

STAFF APPRAISAL AND DEVELOPMENT POLICY

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Sponsor	Kath Griffin, Director of Human Resources

Version	Date of amendments	Author	Update Comments
1.0	July 2010	Vicki Humphrey	
2.0	October 2010	Dennis Little	Incorporates HRSG comments on incremental progression
3.0	March 2011	Dennis Little	Incorporates staff side comments on draft policy
4.0	April 2011	Dennis Little	Incorporates amendments from Board of Directors
5.0	May 2012	Dennis Little	Revised to remove e-KSF references, clarify link to mandatory training compliance and to remove increments for those at the top of the scale currently.
6.0	July 2012	Dennis Little	Revised to reflect comments by Human Resources Strategy Group
7.0	May 2013	Dennis Little, Workforce Development and Education Manager	Revised in line with Agenda for Change pay progression terms and conditions.
7.1	December 2013	Dennis Little Workforce Development and Education Manager	Revised following EC and PC comments.
7.2	August 2016		Request approved by PC to extend review date to August 16

CITY HOSPITALS SUNDERLAND NHS FOUNDATION TRUST

DOCUMENT APPROVAL PROFORMA

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Policy Number: HR1.SAD.V7.1			
Name of Author: Dennis Little, Workforce Development and Education Manager			
Name of Sponsor: Kath Griffin, Director of Human Resources			
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Equality Impact Assessment: If this policy has a potential discriminatory impact please record below the person who has informed and involved the sponsor:			
Name:			
Title:			
Date:			
NB: It is the sponsor's responsibility to submit the policy through the CHS approval route.			
Checklist for the review and approval of the policy			
	Is the policy compliant with:	Yes/No	Comments
	Corporate style	Yes	
	Format including duties,	Yes	
	Content; intended outcomes clearly described	Yes	

	Evidence base; key references included and cited in full	Yes	
	Associated documentation recorded	Yes	
	Review/consultation process: List of groups/committees included with the policy	Yes	
	Appropriate stakeholders consulted	Yes	
	Approval: Staff side committee (if appropriate)		
	Dissemination & implementation: appropriately described	Yes	
	Training: requirements included (where appropriate)	Yes	
	Document control: table updated appropriately	Yes	
	Monitoring compliance/ effectiveness: adequate description and appropriate monitoring	Yes	
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Committee Approval

Committee which forms the approval process: Policy Committee

Date of approval: 10 10 13

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1. INTRODUCTION

- 1.1** City Hospitals Sunderland (herein after referred to as the Trust) is committed to providing the necessary support so that staff are able to meet the required standards of job performance and recognises that its continued success is dependent upon staff achieving and maintaining these standards.
- 1.2** A well structured and regular appraisal is essential for the development of all staff. The appraisal process is designed to support the achievement of the organisational vision as it involves translating business objectives into individual objectives.
- 1.3** The appraisal is used by managers to provide feedback to staff on their performance and the opportunity to agree actions to help and encourage future development and, where appropriate, career progression. It also supports staff by identifying learning and development needs. The process is designed to ensure staff feel valued and confident in their contribution to the Trust vision. Appraisals will be carried out in a flexible manner to ensure they are of most benefit to the staff and managers participating in them, and ultimately to the organisation in terms of outcomes relating to work performance. This may include group appraisals and appraisals with contributions from other managers who provide a professional input into the individual's work.
- 1.4** The appraisal process is also linked to the NHS Knowledge and Skills Framework (KSF), competence development and pay progression. The KSF framework is designed to identify the knowledge and skills staff need to apply in their posts; help guide development and provides the basis of pay progression within the national pay structure. The national agreement determines that staff must achieve expected standards of performance and delivery, in order to progress through any increment on the Agenda for Change pay scales. Satisfactory performance will include the goals set out in KSF outlines, achievement of agreed objectives and maintenance of competence in all general and role specific mandatory training fields.
- 1.5** In implementing this policy, managers must ensure that all staff are treated fairly and promote equality of opportunities for all. Information on staff and managers whose increments are stopped will be maintained and analysed to detect any potential bias against staff of any particular protected characteristic.
- 1.6** It is recognised that some staff may need support in the process (whether it be literacy, understanding or other support). If any employee has special needs or is unable to understand or read the text, then this policy will be explained on a one-to-one/face-to-face basis either by their manager or other staff member agreed with the individual. All support given will be in confidence.

