



# APPRAISAL POLICY

This procedural document supersedes: CORP/EMP 32 v.3 – Appraisal Policy



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Executive Sponsor	Karen Barnard – Director of People and Organisational Development
Author/reviewer: (this version)	Joanne Dixon – HR Business Partners
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Target audience:	Trust-wide

### Amendment Form

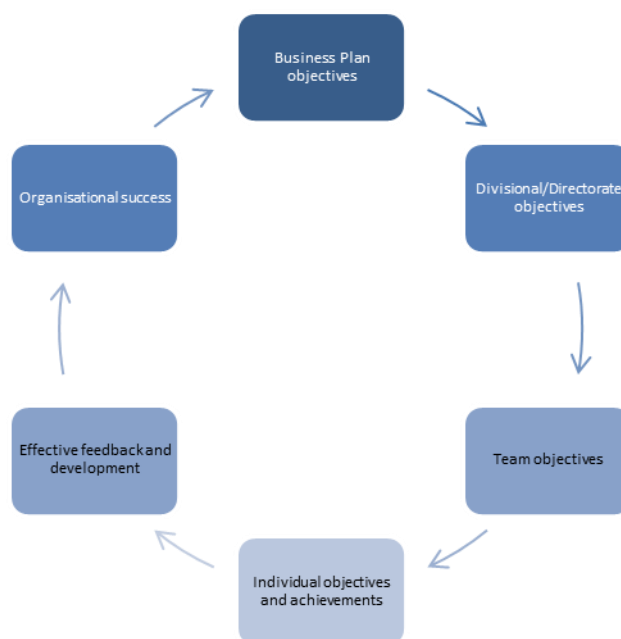
Version	Date Issued	Brief Summary of Changes	Author
Version 4	23 September 2019	<ul style="list-style-type: none"> <li>• Reviewed for Factual Accuracy.</li> <li>• Amendment of DBH to DBTH and Care Group to Division to reflect new structure.</li> <li>• Hyperlinks updated.</li> <li>• Logo Changed to Reflect new trust brand.</li> <li>• Removal of sections entitled KSF &amp; Pay Band gateways.</li> <li>• Added reference to appraisal season and mid-year review.</li> <li>• Added quote from Kings Fund document in Section 2 Purpose.</li> <li>• Added to objectives of appraisal in Section 2 Purpose.</li> <li>• Complete new equality impact assessment.</li> </ul>	Joanne Dixon
Version 3	30 September 2015	Change of title and update to reflect interim arrangements introduced in March 2015 and incorporating CORP/EMP 23 – Knowledge and Skills Framework (KSF) Gateway Policy/ Procedure.	John Scott
Version 2	May 2011	<p>Title changed from “Personal Development” To “Performance Development”, pages 1 - 4</p> <ul style="list-style-type: none"> <li>• Definition moved to item 3</li> <li>• Item 3.3: Changes around the use of KSF outline</li> <li>• Item 4 Equality Impact Assessment</li> <li>• Item 5.2: Title changed from Executive, Corporate, Divisional Directors/Managers to Executive, Corporate, Clinical Directors/Managers and Clinical Service Unit Managers</li> <li>• Item 5.3.1: Changes to Qualification updates, deletion of Training Needs Analysis form and Qualification Update form</li> <li>• Item 5.3.3: Appraisal training</li> <li>• Item 5.3.4: Changes to use of KSF outlines</li> <li>• Item 5.3.4: TNA form removed</li> <li>• Item 5.3.6: Evidence requirements</li> <li>• Item 5.4.1: Evidence requirements</li> <li>• Item 5.4.2: Preparation by Individual</li> <li>• Item 5.5.1: Gateway progression reminder to managers</li> <li>• Item 6.1.2: Group Appraisals</li> <li>• Item 7.1: Changes to Monitoring</li> <li>• Item 8 Additional references</li> <li>• Appendix 1: Changes to PDA/KSF review document</li> <li>• Appendix 2: Changes to Manager’s Guide</li> <li>• Appendix 3: Additional Dimension on KSF outline</li> <li>• Appendix 4: Changes to Employee’s Guide</li> </ul>	Angie Smith
Version 1	July 2009	This is a new policy, please read in full.	Angie Smith

