ISO new england

System Operating Procedures

SOP-RTMKTS.0200.0070

Evaluate OPTI Training Program Effectiveness

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SOP-RTMKTS.0200.0070
Evaluate OPTI Training Program Effectiveness

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1. Objective

NOTE

Before implementing any modification to current Operational Performance, Training & Integration (OPTI) policies, procedures or practices recommended by auditors or outside authorities, equivalent existing procedures or practices must be compared to the recommended change and evaluated for value added, applicability to ISO and cost effectiveness by the Manager, OPTI and affected OPTI staff.

The objective of this procedure is to define and document the process OPTI uses for the evaluation of the effectiveness of the training programs it develops and/or implements. This procedure describes the processes used for both formative and summative evaluation of those programs. This procedure applies to the following OPTI programs: Training Operations Professionals Program (TOPP), Continuing System Operator Training, and OPTI Instructor Training Programs. The Program Descriptions for each of the programs are located in the Enterprise Document Library (EDL) in Real Time Markets, Related Documents.

2. Background

OPTI is responsible for providing training programs for Control Room Operations System Operators, as well as providing selected training for other ISO personnel and personnel outside of ISO.

System Operator training programs are developed and executed in accordance with North American Electric Reliability Corporation (NERC) Reliability Standards, Northeast Power Coordinating Council Inc. (NPCC) Directories, Criteria, Guides and Procedures, and ISO policies, manuals and procedures. To comply with both the letter and intent of NERC Reliability Standard PER-005 - System Personnel Training, OPTI is responsible for implementing a Systematic Approach to Training (SAT) process that will ensure the validity and reliability of internal ISO System Operator Training programs. This approach requires the ISO System Operator Training programs be based on the following five phase SAT model: Analysis, Design, Development, Implementation and Evaluation (ADDIE). This System Operating Procedure (SOP) identifies the processes and standards necessary to successfully complete systematic evaluation of System Operator training programs.

As part of the implementation of the SAT process, OPTI is responsible for routine and systematic evaluation of the system operator training programs it produces for internal and external customers.

3. Responsibilities

1. The Manager, OPTI is responsible for:
   A. Establishing standards and processes for routine and systematic evaluation of OPTI developed and implemented training programs and, timely incorporation of changes to training programs identified as a result of the evaluation.
   B. Ensuring the timely and comprehensive collection and analysis of the data prescribed by the processes of this SOP.
   C. Ensuring the availability of evidence that an evaluation of OPTI training programs effectiveness has been performed on an annual basis.
   D. Ensuring the existence of a system that will incorporate any needed changes identified during the training effectiveness evaluation process into existing training programs.
2. The Systematic Approach to Training Manager (SAT Manager) is responsible for performing instructor performance evaluations.
3. For each training course assigned, an OPTI Instructor is responsible for:
   A. Performing the data collection activities necessary to support the training effectiveness evaluation process.
   B. Performing the data analysis activities necessary to support the training effectiveness evaluation process.
   C. Compiling the needed changes to training programs identified during the training effectiveness evaluation process.
   D. Ensuring the documentation of the compiled required changes to training programs through the Training Change Request process, as described in SOP-RTMKTS.0200.0015 - Request OPTI Training and Changes to Training.
   E. Documenting recommended improvements to the TTSE, if applicable.
   F. Executing the required changes to training programs.
4. OPTI Training Administrator (TA) is responsible for the filing of all evaluation instruments in accordance with this procedure and SOP-RTMKTS.0200.0025 - Maintain OPTI Records.

4. Controls

1. Data collection and analysis shall be undertaken by qualified personnel only.

5. Instructions

5.1 Formative Effectiveness Evaluation

5.1.1 Evaluate Instructor Performance

1. The Manager, OPTI or a peer trained in the instructor evaluation process and designated by the Manager, OPTI as an Evaluator shall evaluate each Training Coordinator or SME assigned as an instructor associated with either the Training Operations Professionals Program (TOPP) or the System Operator Continuing Training Program for effective implementation of that course in a training program on an annual basis when the training is repeatable.

2. The Evaluator shall record the results of the instructor evaluation on the Attachment B - Classroom Instructor Evaluation Instrument, Attachment C - Exercise Instructor Evaluation Instrument, or Attachment D - OJT Instructor Evaluation Instrument,.

