



Appraisals Policy

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1 Statement of Aims and Objectives

- 1.1 South East Coast Ambulance Service NHS (National Health Service) Foundation Trust (SECAMB) is committed to providing a high quality, efficient, effective, and safe service. The success of the Trust depends on the abilities and performance of our colleagues, not just as individuals but also on the way in which they interact, work together, and support each other.
- 1.2 It is recognised that where regular ongoing effective appraisal and development of colleagues is in place to help and encourage individuals to maintain effective work standards, high quality services are achieved and service users' health and social care outcomes, experience and safety are positively affected.
- 1.3 The principles of the appraisal policy are to ensure that all colleagues, both appraisees and appraisers, are aware of the expectations of the Trust and the appraisal process.
- 1.4 A good appraisal process will ensure that all colleagues feel valued and confident in their contribution to the Trust, are given feedback on their performance and can work in a way that is consistent with the Trust values and fulfils the demands of their work environment.
- 1.5 The appraisal provides time for colleagues to discuss individual ambition whilst offering a safe environment within which to raise any concerns and encourage a culture of openness and trust.
- 1.6 Appraisal is a key tool in supporting and encouraging colleagues to perform. It is an important mechanism for building engagement and helping to improve individual/team performance to support organisational objectives.
- 1.7 The performance appraisal provides an opportunity to
 - Clarify job requirements and manager expectations
 - Support and encourage colleagues to perform, and discuss previously identified concerns
 - Identify any training and development needs
- 1.8 The Trust has adopted a values-based appraisal - this reflects the importance of our values and associated behaviours that underpin everything we do to achieve our vision. The appraisal process is a system for regularly reviewing and recording the personal contribution, performance, value base, behaviours, potential and development needs of a colleague, together with the contribution the Trust has made to the individual.

2 Scope

- 2.1 Appraisal is a mandatory Trust requirement for all colleagues. This policy applies to permanent, and fixed term employees employed under Agenda for Change (AfC) Terms and Conditions.
- 2.2 This policy does not apply to individuals engaged under a Bank Worker agreement.
- 2.3 Arrangements are in place to provide feedback to local volunteers on performance and behaviour.
- 2.4 All matters relating to health and wellbeing, attendance management and/or supporting performance improvement should be referred to the appropriate policy.

3 Definitions

- 3.1 The following terms and acronyms are used within this document

SECAmb	South East Coast Ambulance Service NHS Foundation Trust
Appraisee	Employee
Appraiser	Line Manager or, where appropriate, their supervisor, a professional adviser or another appropriately trained senior team member
ESR	Electronic Staff Record
HR	Human Resources
L&OD	Learning & Organisation Development
OD	Organisation Development
Grandparent/Reviewer	The Line Managers Manager

4 Principles

- 4.1 All appraisal meetings are based on the premise of 'no surprises' – it is essential that dialogue, and conversations are ongoing throughout the year, supporting the appraisee, identifying any areas in which they may need support of development, and recognising their progress towards achieving their objectives.
- 4.2 Appraisal is a joint responsibility of the individual and line manager. It is a two-way process with agreed outcomes and expectations. This should not be solely an annual event but part of a continuous process with regular discussion and feedback which is vital to an effective working relationship between managers and individuals within their team.
- 4.3 The appraisal process will ensure that colleagues are clear about what is expected of them and how they will be supported. The process is two-way and provides an opportunity to help discuss and resolve problems which may be restricting progress and causing poor work performance. Any areas

of concern relating to performance should be addressed throughout the appraisal cycle (including regular one-to-ones or supervision) before consideration is given to utilising the Capability Policy. Disciplinary or grievance issues should be dealt with under the relevant policy.

