

Appraisal Performance Review	Policy Register No: 04011 Status: Public
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Developed in response to:	Absence of policy to support achievement of appraisals for all staff
Contributes to CQC Regulation	17

Consulted With	Post/Committee/Group	Date
All members	Workforce Programme Board	May 2016
Professionally Approved By	Bernard Scully	May 2016

Version Number	4.2
Issuing Directorate	Human Resources
Ratified by:	DRAG Chairman's Action
Ratified on:	7 th June 2016
Trust Executive Sign off	June 2016
Implementation Date	7 th June 2016
Next Review Date	Extension agreed to December 2019
Author/Contact for Information	Cathy Lee, Head of Learning and Development
Policy to be followed by (target staff)	All Non- Medical Staff
Distribution Method	Intranet & Website
Related Trust Policies (to be read in conjunction with)	Mandatory Training Policy Agenda for Change Terms & Conditions Grievance Policy Equality and Diversity Policy Medical Appraisal Policy

Document Review History

Version No	Authored/Reviewed by	Issue Date
1.0		
3.0	Colleen Hart	26th April 2012
3.1.	Catherine Lee	June 2014
4.0	Catherine Lee	May 2016
4.1	Catherine Lee (to update responsibilities section)	21 August 2017
4.2	Nada Rogers – 6 month extension due to review & MSB harmonisation	13 th June 2019

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1. Purpose

- 1.1 The purpose of this policy is to ensure that the Trust has a robust professional approach to Appraisal and Development Reviews.
- 1.2 The policy provides a framework which ensures that the appraisal process within the Trust promotes innovation that leads to improved patient services and productivity
- 1.3 The appraisal process provides a framework and opportunity to incorporate Nursing and midwifery revalidation

2. Aims

- 2.1 To describe the appraisal process so that both appraisers and appraisees have a shared understanding of what is expected of the appraisal process and their job role.
- 2.2 To provide guidance to ensure all staff are treated in a fair and equitable way, ensuring that staff have the opportunity to discuss their progress and identify development needs in line with the corporate objectives and individual development needs as expressed in a personal development plan.
- 2.3 To ensure that the appraisal process in place is a positive process designed to assist staff performance, ensuring that they have the right knowledge and skills to do these well, and support staff in their personal development. The Personal Development Plan is to include reference to the required mandatory training for the role with planned dates agreed and recorded at the appraisal meeting.
- 2.4 To ensure that the appraisal process covers all aspects of performance, and is updated to reflect the Trusts imperatives and corporate objectives.

3. Scope

- 3.1 Appraisal is a mandatory Trust requirement for all staff. This policy applies to all staff working within Mid Essex Hospital Trust (with the exception of medical staff – see 3.2)
- 3.2 Appraisal for Medical staff is to be carried out in accordance with Department of Health guidelines ‘Appraisal for NHS clinical consultants’ and detailed in the Trust’s Medical Appraisal Policy.
- 3.3 All staff are required to participate in an annual appraisal and development review meeting with their appraiser resulting in agreed objectives and a Personal Development Plan (PDP).
- 3.4 The Trust’s Appraisal and Development Review Policy has been developed to reflect best practice and incorporates ‘The NHS Knowledge and Skills Framework’ (NHS KSF).

- 3.5 The Trust supports the use of limiting the KSF outline to the core dimensions for all appropriate posts as a minimum. In most cases the appraisal is carried out using the KSF outline that outlines both core and specific dimensions.
- 3.6 The Trust expects all staff to use standardised documentation located on the appraisal page of the Trust's intranet site.
- 3.7 All KSF outlines include Equality and Diversity as it is one of the core dimensions and all staff are required to demonstrate competence to at least level one as shown in the KSF guidance. Progress towards meeting this objective must be included as part of their appraisal and development review.
- 3.8 Staff undertaking their nursing and midwifery revalidation will use the appraisal process yearly to ensure they are amassing the appropriate evidence for revalidation.