## Contents

	<b>Page No.</b>
1. INTRODUCTION .....	4
2. PURPOSE.....	4
3. DUTIES AND RESPONSIBILITIES.....	5
4. PROCEDURE.....	5
4.1 Core Principles.....	6
4.2 The Appraisal Process: at a Glance: 3 Steps.....	7
5. TRAINING/ SUPPORT .....	7
6. DATA PROTECTION .....	7
7. MONITORING COMPLIANCE WITH THE PROCEDURAL DOCUMENT .....	8
8. DEFINITIONS .....	9
9. EQUALITY IMPACT ASSESSMENT .....	9
10. ASSOCIATED TRUST PROCEDURAL DOCUMENTS .....	10
11. REFERENCES.....	10
APPENDIX 1 - EQUALITY IMPACT ASSESSMENT PART 1 INITIAL SCREENING .....	11
APPRAISAL RESPONSIBILITIES.....	12

## 1. INTRODUCTION

Our staff are key to the continuing and future success of DBTH. Our aim is to become an employer of choice and our approach to people management is clearly summarised in the phrase Develop. Belong. Thrive. Here. We need a strategic and professional approach to appraisal which helps us achieve our aspirations. The organisation's success is illustrated by the following well established model (Adapted from CIPD Policies & Procedures for People Managers)



## 2. PURPOSE

The purpose of this policy is to ensure that we have a clear, consistent and fair approach to appraisal across DBTH. We want to maximise the effectiveness and potential of everyone so that we successfully achieve our [True North objectives](#) and, in particular, to improve patient experience and outcomes. Appraisal is the way that we ensure everyone is aligned on the things we are working on, contributing to the [Vision](#) of the Trust. Appraisal is to review what we do, but equally as important, it is a time to review how we do the work required to provide outstanding patient care, in line with the [Trust values](#).

‘Research indicates that effective performance appraisal and staff development contributes directly to improved patient outcomes’. (*West and Borrill, 2003*)

‘The proportion of staff receiving well-structured appraisals is related to patient satisfaction, patient mortality, staff absenteeism and turnover’. (*Employee engagement and NHS performance, West and Dawson, The Kings Fund 2012*)

In summary, the **objectives** of the appraisal process are to:

- maximise performance
- reinforce our values and behaviours

- recognise and celebrate good performance
- review objectives and agree objectives for the year ahead
- encourage staff development; and
- ensure the employee is aware of their contribution and value at work.

Management guidelines on the implementation of this policy are provided separately through links to the [process map](#). Additional resources relating to appraisal are available on the Trust [intranet](#).

### 3. DUTIES AND RESPONSIBILITIES

#### Introduction

For the policy and procedure to be effective, everyone involved in any aspect of appraisal needs to be aware of this policy and follow it. Ultimately, it is the responsibility of the senior management of the Trust (including the Chief Executive, Executive Team and Divisional Directors); in conjunction with People & OD to ensure that this is the case. A table of responsibilities is included [here](#).

### 4. PROCEDURE

This policy, and the related procedures, covers all activities that form part of the appraisal process. It applies to:

- All staff on Agenda for Change NHS terms and Conditions
- People undertaking work for, but not directly employed by, DBTH (e.g. honorary contract and volunteers).
- Some staff seconded to DBTH.

In addition, some staff groups have additional or separate arrangements in place:

- **Permanent medical staff** that are also required to have medical appraisals as part of their revalidation. Please see [CORP/EMP 38 Appraisal Policy for Medical Staff of DBHFT as Designated Body](#).
- **Deanery appointed doctors in training / Doctors in Training**
  - **Doctors in training working at DBTH.** Arrangements are in place for appraisal data to be provided by the Deanery.
  - **Lead Unit doctors/recharge doctors.** Appraisals are undertaken external to DBTH, hence are excluded from monitoring arrangements.
- **Nursing staff** that are also required to have an enhanced appraisal as part of their revalidation.