3. When required, the Manager, OPTI (or designee) shall either remediate any TC or SME found deficient on the basis of the instructor evaluation through either individualized coaching or referral to an external program prior to the next scheduled training assignment for the evaluated TC or SME.

5.1.2 Evaluate Trainee Reaction

1. At the end of every course implementation, the following actions shall be completed:

   A. Each responsible OPTI Training Coordinator (TC) shall provide a copy of Attachment E - Trainee Course Evaluation Form to each trainee.

   B. When a copy of Attachment E is received, each trainee shall complete and return the completed copy to the OPTI TC.

   C. When the OPTI TC has collected a copy of Attachment E from each trainee, the OPTI TC shall forward the completed Attachment E copies to the OPTI TA

   D. When the Attachment E copies are received from the OPTI TC, the OPTI TA shall:

      (1) Electronically file each Attachment E - Trainee Course Evaluation form

      (2) Use each Attachment E to generate and electronically

file an Attachment F - Trainee Course Evaluation Summary

(3) No later than one week from the conclusion of the training segment, upload the completed Attachment F to the applicable SharePoint program file.

5.1.3 Evaluate Tests

1. The Manager, OPTI (or designee), shall re-evaluate all test items receiving either greater than 90% correct responses or less than 20% correct responses for instructional validity/reliability problems.

2. Using the results of the test item evaluation, the Manager, OPTI shall provide:

   A. Test item evaluation results feedback to the responsible OPTI TC.

   B. Test item analysis data and analysis feedback to the OPTI TA.

3. When the test item analysis data and analysis feedback is received from the Manager, OPTI, the TA shall upload the data to the appropriate SharePoint program files.

5.2 Summative Effectiveness Evaluation

5.2.1 Collect & Analyze Trainee Post-Training Feedback

1. Within three months following the conclusion of a training program for all ISO internal and Joint ISO/LLC training programs the following actions shall be completed:

   A. The Manager, OPTI (or designee) shall provide a copy of Attachment G - Trainee Post-Program Feedback to selected participants of the training program.

   B. When a copy of Attachment G is received, each selected participant of the training program shall complete and return the copy to the Manager, OPTI (or designee).

   C. The Manager, OPTI (or designee) shall use the completed Attachment G copies to analyze the trainee post-program feedback results and fill out a copy of Attachment H - Summary of Trainee Post-Program Feedback for each training program.

   D. The Manager, OPTI (or designee) shall provide a completed copy of Attachment H to the OPTI TA.

   E. When the completed copy of Attachment H is received, the OPTI TA shall upload an electronic version to the appropriate training program SharePoint files.

5.2.2 Collect & Analyze Supervisor Post-Program Feedback

1. When at least three months has passed following the conclusion of a training program and when Job and Task Analysis data is available, the following actions shall be completed:

   A. The Manager, OPTI (or designee) shall provide copies of Attachment I - Supervisor Post-Program Feedback to selected on-shift supervisors of trainees that have completed the training program.

   B. When a copy of Attachment I for a training program is received, each selected on-shift Operations Shift Supervisor shall fill out and return the copy to the Manager, OPTI (or designee).

   C. When completed copies of Attachment I for each training program are received, the Manager, OPTI (or designee) shall analyze the results of the completed Attachment I copies and fill out an electronic copy of Attachment J - Summary of Supervisor Post-Program Feedback.

D. The Manager, OPTI (or designee) shall provide a completed copy of Attachment J to the OPTI TA.

E. When the completed copy of Attachment J is received, the OPTI TA shall upload an electronic version to the appropriate database training program files.

5.2.3 Assess Trainee Post-Training Retention of Training

1. For ISO internal training programs only, the Manager, OPTI (or designee) shall conduct assessments of each trainee post-training retention of material as follows:

A. Using the retention test results that have been collected and compiled in accordance with SOP-RTMKTS.0200.0065 - Implement OPTI Testing, identify all test items answered correctly less than 80% of the time.