Refer to Easy Read Version and Appendix .

2. PURPOSE AND SCOPE

2.1 The policy provides a framework for the appraisal process for managers and staff in City Hospitals Sunderland. It should in general be a forward looking process focussed on consolidating and improving good performance and identifying and planning development needs. The policy also reflects the fact that pay progression is linked to satisfactory appraisal being undertaken both by managers and staff.

2.2 An appraisal covers three main areas;

1) Review the performance against -

- agreed individual and/or team objectives (based on Trust objectives and service plans, national targets etc)
- the KSF outline for the post (for staff on Agenda for Change conditions)
- any professional competences, Preceptorship requirements, HCA competences etc required by the postholder
- Compliance with mandatory and role specific training required by the postholder

The review should include how any learning or qualification completed by the appraisee has impacted on their job performance. It may also include information from 360 degree processes where these have been carried out.

2) .Jointly agree the individual and/or team objectives for the next 12 months in line with the departmental objectives and Trust vision, having reviewed them in the light of last year's performance

3) As an outcome of the review create a personal development plan (PDP) for the next 12 months, based on objectives, maintenance or changes in competence requirements for the role, mandatory and role specific training requirements, and the KSF requirements (for employees on Agenda for Change conditions)

A template is available to record PDP information and is located within the Education and Training Section of Human Resources within the Corporate Functions Section

2.3 The policy applies to all staff groups except Medical and Dental staff who are covered by their own agreement.

2.4 Detailed information regarding the NHS KSF is available on the Trust intranet site and Department of Health website (www.dh.gov.uk)

3. DUTIES

This section identifies the roles and responsibilities of the Trust in the appraisal process.

3.1 Board of Directors

The Board of Directors is responsible for approving and supporting the appraisal framework.

3.2 Chief Executive

The Chief Executive has ultimate responsibility for ensuring that the workforce is competent and capable and that an appraisal framework is in place for all staff and that the Trust vision and objectives are cascaded down and included in personal objectives

3.3 Heads of Services (including Divisional General Managers//Directorate Managers) are responsible for:

- completing an annual appraisal with their direct reports within the terms of this policy
- monitoring that all staff within their department have an annual appraisal and ensure consistency is maintained.
- ensuring that Trust and department/directorate objectives are cascaded down and included in personal and/or team objectives
- ensuring that all staff have undertaken appropriate training and are made aware of this policy

3.4 Line Managers and Appraisers are responsible for:

- Each manager must ensure that every staff member has an annual appraisal and that they undertake appropriate training/training updates as necessary.
- The role of appraiser should be delegated to the most appropriate person on a cascade basis within each team.
- The appraiser should hold a more senior position than the appraisee and be familiar with them and their work.
- To ensure individual objectives are set within the overall objectives/direction of the department, and the individuals contribution to team objectives, CQUIN targets etc is discussed
- Where practicable, a line manager should carry out appraisals for their staff after their own appraisal has been completed.

- Ensure KSF post outlines are updated in line with job roles and job descriptions.
- The appraisal should be carried out with reference to the KSF for the post for staff on Agenda for Change terms and conditions and be the basis of the appraisee's personal development plan
- Managers must ensure an appraisal is carried out by the end of the month prior to the appraisee's next pay increment to allow for the increment to be actioned by HR at the time it is due to be paid.
- Appraisers are responsible for recording the outcome of appraisals and documenting completion via the approved electronic system within the Trust, currently the Electronic Staff record (ESR). This will populate ESR system reports of completed appraisals.
- Line managers are also responsible for communicating to Divisional HR teams those staff whose appraisals had an unsatisfactory outcome and who need to have their incremental progression stopped
- Managers must collate agreed learning and development needs and produce a department/directorate training plan (please refer to the Training Needs Policy)
- Managers are responsible for planning, monitoring and evaluating learning activities throughout the year, to ensure that agreed learning objectives are being supported and achieved.
- Managers must meet with new staff within one month of them starting work to provide them with a copy of the KSF outline for their post and agree their performance objectives and personal development plan for their first 12 months in post.
- Managers must provide support if required for any staff member who has identified a learning difficulty or disability. All support will be provided in confidence

Definitions of the above terms are detailed in Section 4.