- 4.4 Where colleagues are absent from work during the appraisal cycle (i.e. for reasons of extended sickness / Maternity / Shared Parental / Adoption Leave), the line manager will have discretion to extend the review period, although where possible these meetings should be held prior to the period of leave. Managers wishing to extend review periods under these circumstances should consult the Human Resources Department.
- 4.5 Colleagues must be afforded the time within their working week to prepare for their appraisal meeting. SECamb will strive to ensure that all colleagues are provided with undisturbed protected time for the duration of their appraisal meeting.
- 4.6 Appraisal meetings should be held in a private, confidential, and comfortable environment.
- 4.7 Sufficient time must be set aside to undertake the appraisal (60-90 minutes is recommended).
- 4.8 Managers should not be required to appraise more than 10 to 12 people per annum. If a manager has a larger span of control, they should consider delegating some of their reviewer responsibilities, and/or temporarily consider a team approach.
- 4.9 The appraisal cycle for individuals should be linked to their start date, which is the anniversary of their initial appointment to SECamb.
- 4.10 Healthcare professionals, associate practitioners and support workers will receive or be involved with clinical supervision. This is different to an appraisal but works alongside it and feeds into the overarching appraisal process for applicable staff (who take part in clinical supervision).

5 Responsibilities

5.1 The Trust

5.1.1 The Trust has overall responsibility to:

- Ensure an effective appraisal process is in place.
- Ensure colleagues are aware of this policy and adhere to its requirements.
- Monitor appraisals through the use of ESR, with performance reports to be sent to the Senior Management Team.
- Ensure a culture of fairness and openness exists in applying this policy

- Ensure that managers in their areas of responsibility undertake appraisals for all colleagues in a timely and appropriate manner

5.2 Appraisers

5.2.1 It is an appraiser's specific responsibility to:

- Appropriately plan, facilitate, and record appraisal meetings for each team member
- Conduct a formal review with every staff member they are responsible for at least once a year, with regular meetings and one-to-ones and a structured mid-year review.
- Encourage and support each team member to perform effectively.

5.2.2 In addition, appraisers must ensure:

- They are familiar with this policy and any related policies and procedures.
- They are confident and competent in carrying out performance appraisals and development reviews, undertaking any necessary training and development before conducting a meeting.
- They consider objectives and personal development goals for the next review period
- They provide support and encouragement and make a positive contribution to the performance appraisal process.
- The appraisal is a fair and honest discussion of the colleague's performance and that the colleague's views are considered.

5.3 Appraisee

5.3.1 It is the appraisee's responsibility to:

- Take an active part in the appraisal process
- Allow planning time for the appraisal process
- Complete all relevant documentation
- Provide honest and constructive feedback to their line manager

5.3.2 In addition, appraisees must ensure that:

- They are familiar with this policy and any related policies or procedures
- They have adequate knowledge and skills of the process to be able to effectively participate in appraisal meetings. Colleagues should contact Learning and Organisation Development if they require any additional support.
- They meet with their appraiser on a regular basis
- They share with their appraiser any concerns they have about undertaking the appraisal process and consider whether additional

support is needed to successfully participate in the appraisal processes (e.g. – ‘Appraisals ‘How to Guide/Webinar).

- They consider which parts of their job they find challenging - why and what additional support they might need.
- They consider plans for their professional development/career/job role
- They partake in any development activities identified and agreed with their appraiser. Colleagues will contribute to undertaking the agreed personal development plan through their personal effort. They may individually choose, where appropriate, to commit personal time and resources, especially in those areas relating to longer-term career development.

5.4 **Human Resources and Learning and Organisation Development**

5.4.1 The Executive Director for HR and OD has delegated responsibility from the Board to ensure this policy is properly implemented and monitored.

5.4.2 The HR and L&OD Teams have a responsibility to ensure the policy is implemented and embedded through appropriate support and education.

5.4.3 The L&OD Team are committed to providing support to both the appraiser and appraisee:

- Line Manager/Appraiser Training
- How to Guides / Webinar
- Scheduled ‘Drop-In’ Sessions

5.4.4 The Learning and Organisation Development administration team will produce monthly reports to provide evidence around how many appraisals are being carried out.

5.4.5 Learning and Organisation Development will undertake annual audits to evaluate the quality of performance appraisal for our colleagues.

5.5 **Union Representatives**

5.5.1 Union Representatives have a significant role to play in providing advice, support and working in partnership with managers and the Human Resources & Learning & Organisation Development team in ensuring that the appraisal policy is both fit for purpose and effectively implemented.

5.6 **Senior Managers**

5.6.1 Members of the Executive Team and the Senior Management Group must be set an equality objective/s which focuses on the improvement of workforce targets in line with agreed metrics and organisational strategy.