B. Using a copy of Attachment L - Inadequately Retained Objectives, compile a list of the instructional objectives associated with the identified test items

C. Submit a completed copy of Attachment L to the OPTI TA.

D. When the completed copy of Attachment L is received, the OPTI TA shall upload an electronic version to the appropriate training program SharePoint files.

5.3 TTSE Fidelity Improvements

1. When a training exercise or evaluation exercise is completed, the Exercise Instructor will complete a copy of Attachment M - TTSE Fidelity Feedback form to:

   A. Document the TTSE fidelity deficiencies identified by the Instructor and/or trainees.

   B. Recommend a course of action to correct the deficiencies.

2. The Manager, OPTI (or designee) shall review the recommended course of action and:

   A. Either approve or disapprove.

   B. If necessary, add additional actions.

3. When all recommended and approved actions are completed the Exercise Instructor will date and return a completed copy of Attachment M to the Manager, OPTI

4. The OPTI TA shall file each completed Attachment M in accordance with SOP-RTMKTS.0200.0025 Maintain OPTI Records.

5.4 Records

1. The OPTI TA shall file the following completed documents in accordance with SOP-RTMKTS.0200.0025 - Maintain OPTI Records:

   A. Instructor evaluations with instructor names removed (Attachments B, C and D)

   B. Training Course Evaluations Summaries (Attachment F)

   C. Summaries of Trainee Post-Program Feedback (Attachment H)

   D. Summaries of Supervisor Post-Program Feedback (Attachments J)

   E. Inadequately Retained Objectives (Attachment L)

5.5 Results

1. On an annual basis as a minimum, the Manager, OPTI (or designee) shall scrutinize all OPTI Training Program evaluation results and compile all changes indicated as being needed to training programs.

2. The Manager, OPTI (or designee) shall document and execute all compiled required changes to training programs through the training change request process, as described in SOP-RTMKTS.0200.0015 - Request Training and Changes to Training.

6. Performance Measures

1. Changes that need to be made to training programs are documented and can be tracked through the training change request system.
2. Evaluation results are documented in a timely manner.

7. References

NERC Reliability Standard PER-005 - System Personnel Training

SOP-RTMKTS.0200.0015 - Request OPTI Training and Changes to Training

SOP-RTMKTS.0200.0025 - Maintain OPTI Records

SOP-RTMKTS.0200.0065 - Implement OPTI Testing

8. Revision History

Rev. No.	Date	Reason	Contact
0	12/11/09	Initial draft procedure	Cheryl Robinson
1	07/18/11	Biennial review by procedure owner; Updated Copyright date in Header and procedure owner; Replaced page numbers in Footer with Page X of Y format; Global replaced Operational Performance and Training Department (OPTD) with Operational Performance, Training & Integration (OPTI) group; Section 1 added NOTE, modified; Section 2 modified; Section 3 deleted former step 3.1 and sub-steps (Director Responsibilities; Added new step 3.2; Modified step 3.3.F, step 3.4; Section 5.1 modified step 5.1.1, step 5.1.1.2, step 5.1.1.3, Step 5.1.2.1 and sub-steps, step 5.1.3.1, & 2 and sub-steps, added new step 5.1.3.3; Section 5.2 modified Title, added and modified new step 5.2.1.1, added new sub-step B, and clarified sub-steps A & C, corrected Attachment titles, added new sub-steps 5.2.1.2 D & E, modified section 5.2.2 title, modified step 5.2.2.1 and sub-step A, added new sub-step 5.2.2.1.B, modified sub-step 5.2.2.1.C, added new sub-steps 5.2.2.1.D and 5.2.2.1E, modified sub-Section 5.2.3 and step 5.2.3.1, added new sup-steps 5.2.3.1.A, B, C and D; Added new Section 5.3, section, step and sub-steps; Added new Section 5.4 section ,steps, and sub-steps; Renamed former section 5.3 as new Section 5.5; Section 6 Deleted Annual report; Section 7 References added RTMKTS.0200.0065; Section 9 to list of Attachment titles: retired Attachments A and K and corrected various Attachment titles and added new Attachment s L & M; Attachment A retired; Modified titles and content of Attachments B, C , D, E, F, G, H, I, & J; Replaced Attachment K; Added new Attachments L & M	Steve Weaver

9. Attachments

Attachment A - Retired (mm/dd/yyyy)

