Design New Form Copy Existing Form Copy from another Program Copy from another Institution			
	Design New Form Copy Existing Form	Copy from another Program	Copy from another Institution

Use this option to start a new evaluation from scratch. If you already have an electronic version of this form, you may be able to copy and paste sections of text.

Title:*	
Introduction/ Instructions:	

- 3. Provide a name for the form (i.e. Resident Evaluation of Attending)
- 4. Enter any introduction or instructions about the evaluation (optional)
- 5. Select the type of evaluation (i.e. resident evaluation of faculty, faculty evaluation of resident, etc.). This determines who the form can be delivered to and who can be evaluated with the form.
- 6. Choose to make this public to other programs within your institution (optional)
- 7. Select "Create Evaluation Form" button to start designing the evaluation form template

Decign Mr	w Form	Copy Evicting Form	Copy from another Proc	Conv from	another Institution
Design Ne	ew Form	Copy Existing Form	Copy from another Prog	fram Copy from a	another institution
se this option	n to start a ne	ew evaluation from scrate	ch. If you already have an elec	ronic version of this	form, you may be able to copy and paste sections
tle:*	Resident	Evaluation of Attending			
troduction/ structions:	Please cor	nplete all evaluation ques	stions.		
pes:* 🝞		evaluation of other reside evaluation of faculty mer		valuation ation of a service/cli	nic
		evaluation of student		ation of program/hos	
e required)		evaluation of staff		dent/Faculty evaluat	
	Resident	self evaluation		dent/Faculty evaluat	
	Resident	evaluation of a service/c	linic Datient/staff	evaluation of resider	nt
	Resident	evaluation of program/h	ospital Patient/staff	evaluation of faculty	/program/hospital
	Faculty e	valuation of a resident	Student evaluation	uation of resident	
	Faculty e	valuation of a student	Student evaluation	ation of faculty	
	Faculty e	valuation of other faculty	(peer)		
	- I dounty o				
ormat:*	Standard	- 7			
ormat:*			Numbering;*	Autonumber	• 7

8. If applicable to the evaluation, select the "Add Header" button to create headers above either a question or a series of questions. Provide a header name (i.e. Medical Knowledge, Patient Care, Practice Based Learning, etc.), add an introduction if applicable, and select "Submit." This will add a header to your evaluation template. Note: headers are not required.

	Upda	ate Information	Delete Form		
Questio	ns/Head	ers			
Order:	Туре:	Question/Header:	Answer Type:	Competencies/Milestones:	Alerts/Comments:
1. 🕂	Header	Professionalism			
Add Que			dd Milestone Quest	tion(s)	
Import L	ocked Quest	ion(s)			

9. To add a question or a series of questions under your header, select the "Add Question" button.

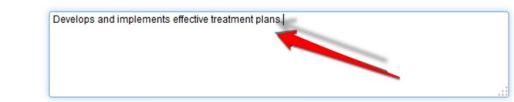
Order:		Туре:	Question/Header:	Ansv
1.	÷	Header	Professionalism	
Ad	ld Que	stion	dd Header Batch A	dd Mile

New Form - Design New Form

10. Enter the evaluation question.

Modify Questions

Question:*



11. Select the appropriate answer type for the question from the pull down menu. To review all answer types, click on the "view all answer types" link found under the pull down menu. If the scale that is needed is not available, log a support ticket in MedHub from the "Help" tab located in the top navigation menu that describes the type of evaluation scale needed. (The number that appears in parentheses with the evaluation scale type indicates how many options or choices are in that scale.)

Short Text Response
[view all answer types]

12. Determine if the question should be required (is a response required by the individual completing the evaluation?) and/or confidential (should the evaluator/evaluatee be able to see responses to this completed form?).

Required:	0	Confidential: 📃 🍙

13. Tag the evaluation question to a competency (optional) and select "Submit."

Competencies:	Patient Care	Practice-based Learning and Improvement
	Medical Knowledge	□Professionalism
	Systems-based Practi	ce Interpersonal Communication Skills (ICS)

14. After submission, return to the evaluation template. The question will be listed under the header. The administrator can continue to add other questions by selecting the "Add Question" button.

Orc	ler:	Туре:	Question/Header:		Competencies/Milestones:	Alerts/Comments:
1.	÷	Header	Professionalism			
2.	÷	Question	Develops and implements effective treatment plans.[C]	Scale: Below Expectations to Exceeds Expectations Scale Descriptions	Competencies: PC	No

15. To add low score alerts and required comments, select the gray "No" under the Alerts/Comments column. This will allow the program (Program Director, Program Administrator, faculty mentor) to receive low score alerts via email and/or require the evaluator to comment if he/she gives the evaluatee a low score on a particular question.

Ord	der:		Question/Header:		Competencies/Milestones:	Alerts/Comments:
1.	÷	Header	Professionalism			
2.	+	Question	Develops and implements effective treatment plans.[C]	Scale: Below Expectations to Exceeds Expectations Scale Descriptions	Competencies: PC	No

16. For scaled questions, the administrator can either define the low score alerts based on the individual PGY level or overall. If the administrator chooses to define low score alerts by PGY level, select the "Set Alerts by PGY Level" button.

Alerts/Comments



By PGY level, select the scores (i.e. options) an evaluator would have to select to be considered a low score. The administrator can also indicate comments are required based on the option chosen. For example, if an evaluator, who is evaluating a PGY 1 resident, selects option 1 or 2 for this question, this will require a comment by the evaluator and the program will receive a low score alert.

The administrator can also mimic these same alerts for all questions that use this same scale if the option "propagate these selections through all questions of this answer type" is selected. Set Alerts by Level

	Send Alerts On:										Require Comments On:								
Level:	1	2	3	4	<u>5</u>	<u>6</u>	<u>7</u>	<u>8</u>	9		1	2	3	4	5	6	<u>7</u>	8	9
Non-Resident	s 🗌																		
Level-0																			
Level-1																			
Level-2																			
Level-3																			
Level-4																			
Level-5																			
Level-6																			
Level-7																			
Level-8																			
Level-9																			
Level-10																			
Submit	Prop	agate the	ese selec	ctions the	rough all	questio	ns of this	s answer	type										

If the administrator chooses to set alerts overall regardless of PGY level, select the scale option that should generate a low score alert and identify if comments should be required if a particular low score is given to the evaluatee. Select "Submit."

Evaluation Form: Question:	Resident Evaluation Develops and implem	of Attending ents effective treatment plans.
Set Alerts By Level:	Set Alerts by Level	
Send Alert On:		Require Comments On:
	2	2
	3	3
	4	4
	5	5
	6	6
	7	7
	8	8
	9	9
Options:	Propagate these	alerts/comments through all questions of this answer type
	Submit	

- "Send Alert On" generates an alert via email on any evaluatee receiving the specified score on a completed evaluation.
- "Require Comments On" forces the evaluator to provide a comment for providing the low score.
- 17. If the administrator wants to preview the evaluation as the form is being built, select the "Preview Evaluation" link found to the right of the name/title of the evaluation form. This is what the evaluator will see.

Q Preview Form			
Print Version			
New Evaluation form			
□ Insufficient contact to evaluate (delete evaluation)			
New Evaluation form			
Patient Care			
	Below Expectations	Meets Expectations	Exceeds Expectations
	1 2 3	4 5 6	7 8 9
1. Develops and implements effective treatment plans.*			0 0 0

18. Once the evaluation has been completed, the administrator will want to ensure that the evaluation form is locked and no longer in draft mode. The form needs to be final in order for it to be delivered. Once the evaluation is finalized AND has been delivered to evaluators, the evaluation questions can no longer be edited or added.

Design:*	Draft	•	
	Draft	_	Scale Descriptions:
Formatting:**	Final (Locked)		Repetth ontion

Setting Up Milestones or Subcompetencies (for Evaluations)

In light of the Next Accreditation System (NAS), MedHub has provided the ability for programs to create milestone evaluations that emulate each program's ACGME Residency Review Committee's (RRC) approved reporting milestones or subcompetencies as defined by each program's milestone projects. Before a milestone evaluation can be created, there are some initial prerequisite steps.

1. <u>Enabling Milestones</u> – to enable the individual training program's milestones or subcompetencies, from the portal page select the Program Settings link under the Site Management section, and then select the Evaluations tab.

Locate the option, "Enable Milestones" and select the checkbox. Save settings.

Enable Milestones:



Once the milestones have been enabled, return to the home page where a new link will appear under the Site Management section: <u>Milestone Management</u>.

Site Management	\sim
Alumni Tracking	
Bulk Email Tool	
Competency Dashboard	
Learning Modules	-
Learning Portfolios - Faculty	
Learning Portfolios - Mondents	
Milestone Management	
Trainee Applications	

 Importing Milestones Package – for the milestones (or subcompetencies) to become a part of the evaluations, the administrator will need to import the ACGME RRC's approved subcompetencies. Select the "Milestone Management" link and the Subcompetencies tab. Next, choose the "Import/Update Subcompetencies."