3.5 Individuals/Appraisees

- Each individual should prepare for their appraisal by recording evidence against the skills competences and objectives required within their post (including KSF requirements). Evidence should be recorded electronically where possible (for potential attachment to the ESR system) or other means for retention on personal files.
- Following the appraisal, individuals have a responsibility to strive towards achieving their agreed objectives (including contributing to team objectives and targets) and personal development plans.

- Individuals are required to identify and contribute to their own personal and professional development
- Individuals must seek advice and guidance from their manager if they are unsure of the appraisal process and training requirements.
- Individuals who require support gathering or presenting evidence because of a learning difficulty or disability must raise this with their manager. All support will be provided in confidence.

3.6 Human Resources Directorate

- To provide relevant training for all staff (appraisers and appraisees) on Induction and at any other points that refresher training is required.
- To provide training on the Trust's approved electronic system for recording activity (this is via the ESR system).
- To monitor compliance against this policy and produce organisational reports on appraisal statistics on a regular basis for HR Strategy Group and the Board of Directors
- To generate ESR reports on appraisals which have not been completed, to provide information on which staff should not receive increments at the due date. This will also cover equality aspects of the process to demonstrate any unintended bias.
- To collate training needs from personal development plans on an annual basis
- To provide advice and guidance to managers in the drafting and/or reviewing of KSF outlines.
- To quality check KSF outlines for new roles against national standards/expectations and identify any discrepancies with managers
- To support managers with any staff performance and/or conduct issues relating to the implementation of this policy
- To regularly review the effectiveness of this policy

4. DEFINITIONS

- **Appraisal** – (also referred to as a Development Review, IPR or APR) Is an organisational process for assessing the performance of staff and their requirement for training and development, operated on an annual cycle. It is a partnership between staff and their line manager.
- **Appraiser** – the individual who is responsible for organising and leading the appraisal process, usually a line manager/supervisor. It is considered

best practice in the Trust that the maximum number of appraisees per appraiser is 10, although more may be possible where a team appraisal system is used for all or large parts of the appraisal.

- **Appraisee** – the member of staff having the formal assessment
- **360 degree appraisal** - is feedback that comes from members of an employee's immediate work circle. Most often, 360-degree feedback will include direct feedback from an employee's subordinates, peers, and supervisor(s), as well as a self-evaluation. It can also include, in some cases, feedback from external sources, such as customers and suppliers or other interested stakeholders
- **Objectives** – a clear set of goals that need to be achieved by the individual or team. The objectives should be SMART (Specific, Measurable, Achievable, Realistic and Time based) and relate to the departmental objectives and Trust vision.
- **Commissioning for Quality and Innovation (CQUIN)** – is a national system to link payment of a proportion of income to NHS service providers, to the achievement of defined quality targets.
- **Knowledge and Skills Framework (KSF) post outline** – post outlines set out the actual requirements of a post in terms of the knowledge and skills that need to be applied when that post is being undertaken effectively. There are two levels within an outline – foundation and full.
- **Gateways** – these are points on the national pay bands at which staff are assessed against the foundation outline and full outlines of the KSF. The foundation gateway always occurs at 12 months in post. The second gateway varies depending on pay band.
- **Personal Development Plan (PDP)** – This is produced following an appraisal/review and is a two-way process between the individual and the manager. The plan is a written statement outlining their education, learning and development needs against the skills and competences required for their post (including any requirements of the KSF post outline). It also includes the necessary mandatory training required over the coming 12 months.
- **ESR** – the Electronic Staff Record is an integrated Human Resources system for the NHS that holds information about staff and their posts, as well as recording appraisal information relating to them

5.0 THE APPRAISAL PROCESS

The appraisal process involves three key stages.

Please refer to **Appendix 1**. The business process for appraisal is located on the Trust Intranet and details how this system will be run, and how staff and their managers will be informed if their increment is at risk of being withheld.

5.1 Preparation

Within the first month of employment, the line manager/supervisor will meet with the individual to explain the KSF outline requirements for the post, agree objectives and develop the PDP. A mid year review should take place 5 months later to review progress. However it is advisable that line managers/supervisors hold regular 1:1's with individuals to discuss performance and progress against agreed objectives and PDP.