4. Roles and Responsibilities

4.1 Managers / Reviewers

- 4.1.1 Managers are responsible for ensuring that all staff members in their area of responsibility have an annual appraisal and development review, ideally at three months prior to the individual's incremental date. This requirement is monitored at performance meetings with the relevant senior manager accountable for the appraisal activity in their teams
- 4.1.2 The carrying out of the appraisal and development review can be delegated to a suitably skilled individual (termed a reviewer) through the line management structure, although accountability for appraisals remains with the manager. For this reason the carrying out of appraisals is to be an objective for all managers in the Trust.
- 4.1.3 Reviewers must make sure that they have the necessary knowledge and skills to conduct an effective appraisal meeting. To ensure appraisals are undertaken in a consistent and equitable way reviewers are referred to Undertaking Appraisals Best Practice Guide available on the appraisal page of the Trust intranet page.
- 4.1.4 Managers/reviewers are to apply the principles of the Trust's Equality and Diversity policy when undertaking appraisals, ensuring that all staff receive a fair and objective appraisal, including review of their development needs which is to be recorded on the PDP.
- 4.1.5 Reviewers are to ensure in their preparations for the appraisal they have considered the needs of the employee being appraised, particularly if they have a disability or if English is not their first language and are new to working in the UK.
- 4.1.6 The reviewer is to ensure that the necessary documentation is completed.
- 4.1.7 The reviewer must ensure that the date of the appraisal is entered onto the electronic system using the supervisor self service facility of the electronic staff record.(ESR)

4.1.8 If after the appraisal process there are any changes required, the necessary policies should be followed, for example Flexible Working Policy or Job Review Policy and any changes be agreed with the budget holder and notified to workforce systems through the payroll

4.2 Human Resources (HR)

4.2.1 HR will ensure current appraisal guidance and documentation is made available on the Trust's intranet. HR will also communicate any changes to the appraisal process in a timely way to ensure all managers and staff are aware of these changes.

4.2.2 HR will provide advice and guidance for those new to the appraisal process.

4.2.3 HR Managers will be available to advise Managers on strategies to ensure all staff in their team receives an annual appraisal, including a review of their development needs.

4.3 Workforce Systems

4.3.1 The workforce information manager will circulate appraisal completion reports.

4.4 Learning and Development

4.4.1 Learning and Development will provide training for both appraisees and appraisers and regularly update the content of said sessions to reflect best practice and organizational changes.

4.5 Nursing and Midwifery Confirmers/ Professional Registration Validators

4.5.1 In line with the Trust revalidation policy, nursing and midwifery confirmers will use the appraisal process as a means for confirmers to check that the staff member is on track with amassing the appropriate evidence for the three yearly revalidation event.

4.5.2 All managers/reviewers who are required to validate a professional registration/membership should ensure they incorporate this check into the appraisal process to ensure appropriate evidence is presented.

4.6 All Staff

4.6.1 It is the responsibility of every member of staff to participate fully in the appraisal process.

4.6.2 Staff will be expected to prepare for their appraisal as detailed in the Undertaking Appraisals Best Practice Guide available on the appraisal page of the Trust intranet page

4.6.3 Staff will be expected to participate in achieving their personal development plan to help ensure that they are fully equipped to achieve the agreed objectives including completion of mandatory training requirements for their post.

5. Equality and Diversity

- 5.1 This policy embraces Diversity, Dignity and Inclusion in line with emerging Human Rights guidance. We recognise, acknowledge and value difference across all people and their backgrounds. We will treat everyone with courtesy and consideration and ensure that no one is belittled, excluded or disadvantaged in anyway.
- 5.2 All appraisers should ensure therefore that they have considered the needs of the employee being appraised, and whether any reasonable adjustments need to be made to ensure a fair and equitable process.