Subcompetencies	Milestones Summary	Milestone	Settings		
Glaucoma Subco	mpetencies				
Competency: ID:	Subcompetency: Statu	ıs: Linked EPAs:	Linked Elements:	Tagged Questions:	Actions:
(none)					
Add Subcompetency	Import/Update Subcon	npetencies	View all Su	bcompetencies	(Active/Inactive)

Choose the subcompetency package that is specific to your training program and select the "Import Package" button. Usually, this package will be marked as "RECOMMENDED". Before the administrator decides to import, he/she can also preview the program's subcompetency package to review the ACGME approved milestones.

Packages Available for Import				
Package:	Last Updated:	Items.	No VS:	
AAOMS Oral and Maxillofacial Surgery Added 6/17/2016	6/17/2016	32	Import Package	Preview
Abdominal Radiology Updated by ACGME 02/2014. Updated by MedHub 02/2014.	2/27/2014	13	Import Package	Preview
ABMGG Clinical Molecular and Cytogentics Milestones Created on 3/25/2016 - BG	3/25/2016	12	Import Package	Preview

Once imported, all of the program's subcompetencies will be listed. The list will provide not only the subcompetencies, but will eventually show the program which milestones or subcompetencies are tagged to evaluation questions as well as which are linked to Entrustable Professional Activities (EPAs) and/or Milestone Elements (if enabled).



The administrator has the ability to modify these milestones or subcompetencies if needed. Select the "modify" button next to the subcompetency. Here the administrator can edit the subcompetency and make it inactive if it will no longer be used to measure achievements. The administrator can also establish milestone goal lines for each milestone that reflects the progression of each trainee across PGY levels. RECOMMEND: Discuss with the Program Director the milestone goal line start and end points as well as values assigned between these start and end points. These goals lines will appear on milestone trend graphics and charts.

Milestones - Subcompetencies - Modify Subcompetency

Competency:	Patient Care 🔹					
ID/Abbrev*:	PC-1					
Subcompetency*:	Gathers and synthesizes essential and accurate information to define each patient's clinical problem(s).					
Status:	Active -					
Goal Lines						
	PGY: Value:					
Goal Line Start Point:	• (undefined) •					
	PGY: Value:					
Goal Line End Point:	• (undefined) •					
	Propagate these goals across all milestones					

Subcompetency Information

3. <u>Milestone Settings</u> – Return to the main milestones management page and select the "Milestones Settings" tab.



The settings allow the administrator to decide if the program wants to also track the program's EPAs, milestone elements, as well as milestone achievements. The administrator can also enable the option to track the milestone elements by choosing to link directly to the subcompetency or to the competency level of a particular subcompetency. RECOMMEND: Discuss these options with the Program Director if the program chooses to track.

Subcompetencies	EPAs	Milestone Elements	Milestones Summa	Milestone Settings					
Use this page to update the milestone settings for your program. Most programs should not use the 'Inherit Milestor with any questions.									
Track Entrustable Professional Activities (EPAs):									
Track Entrustable Profe	essional Activities	(EPAs): 🗸							
Track Entrustable Profe Track Milestone Elemer			estones/level	•					

Once enabled, new tabs will appear on the main milestones management page.

Subcompetencies	EPAs	Milestone Elements	Milestones Summary	Milestone Settings

Each of these tabs will allow the administrator to import EPA and milestone element packages if the program chooses to track these items as well. The milestone achievement option is found under the Milestones Summary tab which allows the programs to manually indicate when each trainee has achieved each subcompetency by checking the checkbox in the right column of each subcompetency.

	View	/ Туре			List to Display:						
	Mi	ilestones List	Milestones Trends	Milestones Summary	Subcompetencies -						
Subcompetency A	chievements	(0 / 22)									
Competency:		Subcompete	aner			PAST	6 MONTH :	STATISTICS	Date:	Rec. led By:	Achieved
competency.		Subcompet				Average:	Range:	# Questions:	Date.	Neu- to by.	Autieveu
Patient Care	PC-1	Gathers and clinical prob		l and accurate information	to define each patient ???s			0			
	PC-2	Develops an	id achieves comprehe	nsive management plan fo	r each patient.			0		••	

Other milestone settings include:

- A. Enable Progress Reports (useful for adding this data to ACGME's WebADS),
- B. Defining a default milestone scale (REQUIRED),
- C. Indicating which types of evaluations should be included in calculating milestone averages, and
- D. Defining the PGY levels to track for milestones.

Enable Progress Reports:					
Inherit Milestones from Program(s):	(none) · 🧿				
	(none)				
	(none)				
Default Subcompetency Scale:	Scale: Milestones - Level 1-5 (w/ NA)				
Evaluation Types to Include in Averages: (at least one required)	 Resident evaluation of other resident (peer) Faculty evaluation of a resident Patient/staff evaluation of resident Resident/Student/Faculty evaluation of a procedure Resident/Student/Faculty evaluation of a conference 				
PGYs to Track for Milestones:					

Save Settings

<u>Enable Progress Reports</u> – if this is enabled, a new tab will appear on the main milestones page titled, "Progress Reports."

Subcompetencies EPAs Milestone Elements Milestones Summar Progress Reports Milestone Settings

This is the information programs can use for ACGME WebADS purposes. The progress report will provide a 6-month average based on the evaluation types chosen under milestone settings. The program will be able to view the average score of that subcompetency, the range of scores for that subcompetency and how many evaluation questions are tagged to that subcompetency. This average will then serve as a guideline for the Clinical Competency Committee (CCC) to determine which level the trainee performs at for that specific 6-month reporting period.

6-Month Progress Reports

Subcom	petencies	EPAs	Milestone Elements	Milestones Summary	Progress Reports	Milestone Setti	ngs							
Resident:	Medicine Milest	• J	tte Period: an-Jun 2016 ▼									Exp	port Prog	gress Report
internari	vicularie willest	iones					MIL	ESTONE LI	EVELS			6 MONTH	H SUMN	MARY
ID:	Subcompet	ency:				Level 1	Level 2	Level 3	Leve		NS AV	rerage: Rar	nge: 4	# Questions:
PC-1	Gathers and problem(s).		essential and accurate info	ermation to define each par	tients clinical	0 0	0 0 0	0 0	0 0	0	0			0
												+ MOF	RE INFO	RMATION
PC-2	Develops ar	nd achieves c	comprehensive managemen	t plan for each patient.		0 0	0 0 0	0 0	0 0	0	0			0
												+ MOI	RE INFO	RMATION

<u>Default Milestones Scale</u> – It is recommended to choose a default milestone scale that will be used for the progress report. It is recommended to use the same milestone scale as indicated in the ACGME milestone project for each training program. To see what the scale looks like, select the magnifying glass icon next to the scale pull-down.

Default Subcompetency Scale:

Scale: Milestones - Level 1-5 (w/ NA)

<u>PGY Levels to Track for Milestones</u> – The program has the ability to track milestones or subcompetencies across the PGY levels.

<u>Clinical Competency Committee (CCC)</u>

Since programs are required to appoint a Clinical Competency Committee (CCC) for resident evaluation purposes, each program has the ability to add members to their CCC in order to evaluate trainees.

To set up the CCC, from the home page, select the "Clinical Competency Committee" link found under the Security section.



1. Click the "Add Committee Member" button to add faculty or resident members.

Committee Members	Meetings	Resources/Files		
Member:	Rol	l <u>e:</u>	Phone:	
(none)				

2. The administrator can choose members either from program faculty (i.e. faculty only within that program), all faculty (faculty from the entire institution), residents (only in that program), administrators (only in that program) and any read-only users (only in that program).

Committee Me	mbers	Meetings	Resourc	es/Files		
Member to Add:	_			I		
Member to Add:	Progr	ram Fac	All Faculty	Residents	Administrators	Read-Only
	Program	n Faculty: (sele	ct person)			
Permissions:	R	gs: (sele o access ead-only ead & Write	ct person)			

3. The administrator can then apply permissions to each committee member as well as indicate the leader of the CCC. The permissions allow a committee member to either receive no information (or have no access), have read-only access, or have both read and write access. For example, the leader of the CCC may want to have read and write access to the Progress Report, but the administrator may want to restrict all file access to a resident who is part of the CCC.



4. Once each member is added, click the submit button to return to the list of CCC members. Each CCC member will now have a link on their home page labeled, "Clinical Competency Committee." This link will provide each member information pertaining to the CCC such as meetings and progress report information. Those members who have read and write access will only be able to modify information pertaining to meetings, files and progress reports. Resident members do NOT have access to milestone or progress report information of trainees.