- **Temporary staff.** Managers should make suitable arrangements for the appraisal of temporary staff, where this is appropriate. Staff should not be excluded from the process due solely to the fact that they do not have a permanent contract.
- **Agency staff.** Arrangements are in place for providing feedback on performance in respect of staff employed through agencies, including NHS Professionals.  
**Nursing and midwifery staff subject to preceptorship arrangements** that are required to complete an initial 6 month training programme. Managers should make suitable arrangements to appraise newly qualified nurses 12 months from their start date with DBTH.

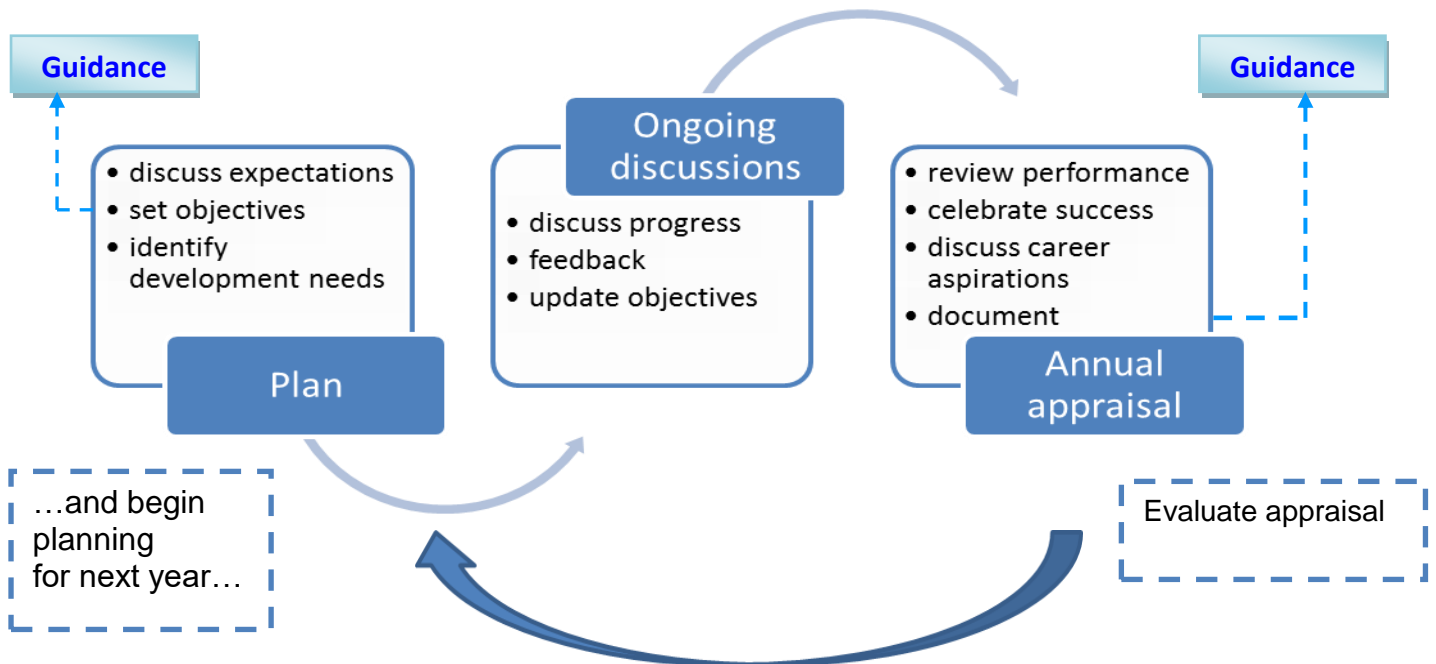
#### 4.1 Core Principles

All appraisal activity in DBTH will be consistent with the [Fair Treatment for All policy](#) and reflect the following core principles:

- The Trust appraisal season will run from 1 April to 30 June each year.
- All staff must have an appraisal discussion at least once every 12 months. A mid-year 6 months after the appraisal to review progress against objectives is recommended.
- Both the line manager (appraiser) and the individual (appraisee) must prepare adequately in advance of the appraisal discussion.
- The line manager must record the discussion using DBTH's agreed appraisal documentation and a copy kept in the personal file.
- Line managers must ensure that the date of the appraisal is recorded on DBTH's electronic system, ESR.
- Line managers must also meet regularly with their staff (either individually and/or as a team) in between the formal appraisal meeting to review progress and offer support where required. This is to include listening to staff feedback on their experience of appraisals and as a result taking action to continuously improve the quality of appraisals.
- We will provide appropriate guidance, development and support to people involved in appraisal in order to meet these core principles.
- Anyone involved in the appraisal process should be competent to comply with the requirements of this policy and procedure. Senior management must assure that all line managers understand their role and responsibilities and are competent to conduct a good quality appraisal in line with the values and behaviours of the trust and that they have attended Trust appraisal training as appropriate.
- We will continuously monitor best practice in appraisal and review our arrangements to reflect new and innovative approaches.
- Our appraisal processes will be designed to align with the requirements of revalidation for both doctors and nurses.

- The Trust appraisal process will be adjusted In line with the National NHS guidance as required.

#### 4.2 The Appraisal Process: At a Glance: 3 Steps



## 5. TRAINING/ SUPPORT

A range of [training and development tools](#) are available to support managers. The P&OD Team and/or your People Business Partner can advise on how best to meet your needs. The People Business Partnering and Leadership and OD teams provides regular appraisal training sessions for both line managers and employees. These can be booked through the Education Centre. Advice and training for line managers may also be provided by the HR Services Team.

## 6. DATA PROTECTION

Any personal data processing associated with this policy will be carried out under 'Current data protection legislation' as in the Data Protection Act 2018 and the General Data Protection Regulation (GDPR) 2016.

For further information on data processing carried out by the trust, please refer to our Privacy Notices and other information which you can find on the trust website:  
<https://www.dbth.nhs.uk/about-us/our-publications/uk-data-protection-legislation-eu-general-data-protection-regulation-gdpr/>

## 7. MONITORING COMPLIANCE WITH THE PROCEDURAL DOCUMENT

What is being Monitored	Who will carry out the Monitoring	How often	How Reviewed/ Where Reported to
Non-compliance of policy by Divisions and Directorates	People & OD	On-going	Issues to be reported to respective Divisional and Directorate management teams.
Review of Policy	People & OD	On Going	Amendments to reflect guidance from NHS Employers, or changes in best practice.
Appraisal compliance rates at Trust level.	Board of Directors	Bi-annual report*	Chief Executive & Director of P&OD report
Appraisal compliance rates at Divisional/Directorate level	People & OD	Quarterly	People Business Partners discuss with Divisional and Directorate management teams at Accountability Meetings
Compliance of Policy	Internal Audit	Annual Audit Practice	As per annual audit practice
Compliance with Policy	Senior Responsible Manager in P&OD (Deputy Director)	Quarterly	<ul style="list-style-type: none"> <li>• Sample check of processes undertaken and results recorded.</li> <li>• Action plans developed to resolve process failures / mitigate risks.</li> <li>• Issues reported to respective Divisional and Directorate management teams</li> </ul>
Appraisal Training	People & OD	Annually	<ul style="list-style-type: none"> <li>• Review of management attendance at Appraisal training via OLM report.</li> <li>• Review with respective divisional/directorate management teams to address any concerns over access and attendance.</li> </ul>

\*The Board also receives a monthly performance reports which include the Trust appraisal rate against the Trust appraisal rate target.