6. The Appraisal Process

- 6.1 Appraisal refers to the twelve-monthly cycle of performance appraisal and personal development review which culminates in a 1:1 structured discussion that takes place at least three months prior to an individual's incremental increase.
- 6.2 All staff will have an annual appraisal meeting with their manager or agreed appraiser (the reviewer), supplemented by regular reviews, at a minimum of six-monthly intervals. The purpose of reviews during the year are to give managers and staff an opportunity to assess progress against the objectives set at the appraisal and to check that the member of staff is receiving the support agreed to help them achieve their objectives.
- 6.3 There are three main objectives of the appraisal and development review :-
- A review of the post holder's performance over the previous 12 months in terms of their KSF outline and objectives as well as the post holder's contribution to the Trust's corporate objectives. If this is the first appraisal and no previous objectives have been set, then the job description should be used as the initial guide.
 - Clarity of what is to be achieved by the post holder in the forthcoming 12 months, e.g. through the setting of objectives and/or a review of the job description and KSF outline. This will include clarity of the decision making process within the Trust and how staff can be involved in the process and use their influence.
 - A review of development needs which should be determined by gaps identified in achieving the correct level of competence detailed in the KSF outline, relevant mandatory training that is due and any development needed to achieve objectives set for the forthcoming year. The agreed development is to be recorded on the Personal Development Plan

7. Gateway Appraisal

- 7.1 Each KSF outline has two Gateway Points – the 'Foundation Gateway' and the 'Second Gateway'.
- 7.2 In line with the AfC (Agenda for Change) T&C of Service at the gateways decisions are made by reviewers about an individual's pay progression based on the achievement of the agreed dimensions and levels of the KSF outline for their post. If

these are not achieved then the post-holder should not go through the gateway (receive an increase in pay) until the required level of competence has been achieved (see paragraph 7.6 below).

- 7.3 Where a manager has not achieved all their objectives (including the objective to ensure all their staff have an annual appraisal) consideration will be given as to whether the manager concerned should progress through the gateway. Underlying reasons/extenuating circumstances for non-achievement of objectives will be taken into account such as recognised increase in workload, maternity leave, long term sick etc.
- 7.4 The level of knowledge and skills required by a post holder at the Gateways are set out in the KSF outline developed for the post.
- 7.5 Gateway appraisals will take the same format as a normal annual appraisal. However, in line with the AfC T&C of Service, at the gateways specific attention will be paid to whether the staff member had provided sufficient evidence of applying their knowledge and skills as described in their KSF outline for that pay Gateway.
- 7.6 If an employee has not been able to achieve their required KSF outline, a Short-Term action plan should be drawn up and jointly agreed between the line manager and the individual. The action plan should clearly identify:
- The reason for the deferment
 - KSF dimension and levels still to achieve
 - Identified training and development with consideration of provision of reasonable resources
 - Final review date

8. Setting Objectives

- 8.1 Objectives should be SMART. (Specific, Measurable, Achievable, Realistic & Timely). Further details can be found in the Undertaking Appraisals Best Practice Guide available on the appraisal page of the Trust intranet page .

9. Personal Development Plan

- 9.1 Personal development plans should reflect the needs of the individual, including the mandatory training requirements relevant to their role, the service, and the Trust and will need to be reviewed and updated on a regular basis.

10. Appeals / Disagreements at a Review

- 10.1 These will be dealt with in line with the Trust Appeal Policy.

11. Monitoring of appraisals

- 11.1 All appraisals will be recorded on the ESR system

- 11.2 Workforce systems will provide regular reports on appraisal activity. There may also be the need for exception reporting on appraisal activity such as providing evidence for compliance with CQC standards
- 11.3 HR Managers will review appraisal activity in their meetings with Directorate and Line Managers
- 11.4 Appraisal activity will be monitored as part of Directorate performance meetings. .
- 11.5 The Board will receive regular reports on appraisal activity across the Trust through the workforce report submitted by the Director of HR to the Patient Safety and Quality Committee.

12. Communication & Implementation

Staff will be made aware of this policy through reference at local induction and dissemination via Staff Focus. The policy will be stored for access to all on the Trust Staff Intranet under HR Policies.

13. References

- The NHS Knowledge and Skills Framework (NHS KSF) and the Development Review Process, Department of Health October 2004
- The NHS Knowledge and Skills Framework (NHS KSF) made simple
- Guidance for Managers in carrying out appraisals in the Undertaking Appraisals Best Practice Guide available on the appraisal page of the Trust intranet page