Member:		<u>Role:</u>	
Redd(Faculty), Tina (Leader)	Member		
Redd(Resident), Tina		Non-Member	
+ Add Committee Member	Export Members		

Those faculty with read and/or write access to Progress Reports will see additional tabs:

- Milestone Summary
- Milestone Progress Reports

Clinical Compete	ncy Comn	nittee - Comm	ittee Members		
Committee Members	Meetings	Resources/Files	Milestones Summary	Milestone Pro	gress Reports
Member:		Ē	<u>Role:</u>	Phone:	<u>Email:</u>
Redd(Faculty), Tina (Leader)		Member			tina@medhub.con
Redd(Resident), Tina		Ν	Non-Member		tina@medhub.con

The milestone summary tab allows the CCC member to see milestone trends and milestone graphics for each trainee in comparison with his/her peers along with the view of the progress report by trainee to determine at what level is the trainee performing for 6-month reporting purposes to ACGME.

5. To add a meeting to the CCC, select the Meetings tab and then the "Add Meeting" button. Clinical Competency Committee - Meetings

Committee Memb	ers Meetings	Resources/Files
Date:	<u>Time:</u>	Meeting:
(none)	-	7

6. Document information about the meeting and submit. Clinical Competency Committee - Meetings

Committee M	lembers	Meetings	Resources/Files
Meeting Title*:			
Date/Time*:	(MM/DD/YY		unknown) 🛨
Status:	Active	•	
Location:			
Agenda:			
Agenua.			
	Submit		

This meeting information will also appear for the CCC members. The meeting tab also lists all of the meetings that have occurred.

 To add meeting minutes or any other documents necessary for the CCC members to view, select the Resources/File tab and then the "Upload File," "Add Internet Link," or "Add Folder" button.
 Clinical Competency Committee - Meetings

Martin
Meeting
eetings

Any information uploaded here will also appear for the CCC members.

Creating Milestone Evaluations

1. Return to the evaluation tab from the home page and select the "New Evaluation Form" button. Create the initial information regarding the form by giving it a title, introduction (if needed) and selecting the evaluation type (i.e. faculty evaluation of a resident).

New Form - Design New Form

Design Ne	w Form	Copy Existing Form	Copy from anot	her Program	Copy from another	Institution
Use this option	to start a n	ew evaluation from scratch	n. If you already have	an electronic	version of this form, yo	u may be ab
Title:*	Mileston	e Evaluation				
Introduction/						
Instructions:						
T	_	t evaluation of other reside		ulty self evalua		
Types:* 🕐		t evaluation of faculty men			of a service/clinic	
(one required)		t evaluation of student	_		of program/hospital	
		t evaluation of staff t self evaluation			Faculty evaluation of a Faculty evaluation of a	
		t evaluation of a service/cli			ation of resident	conterence
	_	t evaluation of program/ho	_		ation of faculty/program	n/hospital
		evaluation of a resident		lent evaluation		
	Faculty e	evaluation of a student	Stud	lent evaluation	of faculty	
	Faculty e	evaluation of other faculty	(peer)			
Format:*	Standard	- 🧿				
Format.~	Standard					
	[
Descriptions:*	Beneath o	ption -	Numbe	ring:*	utonumber 🛛 🛨 🔇	9
	Create Ev	aluation Form				

Add questions to the form much like a standard, non-milestone evaluation form. However, when adding a question to a milestone evaluation form, the administrator MUST select a milestone scale. Milestones scales have titles that begin with "Scale: Milestones - ..." The question must also be tagged to a subcompetency.
 Add Question

Juestion:*	Milestone Question #3					
Inswer Type:*						
	- Scale: Milestones - Level 1-5 (9)		- 🔍			
	- Scale: Milestones - Level 1-5 (9) [view all answer types]		<u> </u>			
Required:			<u> </u>	Confidential:	0	
tequired: Subcompetencie	[view all answer types]		<u> </u>	Confidential:	•	
	[view.ell answer types]	al and accurate information to define each pat	tient ??s clinical problem(s).	Confidential:	1	
	[view all snower types] • • • • •	al and accurate information to define each pati ensive management plan for each patient.	tient ??s clinical problem(s).	Confidential:	9	
	Iview all answer types I • •		tient@??s clinical problem(s).	Confidential:	Ð	
	Iview all answer types I • •	ensive management plan for each patient.	tient \$7?s clinical problem(s).	Confidential:	P	

This will be the only way the averages are calculated appropriately for progress reporting and accuracy of evaluation averages for each subcompetency. By selecting a milestone evaluation scale, the ACGME's approved level or header descriptions will be added to the evaluation automatically without adding them manually.

3. After tagging the question to a subcompetency and submitting, the administrator will receive a message asking if the defined header descriptors can be added.

0	Milestone Header Descriptions Available
	The milestone tagged to this question has default header descriptions defined. Add these header descriptions to this question?
	Yes No

Selecting "Yes" will automatically add those descriptions that are listed under each competency level into the evaluation form. To view the scale descriptions, the administrator can either select the "Scale Descriptions" link under the milestone evaluation scale.

Questions/Headers

Ord	ler:	Туре:	Question/Header:	Answer Type:	Competencies/Milestones:	Alerts/Comments:
1.	+	Question	Milestone Question #3	Scale: Milestones - Level 1-5 Scale Descriptions	Subcompetencies: PC-1	No

The descriptors automatically populate the header fields.

Header - Level 1:	Does not collect accurate historical data Does not use physical exam to confirm history Relies exclusively on documentation of others to generate own database or differential diagnosis Fails to recognize patient's central clinical problems Fails to recognize potentially life threatening problems
Header - Level 2:	Inconsistently able to acquire accurate historical information in an organized fashion Does not perform an appropriately thorough physical exam or misses key physical exam findings Does not seek or is overly reliant on secondary data Inconsistently recognizes patients' central clinical problem or develops limited differential diagnoses
Header - Level 3:	Consistently acquires accurate and relevant histories from patients Seeks and obtains data from secondary sources when needed Consistently performs accurate and appropriately thorough physical exams Uses collected data to define a patient's central clinical problem(s)

The administrator can also view these same descriptors in the preview evaluation as well. This way, the administrator will not have to add these descriptors manually.

Level 1	Level 2	Level 3	Level 4	Level 5
 Demonstrates an understanding of common non-reproductive medical disorders 	 Performs history and physical, forms a differential disposite, and evaluates for common non-eproductive medical disorders (e.g., chronic hypertension, obesity, depression) 	Interprets test results and screens for related conditions of non-reproductive medical advorters (e.g., metabolic syndrome, BRCA mutation, eating disorders) Indates management for common non-eproductive disorders (e.g., hypertension, diabetes)	 Initiates management plans for patients with complex non-reproductive medical disorders (e.g., osteopores), metabolic synthme, BRCA mutation, eating disorders, human immunodeficiency virus [th/] infection) and provides referrats 	 Provides on-going, comprehensive care for patients with complex and altypical non-reproductive medical disorders
		A Collapse A		

4. (OPTIONAL) MedHub does provide programs the ability to batch add milestone questions by selecting the "Batch Add the Milestone Questions" button from the bottom of the evaluation form template. This button does not appear if you have not enabled milestones in Program Settings.

Order:		Туре:	Que	estion/Header:	Answer Type:	Competencies/Mile
1. 4	÷	Questic	on <u>Mil</u>	estone Question #3	Scale: Milestones - Level 1-5 Scale Descriptions	Subcompetencies:
Add C	Ques	tion	Add Head	ler Batch Add Mi	lestone Question(s)	
Impor	rt Lo	cked Que	estion(s)			

Next, select the subcompetency or subcompetencies that will also be used as the question(s) and select the "Add Selected Milestone Questions" button.

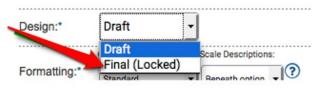
	[IM] ICS-3	Appropriate utilization and completion of health records.
	[IM] MK-1	Clinical knowledge
~	[IM] MK-2	concedures.
	[IM] PBLI-1	Monitors practice with a goal for improvement.
	[IM] PBLI-2	Learns and improves via performance audit.

The subcompetency will appear as a question on the evaluation form. Batch adding allows the program to use the actual milestones or subcompetencies as the question on the form which also pulls over the default milestone scale (from milestone settings) as well as the level or scale descriptors. Please note that using a milestone or subcompetency as an actual question on the form is NOT RECOMMENDED by ACGME.

To preview the milestone evaluation, select the preview evaluation icon. Here the administrator will be able to see what the newly created milestone evaluation will look like once delivered. Notice the header descriptors are listed below each level. The "expand" pull down allows the evaluator to look at complete descriptions of each level.