An appraisal meeting must be arranged by the end of the month prior to the employee's incremental date. The appraisee must be given at least 3 weeks' notice of this meeting. The appraisee must have collated/produced the necessary evidence against their objectives and required skills and competences, and completion of the PDP.

Staff who are not employed on Agenda for Change terms and conditions will still be expected to undergo an annual appraisal, though this will not be KSF based.

Support will be provided in presenting evidence for any staff member who has identified a learning difficulty or disability. All support will be provided with confidence.

5.2 Appraisal Meeting

The appraisal meeting should be a two-way process enabling the appraisee and appraiser to reflect on performance against the KSF post outline, agreed objectives and competences, and departmental performance targets such as CQUIN measures. The appraisal must cover the 3 key areas as outlined in section 2.2.

During the appraisal discussion the appraiser should take notes of the important points and outcome of the discussion.

In some posts where several staff perform the same role and objectives are largely team based, a team appraisal may be carried out.

The appraisal discussion should be:

- Private and confidential (unless otherwise agreed)
- Carried out in a relaxed atmosphere of mutual trust to allow an honest exchange of information and meaningful discussion with no interruptions

The appraisal should take into account information on performance throughout the year, so that undue influence of experiences close to the review are avoided.

5.3 Appraisal outcome/documentation

After discussion the Appraiser should accurately reflect the discussion within one week of the meeting taking place. This should be documented on ESR (please refer to guidelines on the Intranet - Appendix 3).

The notes must be sent to the appraisee

- if using ESR by the appraiser clicking the box stating “share with appraisee” and then ticking the box marked “update appraisal” under appraisee permissions
- if completed on paper, a copy of the documentation must be given in person to the appraisee, who should then add any of their own comments and indicate whether or not they agree with the content and future objectives and PDP. If the appraisal is carried out on paper then a copy of the completed documentation must be kept in the personal file. The appraisal date and outcome must be recorded in ESR by the manager to generate the employees increment.

The appraisee will need to refer to either ESR, or a copy of their KSF outline, objectives and PDP for reference throughout the year and to continually record evidence.

Support will be provided for any staff member who has identified a learning difficulty or disability. All support will be provided with confidence.

This process will be repeated on an annual basis (Appendix 1)

6 KNOWLEDGE AND SKILLS FRAMEWORK (KSF)

All NHS organisations are required by the Department of Health to use the KSF in their work practices for staff employed under Agenda for Change terms and conditions. It is a tool which has been developed nationally, in partnership with trade union and professional bodies and is the framework for career and pay progression. (Refer to NHS Knowledge and Skills Framework, DOH www.dh.gov.uk)

7 PAY PROGRESSION

7.1 Pay progression takes the form of an annual increase in pay from one pay point within a band to the next. Progression to all pay points within all pay bands will be conditional upon employees demonstrating that they have the requisite knowledge and skills/competence for their role and that they have demonstrated the required standards of performance and delivery. This will be monitored through the appraisal process.

7.2 Appraisals must be carried out by the end of the month before an employee's incremental date. Both the employee and their manager will be sent a notification by ESR to remind them to arrange this.

7.3 Staff who have not completed a satisfactory appraisal each year (including being fully up to date with their core and role specific mandatory training), will not progress to the next incremental pay point. Where a line manager has not completed an appraisal with an employee to enable them to progress to the next pay point, he/she will not receive an incremental pay increase and the matter will be dealt with in line with the Trust's Capability Policy and Procedure.

7.4 Where staff are on payscales 8c, 8d or 9, pay progression to the last 2 points must be annually earned and once awarded can only be retained subject to a satisfactory level of performance in a given year. These annually earned pay points do not qualify for pay protection. Staff already on the top 2 annually earned points on 1 April 2013 will not lose those points, but will have to earn any subsequent points as per this policy.

7.5 Where an appraisal is conducted and an employee is not achieving or maintaining the required skills, competences and standards of performance for the post, the matter should be dealt with in accordance with the Trust's Capability Policy and Procedure. This should operate on a "no surprises" basis, with performance issues being raised separately and/or prior to/after the appraisal. The line manager will also need to inform their Divisional HR Manager and the Workforce Development Team to ensure that the employee's pay increment is not paid in these circumstances.