## 8. DEFINITIONS

<b>Appraisal</b>	Appraisal is the opportunity for individual members of staff and their line managers, to have a discussion about their performance and development and the support they need in their role. It should both assess recent performance and focus on future objectives, opportunities and resources needed.
<b>Doctors in Training</b>	Doctors in training are the responsibility of Health Education Yorkshire & Humberside and do not receive appraisals from DBTH, (other than supervisory comments to their e-file.)
<b>Lead Unit – Doctors in Training</b>	DBTH are lead unit for ENT and General Surgery doctors in training. Where the trainee is working in an alternative hospital, the costs are recharged accordingly.
<b>Preceptorship</b>	A <a href="#">preceptorship</a> is a structured period of transition for the newly qualified nurse, midwife or allied health professional when they start employment.
<b>Revalidation - Doctors</b>	<a href="#">Fact Sheet</a>
<b>Revalidation - Nurses</b>	<a href="#">Fact Sheet</a>
<b>SMART objectives</b>	<a href="#">SMART</a> is the acronym which describes the different elements needed to write an effective objective. SMART stands for <b>S</b> pecific, <b>M</b> easurable, <b>A</b> chievable, <b>R</b> elevant, and <b>T</b> ime-framed.
<b>Succession Planning</b>	A process for identifying and developing potential future leaders or senior managers, as well as individuals to fill other business-critical positions. May be linked to access to training and development activities, and typically includes practical, tailored work experience relevant for future senior or key roles.
<b>Talent Management</b>	The systematic attraction, identification, development, engagement, retention and deployment of those individuals who are of particular value to an organisation, either in view of their 'high potential' for the future or because they are fulfilling business/operation-critical roles.
<b>360' Feedback</b>	360' feedback is a performance appraisal system that gathers feedback on an individual from a number of sources, typically including colleagues, direct reports and customers. Such an approach provides better information about an individual's skills and performance, as well as working relationships, compared to more traditional performance appraisals.

## 9. EQUALITY IMPACT ASSESSMENT

An Equality Impact Assessment (EIA) has been conducted on this procedural document in line with the principles of the Equality Analysis Policy (CORP/EMP 27) and the Fair Treatment for All Policy (CORP/EMP 4).

The purpose of the EIA is to minimise and if possible remove any disproportionate impact on employees on the grounds of race, sex, disability, age, sexual orientation or religious belief. No detriment was identified. (See Appendix 1).

## 10. ASSOCIATED TRUST PROCEDURAL DOCUMENTS

- [Equality Analysis Policy](#) (CORP/EMP 27)
- [Fair Treatment for All](#) (CORP/EMP 4)
- [Statutory and Essential Training \(SET\) Policy](#) (CORP/EMP 29)
- [Appraisal Policy for Medical Staff of DBHFT as Designated Body](#) (CORP/EMP 38)

## 11. REFERENCES

GMC Revalidation <http://www.gmc-uk.org/doctors/revalidation.asp>

NMC Revalidation <http://www.nmc.org.uk/standards/revalidation/>

SET Training [http://intranet/education\\_and\\_development/default.aspx](http://intranet/education_and_development/default.aspx)

Performance Appraisals:

[http://intranet/Corporate-Directorates/Human Resources/Appraisals.aspx](http://intranet/Corporate-Directorates/Human_Resources/Appraisals.aspx)

### APPENDIX 1 - EQUALITY IMPACT ASSESSMENT PART 1 INITIAL SCREENING

Policy	Division/Directorate and Department	Assessor (s)	New or Existing Service or Policy?	Date of Assessment
CORP/EMP 32 Appraisal Policy	People and Organisational Development	Joanne Dixon	Existing Policy	September 2019
<b>1. Who is responsible for this policy?</b> P&OD (HR Services).				
<b>2. Describe the purpose of the policy?</b> Process/guidance on delivering good quality appraisals to staff.				
<b>3. Are there any associated objectives?</b> Provide consistent approach to processes across the Trust.				
<b>4. What factors contribute or detract from achieving intended outcomes?</b> Staff may be unaware of their roles & responsibilities.				
<b>5. Does the policy have an impact in terms of age, race, disability, gender, gender reassignment, sexual orientation, marriage/civil partnership, maternity/pregnancy and religion/belief?</b> No				
<ul style="list-style-type: none"> <li>• If yes, please describe current or planned activities to address the impact N/A</li> </ul>				
<b>6. Is there any scope for new measures which would promote equality?</b> No				
<b>7. Are any of the following groups adversely affected by the policy?</b>				
<b>a. Protected Characteristics</b>	<b>Affected?</b>	<b>Impact</b>		
b. Age	No			
c. Disability	No			
d. Gender	No			
e. Gender Reassignment	No			
f. Marriage/Civil Partnership	No			
g. Maternity/Pregnancy	No			
h. Race	No			
i. Religion/Belief	No			
j. Sexual Orientation	No			
<b>8. Provide the Equality Rating of the service/ function/policy /project / strategy</b>				
Outcome 1 ✓	Outcome 2	Outcome 3	Outcome 4	
<b>9. Date for next review:</b> September 2022				
<b>Checked by:</b> Hannah Rowland		<b>Date:</b> September 2019		