Milestone Eval Insufficient contact to evaluate (delete evaluation) Level 2 Level 5 Level 1 Level 3 Level 4 · Establishes rapport with and · Elicits patients' reasons for seeking health · Manages the expectations of those who Uses flexible communication strategies and adjusts Teaches communication and care and expectations from the ED visit demonstrate empathy toward receive care in the ED and uses them based on the clinical situation to resolve conflict management skills 1. Patient Centered Communication* A

5. Once the milestone evaluation is completed and ready to be delivered, ensure that the form design is "final(locked)".



Delivering an Evaluation

There are multiple methods for delivering evaluations:

- Individual method the administrator manually matches the evaluator(s) with the evaluatee(s) by choosing the recipients and targets of the evaluation.
- By schedule method MedHub makes evaluator/evaluatee matches based upon the schedule, but is manually (ad hoc), scheduled for delivery by the administrator. Faculty MUST be scheduled in MedHub for evaluation matches to be made.
- Automated method Same as the by schedule method, but the program can set up automated delivery of the evaluations, such that deliveries occur periodically without the administrator having to manually schedule the delivery of evaluations. Faculty MUST be scheduled in MedHub.
- Resident identifies supervisor method the trainee identifies the supervisor who the trainee worked with on his/her service or rotation. Once the trainee identifies, the evaluation is delivered. Rules are set up by the program.
- Self-Initiated Evaluations the trainees or faculty can initiate various kinds of evaluations that will be completed by them of an evaluatee. In the case of performance evaluations, residents can choose a faculty member to complete an evaluation on them.

Individual Manual Method

1. To deliver an evaluation by the individual method, select the "Deliver Evaluations" button from the Evaluations tab.

Deliver Evaluations		
Queued Evaluations		
Evaluation Form:	Number:	Delivery Date:
(none)		

2. Select the Evaluation type and keep the evaluation delivery as individual. Click on the "Continue" button. Deliver Evaluations - Step 1

Please select the type of evaluation you want delivered and the recipient selection method. @

Evaluation Type:	Selection Method:	
Faculty evaluation of a resident	Individuals •	Continue

3. Select the form you want delivered to the evaluator(s). The form design must be "Final (locked)" before it is available for delivery.

Evaluation Form(s):	Adult - Week 1 - Patient Care Based Milestones (PC1-4)	•
	[<u>SELECT MULTIPLE</u>]	

Select the evaluator(s) from the left hand column that will be completing the evaluation on one or more evaluatees. Select the evaluatees in the right hand column that will be evaluated.
 Select... Recipient(s):*

ect 🔞	Recipient(s):*		Resident(s) to evaluate:*
	Adcock, Lucienne Alderman, Marylin Alicea, Dannielle Allen, Cassie Alvarez, Latricia Amos, Evie		Anderson, Jenny (2) Bates, Jennette (2) Baughman, Louie (2) Beam, Gabrielle (2) Blake, Darell (2)
	Anderson, Jill Andrade, Shanta	•	Blanco, Towanda (2) Boston, Robyn (2)
	Shift/Ctrl to select multiple		Shift/Ctrl to select multiple
	Off-program faculty Outside faculty		Off-program residents Outside residents

5. Add any notes (optional).

Notes:	
(optional)	

(optional)

6. Select a rotation period (optional). This may be helpful if the program needs to identify the rotation period this evaluation occurs. This will appear on the evaluation form.

Rotation Period: (optional)	(unavailable)	•	0
		_	

7. Select a service/clinic (optional). This may be helpful if the program needs to identify the service or rotation this evaluation occurs. This will appear on the evaluation form.

nic:	(unavailable)

8. Select any special options (optional).

e e e e e e e e e e e e e e e e e e e	p		
Service/Clinic: (optional)	(unavailable)		
Special Options: (optional)	(none)		
	 ✓ (none) Electronic Signature Required Anonymous Evaluation 	\$	
Reciprocal Evaluation: (optional)	(do not send reciprocal evaluations)		

*Anonymous evaluations will strip the name from the evaluation form once the form is completed by the evaluator. This means that the program (Program Director, Program Administrator) will <u>not</u> be able to view who has completed a particular evaluation form if this option is selected. Once the evaluator's identifying information is removed from the anonymous evaluation, it **CANNOT** be retrieved by MedHub Support. Talk to your GME office about when or if you should send an evaluation as anonymous.

0

*Note: Trainee evaluations of faculty are automatically confidential hence the faculty member will never see who completed an evaluation of them even if the "anonymous evaluation" option is not selected. However, the program will still be able to view who has completed an evaluation. Certain evaluations types are confidential regardless of the method used to deliver them. You do not have to perform any action to make these evaluation types confidential:

- A. Resident of faculty
- B. Resident of other resident (peer)
- C. Faculty of other faculty (peer)
- D. Student of resident
- E. Student of faculty
- F. Patient/staff of resident
- G. Patient/staff of faculty/program/hospital
- 9. Opt to send a reciprocal evaluation when one has been completed (i.e. faculty of resident, resident of faculty).

Reciprocal Evaluation:		Ì
(optional)	(do not send reciprocal evaluations)	J

10. Define delivery date/time of your evaluation by sending it out immediately, selecting a specific date (at least one day in advance) or adding multiple dates the particular evaluation should be delivered. Click "Submit."

Delivery:*	O Immediate
	On Date (Queue)
	Multiple Dates (Queue)
	Submit

11. You will see the evaluation matches and can confirm delivery.

Deliver Evaluations - Step 3

Evaluation Type:	Faculty evaluation of a resident
Evaluation Form:	Adult - Week 1 - Patient Care Based Milestones (PC1-4)
Delivery Date:	09/07/2016 (immediate)

STANDARD MATCHES

Send:	Recipient:	Evaluation:
	Dr. Alicea, Dannielle	Dr. Baughman, Louie - Adult - Week 1 - Patient Care Based Milestones (PC1-4)
	Dr. Alicea, Dannielle	Dr. Blanco, Towanda - Adult - Week 1 - Patient Care Based Milestones (PC1-4)

1 The delivery process may take several minutes. Don't click submit button below more than once or refresh the page.

Deliver Selected Evaluations

Deliver additional evaluations of the same type

12. After confirming the matches, click Deliver Selected Evaluations to deliver evaluations based on the delivery options.

"By Schedule" Manual Method

Note: The 'by schedule' method of evaluation delivery assumes the master rotation schedule is fully populated with trainees and faculty have been assigned to service groups and/or scheduled into services/rotations/clinics. If this is not the case, the 'by schedule' method of evaluation delivery will not produce the expected results.

- 1. From the MedHub portal page (Home), select the "Evaluations" button on the top navigation menu and click on the "Deliver Evaluations" button.
- 2. Select the evaluation type and select the evaluation delivery method, "Schedule (Services/Teams/Tiered)" and click on "Continue."

Deliver Evaluations - Step 1

Please select the type of evaluation you want delivered and the recipient selection method. 0

Evaluation Type:		Selection Method:		
Faculty evaluation of a resident	•	Schedule (Services/Teams/Tiered) 🔻	Continue	
Select the form you want to deliver from among the forms available of this type				

- 3. Select the form you want to deliver from among the forms available of this type. Evaluation Form(s): Ambulatory Community Office (Preceptor of Resident)
- 4. Select the services/clinics from the first box and match either by service groups (as those are the groups faculty are assigned) or individual services. Service groups remain constant each academic year where faculty are always on that service. Individual services are not constant and change throughout the academic year (i.e. 1 month, 2 weeks, etc.). The "Rotation" selector allows this manual delivery to apply to rotations that have already passed.



5. Select the level of the evaluation target (i.e. trainee) and assign the evaluation to all programs, the home/current program or any programs where trainees were released. "All programs" includes trainees who are from the current program and those released from other programs.

Evaluation T	argets (Residents)	
Level(s):*	Home Program(s):*	
Level 0 🔺	ALL PROGRAMS	
Level 1 Level 2 Level 3	This Program (Internal Medicine-Traditional)	-
Level 4 Level 5 Level 6 Level 7	Shift/Ctrl to select multiple	
Shift/Ctrl		

Follow the same steps as delivering evaluations by the individual method:

- Add any notes (optional)
- Rotation period will be automatically tagged to the form
- Service and/or clinic will be automatically tagged to the form
- Send a reciprocal evaluation (optional)
- Select any special options (optional)
- Select delivery

Confirm the evaluation matches and submit for delivery.

Automated Method

If the administrator would like to deliver evaluations using the 'by schedule' method and repeat the process each rotation period throughout the academic year (without having to set it up manually), the administrator can set up automated evaluation delivery which will repeat the delivery criteria automatically as specified.

1. From the MedHub portal page (Home), select the "Evaluation" button and click on the "Add Automated Evaluations" button.