8 DISAGREEMENT ABOUT THE CONTENT OF AN APPRAISAL

8.1 Where there is a disagreement about the content or outcome of the appraisal at any stage of the process, the appraisee should first outline these concerns to the manager undertaking the review, either verbally or in writing and attempt to resolve these informally. Any staff member identifying a learning difficulty or disability will be provided with support if required.

8.2 Where this process fails to reconcile any differences regarding the appraisal outcome or the process followed, the employee may raise a grievance at the next level within the Trust's Grievance Procedure, and relevant timescales.

8.3 Employees who believe their increment has been unfairly stopped due to the actions or inactions of others should also raise a grievance through the Trust's Grievance Procedure.

9 SPECIAL CASES

9.1 Where an employee is absent due to pre-planned sickness or maternity leave, the manager and employee should carry out the appraisal beforehand and take any necessary action so that the employee can achieve the required outcomes prior to the start of their absence and receive their pay increment on the due date. Where it is not possible to appraise the employee prior to their absence, they should be allowed to progress to the next incremental paypoint at the due date, unless there is already

evidence that the employee had been informed that their performance was below the level required and action had been agreed to bring it to the level required.

9.2 Where individuals do not meet the full outline for their role, a formal discussion should take place between the employee (and a staff side or other representative if the employee wishes) his/her line manager and the relevant HR Manager to establish whether or not the employee is capable of achieving the development requirements by an agreed date and if necessary will be dealt with under the relevant HR policy (e.g. Capability Procedure).

9.3 Where the manager responsible for appraising an individual is absent, the responsibility for appraising the employee will be delegated to a different manager.

10 MONITORING COMPLIANCE/EFFECTIVENESS OF THE POLICY

Requirement	Person Responsible	Method and Frequency	Reporting to	Action Plan By	Monitored by
Duties still current and appropriate	Author	3-yearly	HR Strategy Group	Sponsor	Policy Committee
Appraisals are carried out and recorded in ESR	Author	Quarterly Workforce Report	Executive Committee	Sponsor	Board of Directors
Pay increments are withheld where there is no evidence of a satisfactory appraisal	Author	Quarterly Workforce Report	Executive Committee	Sponsor	Board of Directors
Equality monitoring of staff whose pay increments have been withheld	Author	End of Year Workforce Report (Annual)	Executive Committee	Sponsor	Board of Directors

11 DISSEMINATION, IMPLEMENTATION AND TRAINING

11.1 Dissemination and Implementation

Team Briefing system

Dissemination of this policy to Managers will be via email and briefing at Senior Manager Forum

By "All User" email to all relevant staff

Via Trust and Departmental induction

By publication on the Trust Intranet

11.2 Training/Awareness

Directorate Management Teams will be responsible for the training/awareness of staff.

The Workforce Development and Education Team provide training in appraisal as part of the Trust training portfolio.