Attachment B - Classroom Instructor Evaluation Instrument

Attachment C - Exercise Instructor Evaluation Instrument

Attachment D - OJT Instructor Evaluation Instrument

Attachment E - Trainee Course Evaluation Form

Attachment F - Trainee Course Evaluation Summary

Attachment G - Trainee Post-Program Feedback

Attachment H - Summary of Trainee Post-Program Feedback

Attachment I - Supervisor Post-Program Feedback

Attachment J - Summary of Supervisor Post-Program Feedback

Attachment K - Process Flow Evaluate Training Program Effectiveness

Attachment L - Inadequately Retained Objectives

Attachment M - TTSE Fidelity Feedback

Attachment A - Retired (mm/dd/yyyy)

Attachment B - Classroom Instructor Evaluation Instrument

Instructor: _____ **Observer:**_____

Program: _____

Course: _____ **Date:** _____

Start Time:_____ **Finish Time:** _____

Attach observation narrative, if desired. **N/O=*Not observed***

Presentational Validity	**Yes**	**No**	**N/O**	**Comments and/or Frequency Counts if a Problem Is Detected**
All content contained in lesson plan is presented				
Content is presented in same sequence it appears in lesson plan				
Methods prescribed in lesson plan are the methods instructor uses				
Media prescribed in lesson plan are the media instructor uses				
Practice exercises prescribed in lesson plan are engaged in during instruction				
Verbal and Nonverbal Behaviors	**Yes**	**No**	**N/O**	**Comments and/or Frequency Counts if a Problem is Detected**
Speech is articulate				
Pitch is not distracting				
Volume suits environment				
Pace appropriate to group				
Gestures used to support content				
Eye contact spread evenly and maintained				
Movement used for transition and /or emphasis				
No distracting mannerisms shown				

Organization of Instruction	**Yes**	**No**	**N/O**	**Comments and/or Frequency Counts if a Problem is Detected**
Beginning focus created/interest catcher used				
Objectives presented as they pertain to lesson plan				
Internal summaries presented				
Topic transitions signaled				
Lesson summarized				
Use of Instructional/Audio Visual Aids	**Yes**	**No**	**N/O**	**Comments and/or Frequency Counts if a Problem is Detected**
Aids used to reinforce learning points				
Stand-alone aids commented on during use				
Aid used in no distracting manner				
Interacting/Questioning Reinforcing	**Yes**	**No**	**N/O**	**Comments and/or Frequency Counts if a Problem is Detected**
Questions asked of whole group				
Responses elicited from individuals				
Refrains from posing rhetorical questions				
Refrains from immediately answering own questions				
All participants involved				
Responses probed				
Inappropriate responses redirected				
Variety of reinforcement types used				

Comments:

Attachment C - Exercise Instructor Evaluation Instrument

Instructor: _____ **Observer:**_____

Program: _____

Course: _____ **Date:** _____

Start Time:_____ **Finish Time:** _____

Attach observation narrative, if desired.

Preparation	**Yes**	**No**	**N/A**	**Comments and/or Frequency Counts if a Problem Is Detected**
Simulator ready.				
All applicable paperwork available.				
Current Training Exercise Guide utilized.				
Introduction	**Yes**	**No**	**N/A**	**Comments and/or Frequency Counts if a Problem Is Detected**
Objectives of exercise presented.				
Initial Conditions/Brief presented.				
Any planned use of “pause” explained.				
Verbal and Nonverbal Behaviors	**Yes**	**No**	**N/A**	**Comments and/or Frequency Counts if a Problem is Detected**
Speech is articulate				
Pitch is not distracting				
Volume suits environment				
Pace appropriate to group				
No distracting mannerisms shown				

Instruction	Yes	No	N/A	Comments and/or Frequency Counts if a Problem is Detected
All content in Training Exercise Guide is practiced by trainees				
Identified Best Practices discussed and/or demonstrated.				
Questions asked of whole group				
Responses elicited from individuals				
All participants involved				
Responses probed				
Variety of reinforcement types used				
Notes are taken.				
Exercise is Paused if any of these behaviors observed (if applicable): • Event misdiagnosis • Failure to monitor critical parameters • Procedure non-compliance • Inappropriate non-compliance • Dysfunctional team behaviors				
Simulator Problem dealt with IAW procedure.				
Simulator Debrief/Summary	**Yes**	**No**	**N/A**	**Comments and/or Frequency Counts if a Problem is Detected**
Operators asked to self-critique				
Specific examples of performance; strengths and weaknesses are identified.				
Questions used to analyze team responses.				
Simulator Training Session and objectives are summarized.				