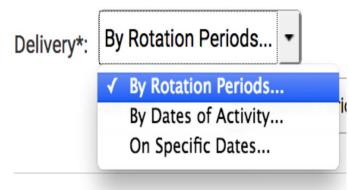
Automated Evaluations		0
Title:	Rules:	Status:
Faculty of Resident Automated	2	Active
Add Automated Evaluations		

2. Provide the automated rule a title. This name should be descriptive and give an idea about what evaluations are being delivered by the rules in the automated evaluation (i.e. attending evaluation at end of rotation).

Add Automated Evaluations

Title*: End of Rotation Evaluation

- 3. Indicate when the evaluations should be delivered:
 - By rotation periods
 - By dates of activity (this option is useful if a rotation activity or service spans across rotation blocks or the activity does not span an entire rotation period)
 - On specific dates



4. Indicate when the evaluation should be delivered (i.e. 3 days prior to the end of every rotation) and select "Submit."

3 days prior t	o 🔻	Rotation Period End Date	•
Submit			

Once the automated evaluation has been set up, the administrator can begin to define what is to occur within a delivery rule. A rule can contain one evaluation delivery instance or multiple.

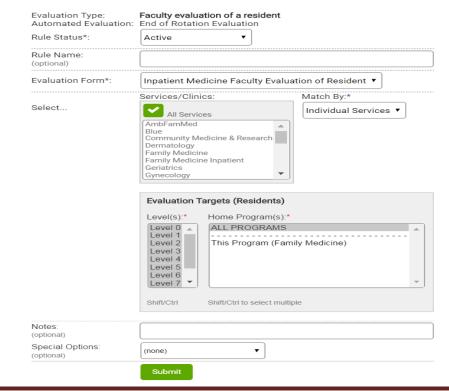
 After the administrator has submitted the type of evaluation that should be automatically delivered, click on the "Add Delivery Rule" button.
 Delivery Rules

Evaluation Type/Rule Name:	Form:	Services/Clinics:	Levels:	Special:	Status:	Actions:
(none defined)						
+ Add Delivery Rule						

6. Select the appropriate evaluation type and "Submit".

7. Define the appropriate evaluation delivery criteria as explained in the manual 'by schedule' method for delivery.

Update Automated Evaluations



- 8. Repeat this process if there is more than one evaluation type to be delivered as part of the automated evaluation.
- 9. Once all rules are added, if the administrator is satisfied with the automated evaluation, change the status to "Active" and click "Submit."

Automated evaluations and automated evaluation rules will deliver in perpetuity as long as the form associated with the automated evaluation rule is not inactivated and as long as the services/service groups associated with the rules in the automated evaluation are not changed.

Title*: End of Rotation Evaluation					
Status:	Active]			
Delivery*:	3 days prior to •	otation End Date 🔻			
	Submit				
Delivery Rules					
Evaluatio	on Type/Rule Name:	Form:			
Faculty e	valuation of a resident	Inpatient Medicine Fac			

Residents Identify Supervisors Method

Another delivery method available for programs is the Residents Identify Supervisors (RIS) method. This puts the onus on the trainee to identify who he/she worked with for a specific rotation period in order for the evaluation to be delivered. If a program chooses to use this option, the administrator must enable this in Program Settings initially.

- 1. Select the Program Settings link from the MedHub portal page (Home) and choose the evaluations tab.
- 2. Enable the setting "Residents Identify Supervisors" option. Save settings.

	Residents Identify Supervisors (<u>Settings</u>):		
3.	3. Select the Evaluations tab from the top navigation bar and locate the "Residents Ide	entify Supervisor	·s" link.
-	Evaluation Functions	J J J J J J J J J J J J J J J J J J J	-
	View Completed Evaluations		
	Residents Identify Supervisors		
4.	4. Choose the Settings/Services tab to set up the appropriate evaluation delivery.		
	Completion Statistics Settings/Services		
	Service(s): Resident(s): Display: Start Date*: En	nd Date*:	
	(all services) ▼ (all residents) ▼ Incomplete (only) ▼ 06/01/2016	09/30/2016	Submit

5. The program can choose to set up a default evaluation that will be submitted or the program can choose to deliver particular evaluations based on the type of service or rotation. To set up general default settings, select the faculty of resident evaluation form that should be used.

General	Settings
---------	----------

Resident of Faculty Form (default):	(none)	•	
Faculty of Resident Form (default):	Test Public Evaluation	4	

If the program intends to have a reciprocal evaluation initiated, the administrator can choose which resident of faculty form should be delivered as well.

6. Select when an e-mail should be sent to the trainee indicating he/she needs to identify his/her supervisor during a specific rotation or service. The administrator can also choose send late e-mail alerts if the trainee has yet to select his/her supervisor.

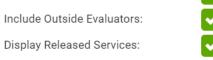
Send Request to Residents:	7 days prior to rotation end date	•
Send Late Alert (Weekly):	7 days after request 🔻	

7. Select the number of individuals the trainee MUST select or the number that is required for the evaluation to be delivered. The administrator can also select the number of supervisors that are recommended to be selected (as a guideline) for evaluations to be delivered.

Required Evaluations (default):		•
Recommended Evaluations (default):	3	•

- 8. If necessary, the administrator can enable the following settings:
 - "Enable for Released Residents" to require released trainees to identify their supervisor,
 - "Include Outside Evaluators" in the list of supervisors
 - "Display Released Services" that are from other programs where their trainees have been released.

Enable for Released Residents:



- 9. Click submit. This sets up the default process for having trainees identify supervisors where the same evaluation form is used regardless of the type of rotation or service.
- 10. To enable RIS for a service and/or set other rules based on the type of service, especially if a different evaluation form should be used, select checkbox of the service or rotation where additional rules will apply and submit. Once submitted, the link to that service becomes active so additional rules can be set up.



<u>Dermatology</u>

(default)

(default)

11. Click on the link of that service and set up the evaluations to be used along with the other rules as described when setting up the general settings.

Service:	Family Medicine	
Required Evaluations:	1	
Recommended Evaluations:	1	
Resident of Faculty Form:	(use default form)	
Faculty of Resident Form:	(use default form)	
Resident of Faculty Special Options:	(none) •	
Faculty of Resident Special Options:	(none) 🔻	
Supervisor Programs: (at least one required)	Anesthesiology - Adult Cardiothoracic Anesthesiology - Ambulatory Anesthesia	Internal Medicine/Pediatrics Lance's University - NP Liz's Rockstar Program

- Define the number of required supervisors that must be identified if it differs from the default setting.
- Define the number of recommended supervisors that can be selected if it differs from the default.
- Identify the particular evaluation form that should be used specifically for this service or rotation.
- Identify if any special options should be used when the evaluation is delivered (i.e. anonymous or require electronic signature).
- If there might be faculty from other training programs that might be evaluating the trainee, select those programs so the faculty of these programs will appear in the list of supervisor options.
- Update Service.

By selecting a different evaluation form for a particular service, this form will be sent (once the resident identifies the supervisor) rather than the default evaluation form under the general settings.



Once the RIS method has been set up, the trainee will receive an e-mail the specified number of days prior to the rotation end date where they'll be requested to identify the faculty they worked with on that service for that rotation. Once the trainee identifies their supervisor(s), those faculty members will receive the evaluation form the administrator chose in either the default settings or at the service level of the RIS setup process.

Self-Initiated Method

Programs have the ability to set up self-initiated evaluations for both residents and faculty. These are evaluations residents or faculty members can send at any time. While the administrator does not have to deliver these forms, the administrator must create and finalize the evaluation forms before a resident or faculty member can initiate evaluations on their own.

There are a few types of evaluations that can be initiated:

- Faculty-Initiated Resident Evaluations (i.e. evaluations of a trainee initiated by the faculty member)
- Resident-Initiated Faculty Evaluations (i.e. evaluations of a faculty member initiated by the trainee)
- Resident-Initiated Peer Evaluations (i.e. evaluations of another trainee initiated by a trainee)
- Resident-Initiated Self Evaluations (i.e. evaluations of themselves initiated by themselves)
- Faculty-Initiated Peer Evaluations (i.e. evaluations of other peer faulty initiated by a faculty member)
- Resident-Initiated Program Evaluations (i.e. evaluations of the program initiated by the trainee)
- Faculty-Initiated Program Evaluations (i.e. evaluations of the program initiated by the faculty member)

• Resident-Initiated Performance Evaluations (i.e. evaluation of the trainee to a faculty member initiated by the trainee)

If a program chooses to use this method of evaluation delivery, the initiation of such evaluations must be enabled in program settings from the home page.

- 1. From Program Settings, select the Evaluations tab.
- 2. Find the section on Self-Initiated Evaluations.
- 3. Set up the initiation by choosing which type of evaluation can be initiated by either the faculty member or a trainee.

If selecting the "Faculty Initiated Resident Evaluation", click on the "Add Form" button.

Faculty-Initiated Resident Evaluation(s):	Evaluation Form: Special C		
	(none)		
	+ Add Form		

Choose the evaluation form that the evaluator will use and identify any special options (anonymity or electronic signature). Add Form.