12 CONSULTATION, REVIEW AND APPROVAL/RATIFICATION

Consultation

HR Strategy Group
Joint Consultative Group

Approval

Executive Committee

Ratification

Policy Committee

13 REFERENCES

DH Knowledge and Skills Guide
NHS Terms and Conditions of Service Handbook

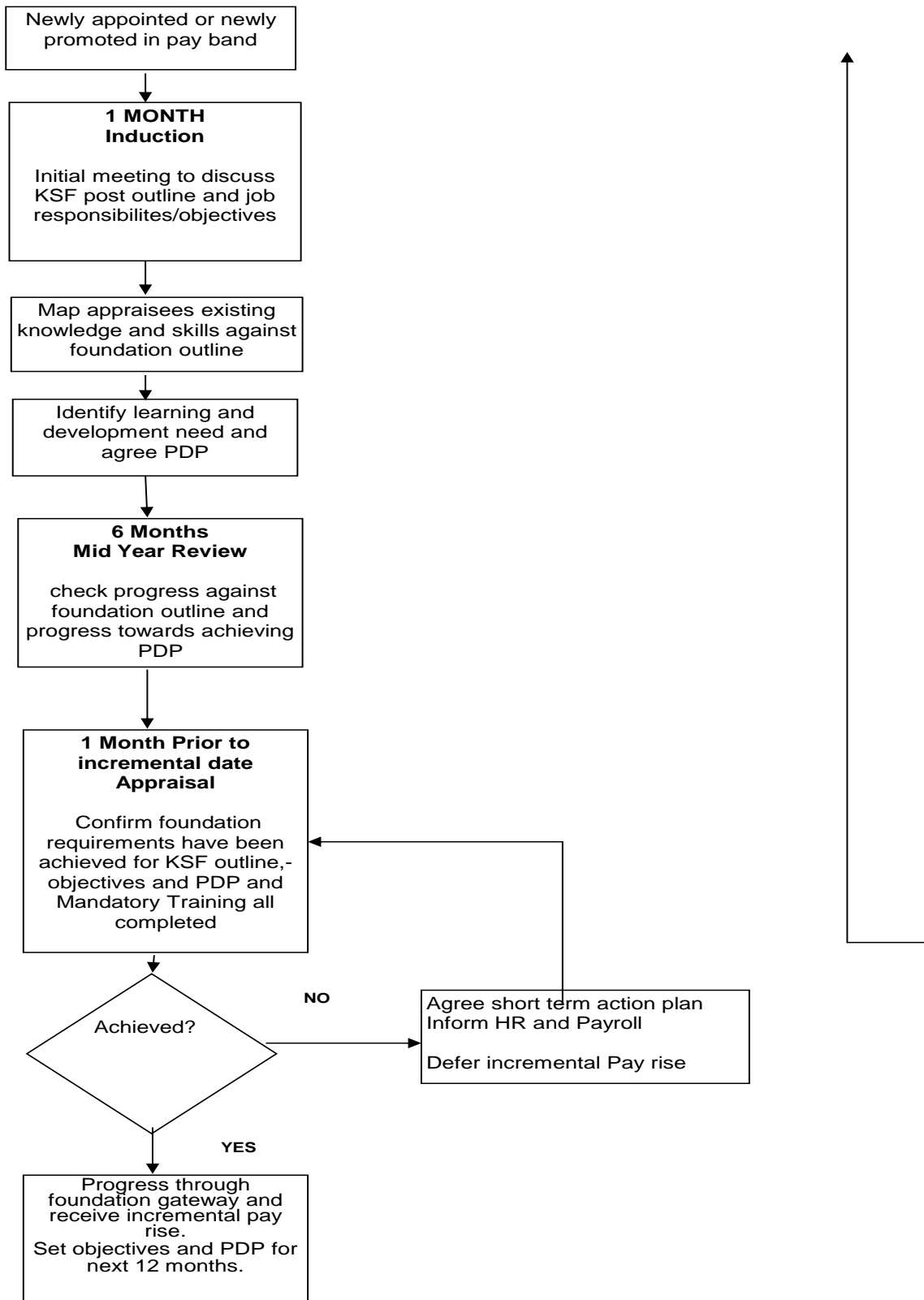
14 ASSOCIATED TRUST DOCUMENTS

Mandatory Training Policy
Training Needs Policy
Capability Policy and Procedure
Grievance Policy and Procedure
Disciplinary Procedure
Attendance Management Policy
ESR Manager and Employee Self Service Guides available on the Trust intranet