	Best features of Simulation:
	Suggestions to Improve Next Time:

Comments:

Attachment D - OJT Instructor Evaluation Instrument

Instructor: _____ **Observer:**_____

Program: _____

Course: _____ **Date:** _____

Start Time:_____ **Finish Time:** _____

Preparation	**Yes**	**No**	**N/A**	**Comments and/or Frequency Counts if a Problem Is Detected**
All necessary equipment, tools, references, procedures, are in place prior to session				
Trainee prerequisite training completion is reviewed prior to the session				
Introduction	**Yes**	**No**	**N/A**	**Comments and/or Frequency Counts if a Problem is Detected**
Establishes rapport and put the trainee at ease				
Previews the task by explaining the task purpose, importance, and relation to duty area/job				
Demonstration	**Yes**	**No**	**N/A**	**Comments and/or Frequency Counts if a Problem is Detected**
Positions trainee for best viewing of task demonstration				
Requests trainee to refer to OJT Student Guide and go through the steps orally during demonstration				
Demonstrates task performance in conformance with procedure				
“Talks through” the task while demonstrating it				
Summarizes demonstration by repeating task purpose and performance, as well as steps performed				
Calls for questions on demonstration				

Coached Practice	Yes	No	N/A	Comments and/or Frequency Counts if a Problem is Detected
Asks trainee to explain task purpose and importance, as well as how it relates to work upstream and downstream				
Has trainee practice the task in reasonably-sized “chunks”				
Has trainee “talk through” the tasks as he/she performs them				
Gives appropriate feedback as trainee practices task				
Redirects incorrect actions by asking questions				
Repeats coached task performance as many times as necessary for trainee to perform whole task without error				
Gives trainee the opportunity to ask questions				
Performance	**Yes**	**No**	**N/A**	**Comments and/or Frequency Counts if a Problem is Detected**
Has trainee perform task unassisted				
Asks trainee to self-assess and gives feedback on unassisted performance of task				
Documents OJT training session				

Comments:

Attachment E - Trainee Course Evaluation Form

Training Dates:

Location:

Name of Instructor:

Name of Course:

Your evaluation of this training course will be used to improve upon future teaching of the course. Please evaluate each area on the following scale: five (**5**) excellent (**E**), four (**4**) good (**G**), three (**3**) neutral (**N**), two (**2**) fair (**F**), one (**1**) poor (**P**) & not applicable (**N/A**).
Please circle your choice.

Course Content:	**E**	**G**	**N**	**F**	**P**	**N/A**
Stated learning objectives were effectively met	5	4	3	2	1	___
Applicable prerequisite requirements were appropriate	5	4	3	2	1 ____	___
Course materials relevant to course objectives	5	4	3	2	1 ____	___
Method of instruction appropriate for subject matter	5	4	3	2	1 ____	___
Time allotted for learning activity was appropriate	5	4	3	2	1 ____	___
Instructor was effective in delivery of course materials	5	4	3	2	1 ____	___
Facilities and training equipment was appropriate	5	4	3	2	1 ____	___
Materials issued for the course were appropriate	5	4	3	2	1 ____	___

Comments:_____
_____
_____
_____
_____
_____

Trainee Course Evaluation Form
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Attachment F - Trainee Course Evaluation Summary

EvalSummary.xlsx

	A	B	C	D	E	F	G	H	I	J	K	L	M
1		Course-Instructor											
2	Date	1	2	3	4	5	6	7	8	9	10	Inst.	Comments
3	mm/dd/yy	5	4	3	2	1	0	5	4	3	2	Init	
4	mm/dd/yy	5	4	3	2	1	0	5	4	3	2	Init	
5													
6		5.0	4.0	3.0	2.0	1.0	0.0	5.0	4.0	3.0	2.0		2.9

Course - Instructor | Summary Sheet

EvalSummary.xlsx

	A	B	C
1	Training	Instructor	Average
2	Course	Instructor Name	2.86
3		Evaluations - Average - Cycle X:	2.86

Course - Instructor | Summary Sheet

Attachment G - Trainee Post-Program Feedback

Date Submitted: _____

Program/Cycle: _____ **Date of Training:**_____

Completion instructions: Please respond to the following statements about the course objectives. Based on what you now know about your job in relation to the training you received in the course, rate the statements by circling the appropriate number on the rating scale.