Add Faculty-Initiated Evaluation of Resident

Evaluation Form:	(select form)
Special Options:	(standard)
Mobile Access:	
	Add Form

4. Once the form is added, the faculty member will now see a button on his/her evaluations tab called, "Initiate Performance Evaluation of a Resident."

Initiate Performance Evaluation of a Resident

Once they select this button, they'll choose the trainee and the evaluation that was identified in program settings will be sent to them for completion.

5. Follow the same process above for other self-initiated evaluations. The trainees or faculty members will get an "initiate evaluation" button on their evaluations tab based on the type of evaluation chosen.

Evaluation Functions

Home > Evaluations Tab

On the right hand side of the main evaluations page is a list of "Evaluation Functions"

Evaluation Functions					
View Completed Evaluations					
Incomplete Evaluations					
Residents Identify Supervisors					
Outside Evaluators					
Off-Program Evaluators					
Evaluation Groups					
Locked Questions					
Export Evaluation Data					
Evaluation Trends					
Milestones Summary					
Faculty/Outside Service & Clinic Assignments					
Evaluation Coverage Matrix					
Fill-Out Evaluation for a Faculty Member					
Fill-Out Evaluation for an Outside Evaluator					
Fill-Out Patient/Staff Evaluation of Resident					
Fill-Out Patient/Staff Evaluation of Faculty/Service/Program					
Custom Answer Types					

This is where you can, among other things, view completed and incomplete evaluations, fill out evaluations on behalf of others, create custom answer types as well as the following functions.

To add an Outside Evaluator -

1. Select the "Evaluations" tab from the MedHub portal page (Home) and click on the "Outside Evaluators" link.



2. Select the "Add Outside Evaluator" button. Modify Outside Evaluator List

Use the following list to define outside evaluators to which you send evaluations.



Add Outside Evaluator

First Name:*		
Last Name:*		
User Type:*	Resident -	
	✓ Resident	
Email:*		
Linan.	Faculty	
	Staff	
Location:	Patient	
	Student	
	Student	
Location Abbrev:		

The outside evaluator will receive an e-mail with a link to the delivered evaluation which allows them to access and complete the evaluation without logging into MedHub.

In addition, if there are faculty from other programs at the institution (that aren't usually a part of the home program) or residents/fellows from other programs that also may evaluate the program's trainees, do NOT make then an outside evaluator, but an Off-Program Evaluator instead. These individuals already have a MedHub profile from their respective programs.

1. From the evaluations tab, select the "Off-Program Evaluators" link.

Evaluation Functions
<u>View Completed Evaluations</u> Incomplete Evaluations Residents Identify Supervisors
Outside Evaluators Off-Program Evaluators Evaluation Groups Locked Questions

2. To add faculty, select the "Add Faculty to List" link. To add other trainees, select the "Add Resident to List" link.

Faculty Members			Residents	Residents			
Faculty:	Program:	Actions:	Resident:	Program:	Actions:		
(none)			(none)				
+ Add Faculty			+ Add Resident				

Select the program the faculty member or trainee is associated and select the individuals name from the list. Submit. That individual will now be available to send evaluations.

Add Faculty Members

Faculty Members to Add:
Akers, Merrill Braxton, Lajuana
Burkett, Maggie Casey, Erik
Shift/Ctrl to select multiple
Submit

Faculty Members

Faculty:	Program:	Actions:
Akers, Merrill	ANES-CARD	X Remove
+ Add Faculty		

To see which faculty are assigned to services, click on the "Faculty/Outside Service & Clinic Assignments" link

Faculty/Outside Service & Clinic Assignments
Evaluation Coverage Matrix
Fill-Out Evaluation for a Faculty Member
Fill-Out Evaluation for an Outside Evaluator
Fill-Out Patient/Staff Evaluation of Resident
Fill-Out Patient/Staff Evaluation of Faculty/Service/Program
Custom Answer Types

This will show a screen with all faculty/outside evaluators that are assigned permanently or scheduled to specific services in the program.

Faculty/Outside Service & Clinic Assignments

Service/Clinic: (all services/clinics)		Users: (All Faculty and Outside Evaluators) •	Assignment: (all)		
	Service/Clinic Name:	Evaluator Name:	User Type:		
Service	Blue	Devore, Mark	Faculty	7/1/2015-5/31/2016	Yes
Service	Dermatology	Devore, Mark	Faculty	(permanent)	Yes
Service	Family Medicine	Devore, Mark	Faculty	(permanent)	Yes
Service	Family Medicine	Hargrove, Jane	Faculty	5/5/2016-5/20/2016	Yes

To see what services are covered by any automated evaluations that are set up, click on the "evaluation Coverage Matrix" link. You will see a matrix of your services, and you can control which evaluation types show by clicking the "Matrix Settings" link.

Evaluation Coverage

Use this tool to identify coverage of Automated Evaluations and Residents Identfy Supervisors (if applicable).					
Service Group	Resident evaluation of faculty member	Faculty evaluation of a resident	Resident evaluation of a service/clinic	Resident evaluation of other resident (peer)	
AmbFamMed	Faculty of Resident Automated RIS	Faculty of Resident Automated End of Rotation Evaluation RIS			
Blue	Faculty of Resident Automated RIS	Faculty of Resident Automated End of Rotation Evaluation RIS			
Community Medicine & Research	Faculty of Resident Automated	Faculty of Resident Automated End of Rotation Evaluation			

Program Settings

Home>Program Settings>Evaluation Tab

Evaluation program settings are where to find the settings on when an evaluation is considered late, how to control access to evaluations, and the default options for delivery of forms. For more information on each setting, go to your program settings in MedHub, and click the "?" to see a knowledge base article. Program Settings

	General	Schedules	Procedures	Evaluations	Conferences	Duty Hours	Custom Alerts			
									_	
	General E	valuation Se	ettings							
	Evaluations	Due:*		30	30 days ▼ 0					
	Minimum Sl	hared Service Da	ays for Delivery:*	6 d	ays 🔻 🛛					
Minimum Shared Clinics for Delivery:*			3 c	linics 🔻 🛛						
Email Resident on Performance Evaluation:]						
Mask Evaluator Name from Mentor View:				0						
				Tr	acking Status:		Resident Alert	ts:		
	Track Resid	ent Evaluation R	Reviews:	L,	/es - Residents (only)	Verify v	(disabled)	•	0	
	Enable Tiere	ed Evaluations:			0					
	Tiered Evalu	uations - Lock af	ter Delivery:	14	days ▼ 0					
	Residents Io	dentify Superviso	ors (<u>Settings</u>):							

Access to Evaluations

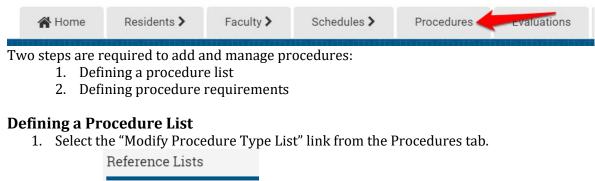
Show Competency/Milestone Charts:	0
Service Head Access to Service Evaluations:	Show all evaluations 🔻
Resident Access to Faculty Evaluations:	Show all faculty evaluations
Resident Access to Patient/Staff/Peer Evaluations:	Hide until 3 completed evaluations (per form)
Resident Access to Student Evaluations:	Hide until 3 completed evaluations (per form)
Resident Access to Alert Comments:	
Resident Access to Aggregate View:	<mark>~</mark> 0
Faculty Access to Aggregate View:	Hide until 3 completed evaluations (per form) 🔻 Release in blocks of 3 🔻 🛛

Evaluation Form Options

Require Electronic Signatures:	0
Disable "Insufficient Contact" links:	0
Require Comment on "Insufficient Contact":	0
Email Admin on "Insufficient Contact":	0
Attach Curriculum Objectives to Forms:	
Display Scale Descriptions on Completed Evaluations:	
Repeat Scales on Consecutive Questions:	0

Defining and Managing Procedures

From the MedHub portal page (Home), select the "Procedures" tab located on the top navigation menu.





2. To add procedures, select the "Add Individual Procedure Type" or the "Import Procedure Type List" buttons. The "Import Procedure Type List" will allow the administrator to upload a list of procedures from an Excel file (.xls).

Procedure Type List

Use this list to define the types of procedure types logged by the residents/fellows in your program.

Procedure Type:	<u>CPT®:</u>	Actions:
(no procedure type codes defined)		

If choosing to manually add each individual procedure, name the type of procedure that should be added to the list. This list will be viewed by the trainees as they log their procedures.