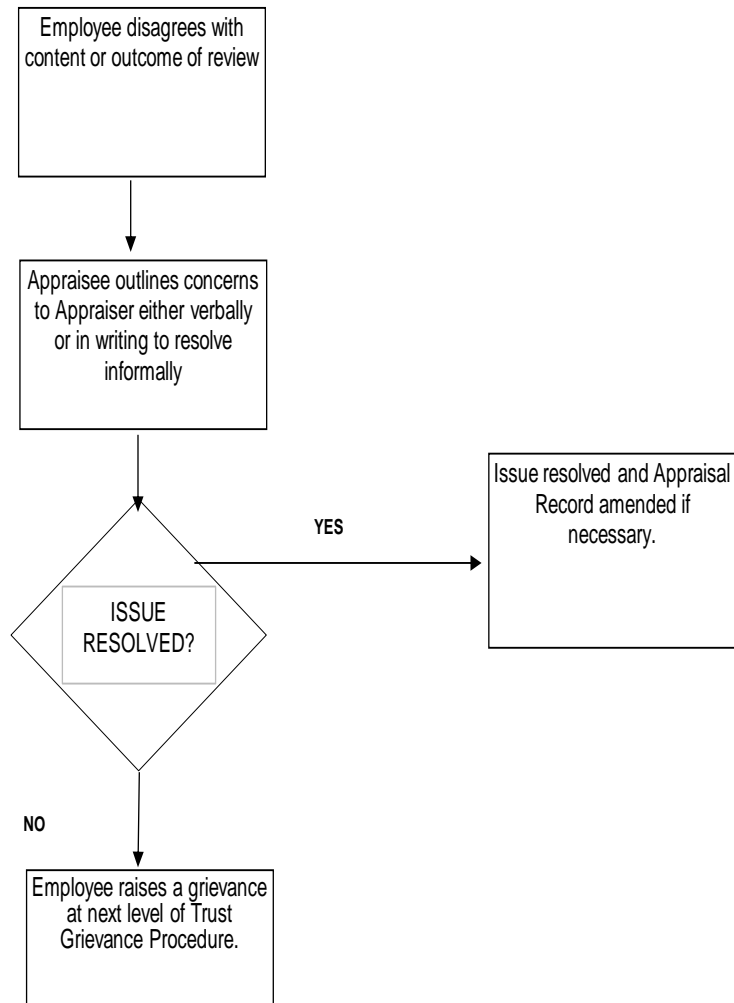
Appraisal Process

FLOW CHART 1 - First year

APPENDIX 1



FLOW CHART 3 - Resolving Disagreements



**APPRAISAL POLICY
EASY READ VERSION**

Managers will:

1. Meet with new staff within 1 month of their starting work and agree objectives /what they have to achieve and a personal development plan / what training they need to do. Managers will use the Knowledge and Skills Framework (KSF) outline for the post and any agreed competencies e.g. Healthcare Assistant competences to identify this.
2. Meet with each of their employees every year to review their performance and agree objectives and a personal development plan. The meeting must be held by the end of the month before the employee is due a pay increment.
3. Record the employee's appraisal on ESR.
4. Arrange for staff to complete ESR training as part of Trust Induction.
5. Provide support or alternative format to employees who have a learning difficulty or disability. All support will be provided in confidence.
6. Keep all KSF post outlines up to date.
7. Collate agreed training needs for their employees and produce a department/directorate training plan.
8. Consult with the relevant HR Manager if an employee is not meeting the KSF outline for the post.

Employees will

1. Meet with their manager and agree objectives / what they have to achieve and a personal development plan / training they need to complete over the coming year, using the KSF outline for the post.
2. Meet with their manager every year to review their performance, agree objectives and a personal development plan using the KSF outline for the post.
3. Prepare for the meeting by recording evidence on the computer using ESR or in paper format if necessary.
4. Tell their manager if they need any support.

CITY HOSPITALS SUNDERLAND NHS FOUNDATION TRUST

APPRAISAL CHECKLIST

NAME OF APPRAISEE:

POST/TITLE:

NAME OF APPRAISER:

DATE OF APPRAISAL:

Requirement (Last 12 months)	Tick Yes (or add comment if No)
Has Mandatory training been completed in order for a satisfactory appraisal to be recorded?	
Have the requirements of the KSF Outline for the post been achieved?	
Have individual Objectives been achieved?	
Has the individual's contribution to Team and Directorate Objectives been reviewed e.g. CQUIN	
Have any qualifications been achieved/ completed though formal training in the last 12 months e.g. Degree, NVQ?	
<i>If yes to the above-</i> Have you discussed with the employee how any knowledge and learning achieved in the last 12 months has been applied in their role	
Date Qualifications recorded in ESR	Date:

Requirement (Next 12 months)	Tick Yes (or add comment if No)
Have OGSMs/ Personal Objectives been issued?	
Has a Personal Development Plan (PDP) been identified for the coming year?	