N/A=Not Applicable

SD=Strongly Disagree

D=Disagree

N=Neutral

A=Agree

SA=Strongly Agree

Overall Evaluation	N/A	SD	D	N	A	SA
Overall, the training was effective in teaching me required skills and knowledge I need to do my job.						
Objective:	**N/A**	**SD**	**D**	**N**	**A**	**SA**
1. The objective is related to my job.						
2. Classroom training on the objective provided me the knowledge I need to perform the associated task on the job.						
3. On-the-job/simulator training provided me with the skills I need to perform the associated task on the job.						
4. If this was training to a task, I perform this task the same way it was taught to me during training.						
Objective:	**N/A**	**SD**	**D**	**N**	**A**	**SA**
1. The objective is related to my job.						
2. Classroom training on the objective provided me the knowledge I need to perform the associated task on the job.						
3. On-the-job/simulator training provided me with the skills I need to perform the associated task on the job.						
4. If this was training to a task, I perform this task the same way it was taught to me during training.						

Objective:	N/A	SD	D	N	A	SA
1. The objective is related to my job.						
2. Classroom training on the objective provided me the knowledge I need to perform the associated task on the job.						
3. On-the-job/simulator training provided me with the skills I need to perform the associated task on the job.						
4. If this was training to a task, I perform this task the same way it was taught to me during training.						
Objective:	**N/A**	**SD**	**D**	**N**	**A**	**SA**
1. The objective is related to my job.						
2. Classroom training on the objective provided me the knowledge I need to perform the associated task on the job.						
3. On-the-job/simulator training provided me with the skills I need to perform the associated task on the job.						
4. If this was training to a task, I perform this task the same way it was taught to me during training.						
General Comments:						

Attachment H - Summary of Trainee Post-Program Feedback

Average Perceived Effectiveness of Training:_____

Perception Ratings by Objective

Objective Number	1	2	3	4	5	6	7	8	9	10
The objective is related to the job.										
Classroom training on the objective provided the necessary knowledge										
On-the-job/simulator training provided the necessary skills										
The task is performed the same way it was taught										

Collected Comments:

Attachment I - Supervisor Post-Program Feedback

Supervisor Name: _____ **Date:** _____

Trainee: _____

Program: _____ **ILA#:** _____

Date:_____

Completion instructions:

This evaluation is designed to obtain information which assists the OPTI group assessment of the effectiveness of training programs.
Based upon your observations of the individual, please rate his job performance on each of the listed objectives by circling the appropriate number, using the following scale:

0 = Not Observed

1 = Unacceptable

2 = Performance trainee unable to perform task due to lack of skill/knowledge

3 = Adequate trainee performance
(trainee performs task with a sufficient display of skill/knowledge)

4 = Very competent trainee performance
(trainee performs task with good display of skill/knowledge)

5 = Extremely competent trainee performance
(trainee performs task with outstanding display of skill/knowledge)

Observed Task	Rating Number					
	0	1	2	3	4	5
#1:						
#2:						
#3:						
#4:						