<b>APPRAISAL RESPONSIBILITIES</b>	
<b>DBTH Executive Team and Senior Management Teams</b>	<ul style="list-style-type: none"> <li>The Chief Executive is accountable to the Trust Board for ensuring that the Trust is compliant with Trust appraisal targets.</li> <li>Executive Directors are accountable to the Chief Executive for ensuring that within their areas of responsibility, appraisals completion rates are performance managed to ensure compliance with the Trust appraisal target.</li> <li>Within their agreed area of responsibility, Senior Managers are responsible for ensuring appraisals are completed in accordance with the Trust target compliance rates and for ensuring that appraisals deal fairly with any equality issues.</li> </ul>
<b>Director of People &amp; OD</b>	<ul style="list-style-type: none"> <li>To develop and maintain the appraisal policy and all relevant documents and guidance.</li> <li>To review and update the information held about appraisal on the DBTH intranet.</li> <li>To analyse appraisal equality reports to identify barriers to equality.</li> <li>To report findings and agreeing actions to overcome inequity with the Executive Team.</li> <li>To audit the quality of appraisals and report findings and agree action with the Management Board, Board of Directors and Board of Governors.</li> </ul>
<b>People Business Partners</b>	<ul style="list-style-type: none"> <li>To provide appraisal advice, support and training to managers.</li> <li>To help managers to identify and overcome the barriers which prevent appraisal taking place.</li> <li>To promote the effective use of appraisals and encouraging managers to use them effectively.</li> <li>To help managers in using the appraisal process to inform talent management and succession planning.</li> </ul>
<b>P&amp;OD Management Information Team</b>	<ul style="list-style-type: none"> <li>To interrogate the ESR system to ensure that managers are recording appraisal dates onto their staff's records.</li> <li>To provide appraisal compliance reports at a Trust-wide, Division/Directorate and departmental level.</li> <li>To provide appraisal equality reports at a Trust-wide, Division/Directorate and departmental level.</li> </ul>
<b>Line managers (the appraiser)</b>	<ul style="list-style-type: none"> <li>To ensure that each member of staff has an individual appraisal at least once every 12 months.</li> <li>To meet regularly with your direct reports either individually and/or as a team in between appraisal meetings to discuss and track progress.</li> <li>To ensure that each member of staff has an up to date job description / person specification.</li> <li>To complete DBTH's agreed appraisal documentation, store a copy in the staff member's personal file and provide a copy to the staff member.</li> <li>To make sure that you have the necessary training, skills and information to carry out an appraisal discussion and that your staff understand their responsibilities in relation to the appraisal process.</li> <li>To make sure that the date of the appraisal is recorded on the staff electronic staff record system (ESR).</li> <li>To encourage all staff to complete the appraisal evaluation form and to take action to improve quality of appraisals as a result of feedback.</li> </ul>
<b>Every member of staff (the appraisee)</b>	<ul style="list-style-type: none"> <li>To participate fully in the appraisal process. Refusal to participate in an appraisal will be considered to be a disciplinary matter.</li> <li>To keep informed about what is expected of you in relation to the appraisal process.</li> <li>Gather information and evidence of performance throughout the year.</li> </ul>

	<ul style="list-style-type: none"><li>• Come to appraisal meetings ready to discuss your work, your performance and your development.</li><li>• Come to appraisal having completed and reviewed progress of your own Statutory and Essential Training (SET) compliance.</li><li>• Complete the evaluation of appraisal document to actively contribute to improving the quality of appraisals experienced at DBTH.</li></ul>
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