Date appraisal recorded in ESR	Date:
--------------------------------	-------

APPRAISER CHECKLIST

1. What are the main duties/tasks/areas of responsibility of the appraisee's current job?
2. Are there any of the above where the appraisee has performed particularly well or had some difficulties?
3. What core behaviours/knowledge is required of the appraisee? (Refer to the KSF outline for the post)
4. Do you think the appraisee has any development needs associated with 2 or 3 above?
5. What are the Directorate OGSMs for the next 12 months and how do you expect the appraisee to contribute to them?
6. What are the service/department's plans for the next 12 months and
 - a. how, if at all, will these plans affect the appraisee's job?
7. Is the appraisee likely to have any development needs during the next 12 months associated with 5 or 6 above? If yes, how do you think these could be met?
8. Is the appraisee up to date with mandatory training in connection with their role? (refer to the Mandatory Training Guidance)
9. Is there anything else you would like to discuss?

APPRAISEE CHECKLIST

It may be useful to consider the following when preparing for your individual development and performance review. The checklist does not need to be 'handed in' but can be used to generate a discussion re: KSF.

1. How would you describe your present work situation?
 - (a) What is satisfying about it?
 - (b) What is less satisfying about it?
2. What do you feel is expected from you in your job and how do you feel you have performed over the last 12 months? (Refer to the KSF outline for your post).
3. What development needs, if any, do you think you have in relation to your current job?
4. What training/development activities have you received support for during the last 12 months and how has your work benefited as a result?
5. What ideas, if any, do you have to improve the service you provide?
6. Are you up to date with your mandatory training? (see Mandatory Training Guide)
7. Is there anything else you would like to discuss?

KSF OUTLINE REVIEW

CORE KSF DIMENSIONS	EVIDENCE	ACHIEVED/NOT ACHIEVED	AREAS FOR DEVELOPMENT	COMMENTS
COMMUNICATION				
PERSONAL/PEOPLE DEVELOPMENT				
HEALTH, SAFETY AND SECURITY				
SERVICE IMPROVEMENT				
QUALITY				
EQUALITY AND DIVERSITY				

SPECIFIC KSF DIMENSIONS (STATE)	EVIDENCE	ACHIEVED/NOT ACHIEVED	AREAS FOR DEVELOPMENT	COMMENTS

OBJECTIVES – INDIVIDUAL

OBJECTIVE	OUTCOME IF ACHIEVED (MEASUREMENT)	ACHIEVED	REASONS FOR NOT ACHIEVING	FURTHER ACTION NEEDED TO ACHIEVE

OBJECTIVES - TEAM

OBJECTIVE	OUTCOME IF ACHIEVED (MEASUREMENT)	ACHIEVED	REASONS FOR NOT ACHIEVING	FURTHER ACTION NEEDED TO ACHIEVE

PERSONAL DEVELOPMENT PLAN - INDIVIDUAL

NAME _____

WHAT IS THE DEVELOPMENT NEED	HOW WAS THIS IDENTIFIED (e.g. service plan, professional update requirement)	HOW DOES IT MEET DIRECTORATE/ DEPARTMENTAL OBJECTIVES	LEARNING AND DEVELOPMENT ACTIVITY (e.g. CPD accredited module, in house training programme, work shadowing)	WHAT IS THE DATE FOR PLANNED COMPLETION?	HAS THE LEARNING BEEN COMPLETED AND GIVE EXAMPLES OF HOW THIS IMPACTED ON PRACTICE	WHO ELSE COULD THIS LEARNING BE SHARED WITH

Name of Individual _____ Signature of Individual _____ Date _____

Name of Appraiser _____ Signature of Appraiser _____ Date _____

TEAM DEVELOPMENT PLAN

WHAT IS THE DEVELOPMENT NEED/INTEREST	NO OF PEOPLE	HOW WAS IT IDENTIFIED (e.g. service plan)	HOW IS THE NEED LINKED TO DIRECTORATE OR DEPARTMENTAL OBJECTIVES	LEARNING AND DEVELOPMENT ACTIVITY (e.g. group training session, individual study time)	WHAT IS THE DATE FOR PLANNED COMPLETION?	HAS THE LEARNING ACTIVITY BEEN COMPLETED AND GIVE EXAMPLES OF HOW THIS IMPACTED ON PRACTICE	WHO ELSE COULD THIS LEARNING BE SHARED WITH

Signature on behalf of team _____ Print Name _____ Date _____

Signature of Manager _____ Print Name _____ Date _____

APPRAISAL DISCUSSION SUMMARY / COMMENTS

Appraiser Comments:

Name
Signature
Date

Appraisee Comments:

Name
Signature
Date