Attachment J - Summary of Supervisor Post-Program Feedback

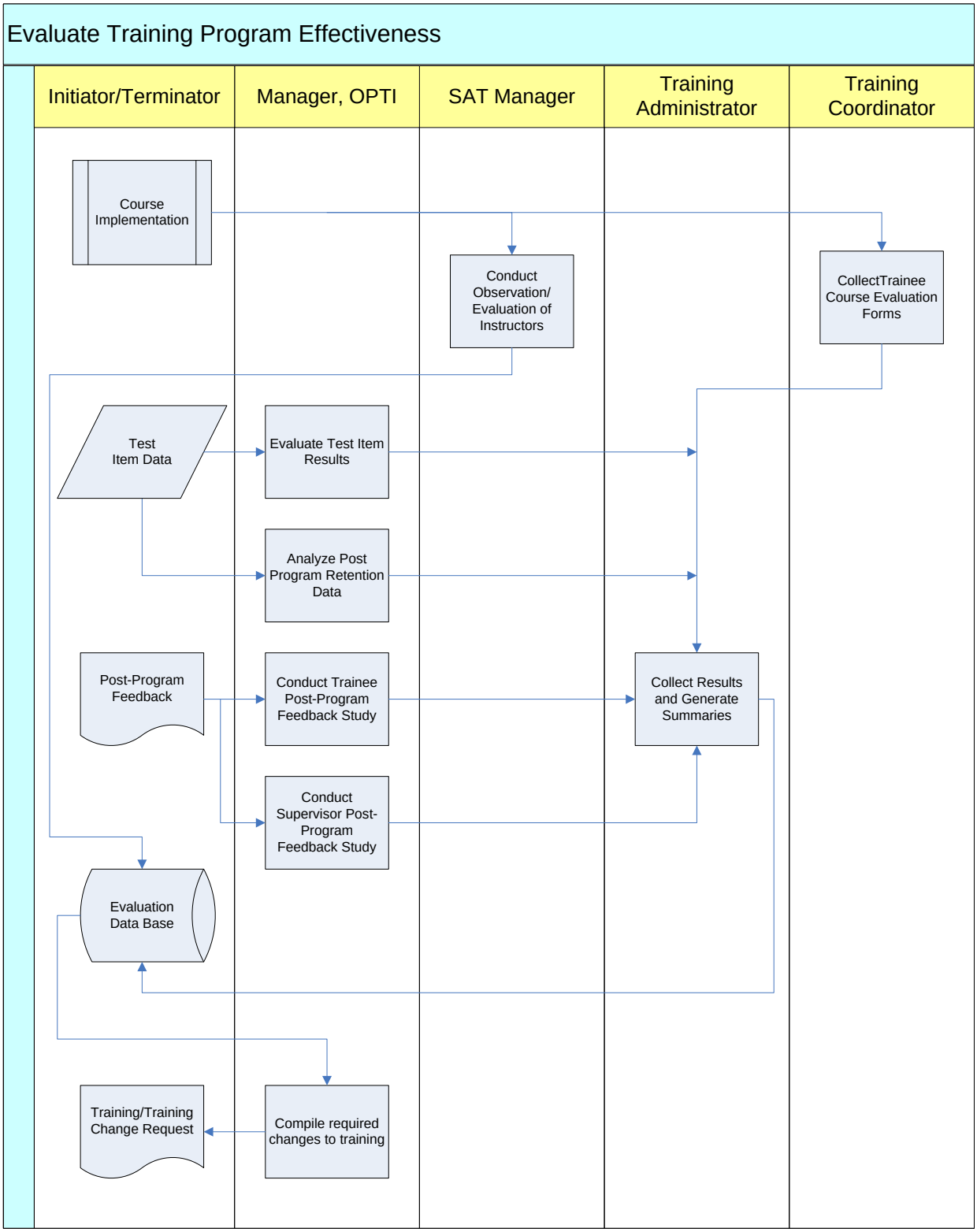
Program: _____ **ILA#:** _____

Date: _____

Task #	Average Rating

Task #	Average Rating

Attachment K - Process Flow Evaluate Training Program Effectiveness



Attachment L - Inadequately Retained Objectives

Training Dates: _____ **Modules(s):** _____

Instructional Objective #	Instructional Objective Text

Attachment M - TTSE Fidelity Feedback

ScenarioTitle:

Scenario Number:

Description of Issue:

_____
_____
_____
_____
_____
_____
_____
_____
_____
_____
_____
_____
_____

Reviewed by Exercise Instructor:

Recommended Course of Action

Course of Action (Circle one): Approved Not Approved No Action Required

By Manager, OPTI (initials/date):

Additional Actions required by Manager, OPTI:

_____
_____
_____
_____

Course of Action Completed (date):