Add Procedure Type

Procedure Type Name:*	Central Line Placement	
CPT® Code:		
Evaluation:	(program default) ▼	Always send evaluation
	Submit Add Another Procedure Type	

⁺ Add Procedure Type + Import Procedure Type List

4. Select "Submit." The procedure will be added to the list of procedures.

Procedure Type:	<u>CPT®:</u>	Evaluation:	<u>Certify:</u>	Required for Certification:	Actions:
Central Line Placement		(program default)	Yes		Modify
Knee Injection		(program default)	Yes		Modify
Laceration - Sutures		(program default)	Yes		Modify
Lumbar Punture		(program default)	Yes		Modify X Delete

Defining Procedure Requirements

1. From the Procedures tab, select the "Add Procedure Type Requirement." Procedure Requirements

PGY(s):	Procedure Types:	Requirements:	Order:	Actions:
(none defined)				
+ Add Procedure Typ	e Requirement			

2. Add the various requirements pertinent to a specific procedure.

Add Requirement

Use this form to add or modify requirements for this program

Label (optional)			
)		
Types (one required)	All Types	Levels (required)	Requirement (one required)
Abdominal Paracentesis Amputation appendectomy Arterial Line Arthrocentesis (other joints) Arthrocentesis of the knee joint Breast examination Burn off wart Central Line Central Venous Line Placement	HIV - Provide care to a Transgendere HIV - Provide end of life/palliative HIV - Provide mental health screenin HIV - Provide prophylaxis of opportu HIV - Provide substance abuse screen HIV - Provide substance intervention HIV - Provide treatment adherence co HIV - Provide treatment of opportuni HIV - Provide treatment of opportuni HIV - Provide treatment of opportuni HIV - Normal treatment of treatment of opportuni HIV - Normal treatment of the cond con	Level 1 Level 2 Level 3 Level 4 Level 5 Level 6 Level 7 Level 8 Level 9	Add Requirement [cancel] QTY: 1 Select one or more of the following: Total Logged (any role) Performed Assisted Observed Supervised Read & Interpreted Simulated
Drawing Arterial Blood (ABIM required) Drawing Venous Blood (ABIM required) Select the proceeding of the proceedin	HIV Management of Urgent Medical Con HIV Provider Preventive Services (va		+ Add Requirement

- Select the trainee levels to which the procedure requirement pertains, if any
- Define the requirement (number of total procedures, number of total must be primary performed, etc.)
- Repeat for other procedures if necessary

For those programs required to log procedures through the ACGME web site, MedHub can change the procedures link in the top navigation menu to go directly to the ACGME website. Please send MedHub a support ticket with this request.

Program Settings

Home>Program Settings> Procedure Tab

Procedure program settings are where to find the settings for procedure definitions and logs. If you need further information about a setting, in MedHub click on the "?" to see a knowledgebase article.

Procedure Form Setting	gs	
Supervisor Menu:*		All Faculty
Include Residents in Supervis	or List:	<mark>- 0</mark>
Track "Visit Types" (options):*	÷	(do not track visit types) 🔻
Include Clinics in Location Lis	st:	2
Include "Patient ID" in Log:		<mark>- 0</mark>
Allow Batch Procedure Entry:		0
Procedure Types		
Maximum Procedures Types	per Form:*	3 🗸 🖌
Force at least One (1) Proced	ure Type:	
Residents can log "Other" Pro Types:	cedure	0
Procedure Roles:		_
Procedure Roles:		Performed
		Assisted
		Observed
		Supervised
		Read & Interpreted
		Simulated
Diagnosis Types		
Method to Record Diagnosis:	Selected from	List (program-defined) 🔻
Diagnosis Code Label:	ICD-10 V	
Maximum Diagnoses per Form:*	1 •	
Force at least One (1) Diagnosis:		
Enable Diagnosis Roles:		
Verifications, Certifications & Eva	aluations	
Residents Initiate Procedure Evaluations:	Default Evaluati Mini-CEX	on Form:
Enable Procedure Verifications:	• •	
Certify Residents for Procedures:	Enabled - Certi	fy Only 🔻 🕑
Verifying Supervisor at threshold to		
Certify: Disable Evaluation if Resident is	0	
Certified: Disable Verification if Resident is Certified:	e	
	Save Settings	

Creating and Managing Conferences

From the MedHub portal page (Home), select the "Conferences" tab on the top navigation menu.

nts >	Faculty >	Schedules >	Procedures	Evaluations	Conferences	Reports
3636			- Internal Medicine	d hat het het het h	adhab ab ah:	dhattirthattSet

Defining Conference Groups

1. Select "Define Conference Groups." This is the first step in creating and scheduling conferences for the training program. At least one conference group must be defined to begin using the conference functionality in MedHub. Defining conference groups allows the training program to calculate conference requirements for different types of conferences.

In most programs this will be very simple – the program could define a conference group called 'All Conferences' to drive attendance requirements across all conferences within the program, or at a minimum, to begin tracking attendance for their conferences. Other programs may decide to drive multiple requirements for different types of groups (example: by PGY level) and therefore would need to create a conference group for each. Examples of multiple conference groups are:

- Journal Club
- Grand Rounds
- Morning Report
- Morbidity and Mortality (M&M)

Conferences

Conference Maintenance

<u>Update Conference Schedule</u> View, print, modify, and delete conferences for this program.

Define Conference Requirements Specify conference attendance requirements for mis program.

Define Conference Groups Specify conference groups for this program.

2. Select "Add Conference Group."

Conferences

Conference Maintenance

<u>Update Conference Schedule</u> View, print, modify, and delete conferences for this program.

Define Conference Requirements Specify conference attendance requirements for this program.

Define Conference Groups

Specify conference groups for this program.

3. Create a name of a conference group that may need defined requirements. Submit.

	Conference Groups
	Conference Group:* Grand Rounds
	Enable Public View:
	Submit
•	Conference Requirements Define Conference Requirements." Conferences
0	efine Conference Requirements." Conferences
•	efine Conference Requirements."
•	Vefine Conference Requirements." Conferences Conference Maintenance

2. Select the "Add Resident Requireme Conference Requirements

Jse this section to add or modify the conference requirements for this program. (?)				
Resident Conference Requi	rements			
Requirement Name:	Conference Group(s):	Level(s):	Exception(s):	Required:
(no requirements set)				
+ Add Resident Requirement	View All Requirements			Rotations Marked "Exempt"

- 3. Define the conference requirements for all conferences groups or for an individual conference group. This includes:
 - Defining a requirement name for the conference group.
 - Identifying the PGY level(s) to which this requirement applies (i.e. all PGY levels or specific PGY levels).
 - Defining the requirement by either using credits or percentages (Percentage requirements are recommended). If defining requirements by credit, conferences must carry at least one credit.
 - Defining any exemptions to the requirement.
 - **Absences** if a trainee has an approved absence from the program, they will be exempt from attending a scheduled conference.
 - **Offsite Rotations** if a trainee is scheduled for an off-site rotation (a rotation that is tagged to a site that is not "Internal"), he/she will be exempt from scheduled conferences while on that off-site rotation. (Review the site/funding link from the home page to understand which sites are indicated as "off-site" for the training program.)
 - **Released Rotations** if a trainee is released to another program for a rotation and are not expected to attend a scheduled conference, he/she can be exempt from attending.

• **Rotations Marked Exempt** – Any rotation marked as 'exempt' will relieve the trainee from attending a conference.

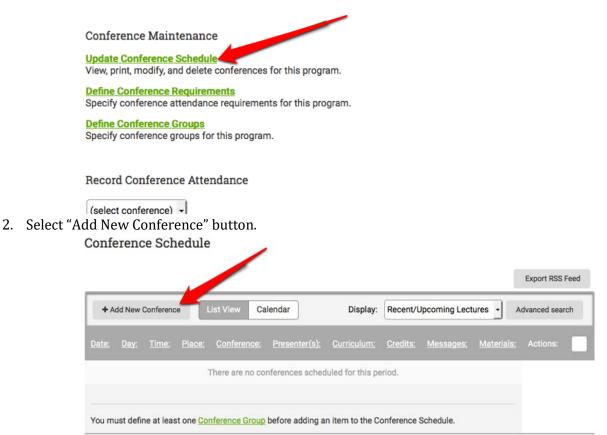
NOTE: Exemptions eliminate a trainee's obligation to attend a conference. However, their name still appears on the attendance sheet for exempt conferences in the event they attend an exempt conference.

Repeat, if necessary, for other conference groups.

Creating the Conference Schedule

1. Select "Update Conference Schedule."

Conferences



- 3. Add information pertaining to a conference that includes:
 - Name or title of conference.
 - Define a location of the conference.
 - Identify a date and start/end time of the conference.
 - You can opt to "batch" schedule conferences that occur on the same day and time at a specified frequency (weekly, bi-weekly, etc.) during a specific data range (i.e. academic year). However, if the program adds the same place or the same lecturer when batch adding multiple conferences, the location and the name of the lecturer will populate all of these conferences. Because of this, when batch adding conferences, it is best not to define a lecturer or location unless each instance of the conference will have same lecturer and take place at the same location.

New Conference

Conference Title:*	
Place:	
Date/Time:*	Date: Start Time: End Time: 08/08/2016 12:00am 12:00am (MM/DD/YYYY) 12:00am 12:00am
	Create multiple conferences using the following rules (?) Day(s) of the week: Sundays Mondays
	Tuesdays Wednesdays Shift/Ctrl for multiple
	Frequency: Every week Date ending: (MM/DD/YYYY)
	Conferences will begin on the lecture date indicated above. At least one day must be selected above and start/end dates must be in the same academic year.

- Add the lecturer by selecting from the *list* of program faculty, *searching* for other faculty within the institution or adding an *"other"* presenter that may be outside of the institution. (*"Other"* lecturers only receive conference notifications if an email address is entered for them.)
- Add any credits attendees will receive for attending this conference. (Used for conference requirements by credit.)
- Select the conference group this conference will be assigned.
- Opt to make conference mandatory. This is displayed as an asterisk (*) on the conference schedule and on the personal calendar.
- Opt to post to trainees and faculty personal calendars in MedHub.
- Assign one or more of the ACGME competencies to the conference.
- Assign to all PGY levels or specific PGY levels.
- Opt to share this conference with other programs whose trainees may also attend this conference. If sharing with other programs, only the author program will be able to edit certain information about the conference.

Credits:*	1 • ?	Mandatory:
Group:*	Grand Rounds -	Post to Calendar: 🗸 🁩
Competencies:	Interpersonal Communication Skills (ICS)	Practice-based Learning and Improvement
	Medical Knowledge	Professionalism
	Patient Care	Systems-based Practice
Post to programs:* [<u>select all</u>]	Anesthesiology and Pain Management Depl	t
	- Adult Cardiothoracic Anesthesiology	
	- Anesthesiology	
	- Critical Care Medicine	
	- Obstetric Anesthesiology	

4. Click "Submit.

Once conferences have been scheduled, they will be listed under the "Update Conference Schedule" link. Here the program can also upload any materials related to the conference and add additional information to each conference such as exact titles of the conference based on presentations and identifying the different lecturers for each conference. The lecturer will also have the ability to upload any materials if assigned as the lecturer to a particular conference. You can make changes to individual conferences, even if the conferences were entered in "batch" mode.

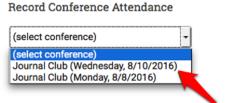
Conference Schedule

											Export RS	S Feed
+ Add Ne	w Conference	List View Ca	endar					Display:	Recent/Upco	ming Lectures	Advanced se	earch
Date:			<u>Place:</u>	Conference:	Presenter(s):	Curriculum:	<u>Credits:</u>	<u>Messages:</u>	<u>Materials:</u>			
8/8/2016	Monday	11:00am-12:00pm	Location	<u>Journal</u> <u>Club</u>		Back to the Basics	1	0	<u>0</u>	Attendance	X Delete	
8/10/2016	Wednesday	11:00am-12:00pm	Location	<u>Journal</u> <u>Club</u>		Back to the Basics	1	0	<u>0</u>	Attendance	X Delete	
8/15/2016	Monday	11:00am-12:00pm	Location	<u>Journal</u> <u>Club</u>		Back to the Basics	1	0	<u>0</u>	Attendance	× Delete	

Recording Conference Attendance

Now that conference requirements have been defined and the conference schedule has been created, all users (residents, faculty) within the training program will be able to view the conference schedule. The administrator has the ability to record attendance after the conference has been held.

1. To record conference attendance, select the particular conference from the pull-down under Record Conference Attendance from the Conferences tab.



2. Record trainee's attendance by clicking on the checkboxes by each trainee's name. Faculty attendance can also be taken on the same attendance sheet as well. Faculty conference attendance must be enabled under Program Settings, Conferences tab for their names to appear on the attendance sheet. Note, you can also mark a trainee as "Excused" from a conference (E) or late to a conference (L). This information is available in certain reports. Also, excused conferences are removed from requirements.

Conference Attendance: Journal Club (Wednesday, 8/10/2016)	•		·
Select/Remove All			
INTERNAL MEDICINE			Select/Remove All
Applicant Test, Learning (1)		Resident 1, Applicant (1)	
E Excused residents	Late residents		
Deliver Learning Module			

- 3. To print a conference attendance sheet for sign-in, click on the 'print attendance sheet' link at the top of the attendance sheet.
- 4. To identify trainees with recorded absences, select the "Attendance Sheet Settings" link.



5. Enable "Identify residents with recorded absences" by clicking on the checkbox. This will identify on the conference attendance sheet who has a recorded absence.

Attendance Shee	t Settings
Signature Line Style:	Signature Line 💌
Instructions:	To receive credit for attending this conference, place your initials next to your name below. If you were not able to attend the entire conference, please list the start and end times of attendance after your name.
Display Options:	Identify residents with recorded absences
	Sort residents by level
	 Display bar code for mobile device materials download Submit
NOTE: Attendance sheet u	ses the settings of the program that initially created the conference.

Journal Club (Monday, 8/8/2016)	
Select/Remove All	
INTERNAL MEDICINE	
Applicant Test, Learning (1)	Resident 1, Applicant (1)
Noted Absences: V Vacation C Away Conference LOA Leave of Absence	E Excused residents

Program Settings

Home>Program Settings>Conferences Tab

Conference program settings are where to find the settings for who shows on attendance sheets, as well as other conference settings. If you need further information about a setting, in MedHub click on the "?" to see a knowledgebase article.

Conferences Settings	
Send Email Alert to Lecturers:*	First Notice: Second Notice: 3 Day(s) prior to lecture I Day(s) prior to lecture
Display Conference Times:*	Standard Format (am/pm) 🔻
Conference presenter name display:*	Full name 🔻
Conference change notifications:*	Prompt to send notifications 🔻 🛛
Faculty Conference Attendance:	✓ ₀
Visiting Resident Conference Attendance:	
Student Conference Attendance:	
Track Outside Evaluator Attendance:	
Attendance Tracked by Residents:	0
Mark "Excused" Residents/Faculty:	0 e
Mark "Late" Residents:	•
Enable Asynchronous Conference Credit:	✓ ₀
Credit for Attending "Exempt" Conference:	✓ 0
Upload Attendance (Card Reader):	
Mobile Attendance Scanning (<u>codeREADr</u>):	✓ ₀
Public Conference Schedule View:	https://preview.medhub.com/functions/public/conferences.mh?p=481
Public Conference RSS Feed:	✓ e <u>https://preview.medhub.com/functions/public/conferences_rss.mh?p=481</u>
	Save Settings

System Help Overview

Administrators can direct all questions involving institutional process issues to the GME office by clicking on the "Help" button on your top navigation menu and logging a support ticket by selecting GME Office or e-mail them directly.

Administrators can also log a support ticket directly to MedHub Support by following the instructions above and selecting "MedHub Support" as the recipient. MedHub can only respond to questions around training. **We do not answer question related to internal institutional process and are prohibited from creating or removing user profiles or, editing, deleting or otherwise directly managing any data.** Those revision approvals must go through the GME Office.

Help Resources	Support Tickets
Contact Admin/Sup	port (?)
	fedHub Support ▼ fedHub Support
Message *: G	ME Office
	Browse No file selected.
	Browse No file selected.
	Browse No file selected.
	Send Message
Ticket History	
(no tickets logged)	

For additional review of the information outlined in this manual, MedHub has a series of on-line video tutorials that are available. From the MedHub portal page (Home), select the Help tab.

A Home	Residents >	Faculty >	Schedules >	Procedures	Evaluations	Conferences	Reports	Help

There will be a list of video tutorials that are available to administrators for viewing. We encourage you to review these to assist in understanding the various functionalities in MedHub.

Help Resourc	es Support	Tickets	
earch Resourc	es		
1			Search
1			
ew Content			
	<u>Delivering a Tes</u>	<u>t</u>	Requesting an Absence by Trainees
		how to deliver a test to sulty members once it has been	This tutorial reviews how the Trainee can request an absence using the on-line workflow method enabled by the program.
	Viewing time: 4.25	nin	Viewing time: 4.75 min
rowse Resourc	.53		
B Knowledgel	base Articles	Video Tutorials	MAN User Manual
requent Questions	s (FAQ)	Overviews	Introduction
onferences		Conferences	Accreditation
uty Hours		Demographics	Conferences
valuations		Duty Hours	Duty Hours
orms/Fields		Evaluations	Evaluations
eneral		General/Other	Faculty
ogin/Security		Portfolios	Procedures
nyProfile		Procedures	Reporting
ortal		Scheduling	Resident Demographics
rocedures		> All Tutorials	Scheduling
eporting			Task Wizards
cheduling			> View User Manual