5.6.2 All senior managers (band 8b and above) should be set objectives which foster inclusive leadership and an inclusive, open culture, supporting colleagues to build diversity and inclusion into their work.

5.7 **Registered Doctors**

5.7.1 NHS registered medical staff (doctors) have a nationally defined and regulated 'Medical Appraisal'. All doctors are registered with the General Medical Council (GMC) and are assigned to a 'Designated Body' who is responsible for the doctor's medical appraisal. SECAMB is not defined as a Designated Body. General Practitioners are registered to the NHS England Designated Body. All other doctors will be registered to other Designated Bodies.

5.7.2 All doctors are required to source evidence from their full scope of work which contributes to their medical appraisal. Doctors working in SECAMB will be required to provide evidence of their work in SECAMB for their medical appraisal. SECAMB requires confirmation that the doctor has undertaken their annual medical appraisal.

5.7.3 All doctors require an internal SECAMB appraisal as per this policy. To avoid duplication, doctors may wish to use the same evidence and information from their annual medical appraisal in their internal SECAMB appraisal.

6 **Training and Development Needs**

6.1 The appraisal will contribute to the production of a personal development plan (PDP) identifying any personal and/or professional learning and development requirements and how they will be met.

6.2 Personal development supports colleagues to effectively perform in their current role and improves their potential to become more successful. Professional development refers to skills and knowledge attained for both personal development and career advancement.

6.3 Professional development encompasses all types of learning opportunities, ranging from higher education, formal coursework, conferences, and informal learning opportunities situated in practice.

6.4 The appraisal will also discuss the future potential and career ambitions of the employee and will discuss options for development and experience to achieve career /personal development goals.

6.5 All colleagues will have annual development reviews which will result in the production of a personal development plan. Development reviews will take place between colleagues and their manager or, where appropriate, their supervisor, a professional adviser or another appropriately trained senior team member.

- 6.6 The main purpose of the development review will be to look at the way a colleague is developing with reference to how the duties and responsibilities of the job are being undertaken, based on current agreed objectives consistent with the application of knowledge and skills in the workplace and the consequent development needs of the individual.

7 Disagreements

- 7.1 Very rarely, appraiser and appraisee may disagree fundamentally on the content of the appraisal. In these circumstances both opinions will be recorded and the reviewing manager will be involved in a discussion to try to resolve any differences. Every effort will be made to ensure that differences of opinion can be resolved during the appraisal process.

8 Quality Assurance and Audit

- 8.1 Senior Managers will be required to monitor that the appraisals are occurring and that systematic follow up is in place to ensure appraisals are completed for all staff groups. This will be monitored in the following ways:

- Completion of appraisals will be recorded using ESR. Learning and Organisation Development will produce monthly reports which will provide evidence that appraisals are being carried out

- 8.2 In addition to the number of appraisals completed, it is important that their quality is monitored. Annual audits will be undertaken by Learning and Organisation Development to ensure compliance with Policy and safeguard the quality of appraisal for our colleagues. This information will be used to inform improvements. Learning and Organisation Development will aim to audit 10% of all appraisals. (Sample Audit/Checklist – Appendix 3)

9 Moderation

- 9.1 Moderation is a practice that evaluates the appraisal process to ensure consistency and fairness in the allocation of ratings across the Trust. The moderation process may prompt further analysis of ratings to ensure it is an accurate reflection of the individuals' performance. In such cases further evidence may be required to support the appraisee's performance against objectives and support behaviours.
- 9.2 The moderation process will focus on how the overall distributed ratings compare with SECAMB's expected distribution and will help to ensure fairness and quality in the allocation of performance ratings across the different directorates/services/teams within the Trust.
- 9.3 The moderation process will be carried out by Learning and Organisation Development based upon the allocated ratings of all staff in the Trust by Directorate.

9.4 The key principles for the moderation process are as follows:

- The full-year conversation assessment process should be complete for the whole of Trust before the moderation process begins. This will continue on a 12-month rolling basis.
- The performance ratings from the full-year conversation are to be allocated before the moderation process begins.
- The moderation process should highlight areas of concern or required improvement in the future.

10 Monitoring Compliance

10.1 The HR Working Group is responsible for monitoring compliance with this policy. Human Resources (HR) will monitor the application of the policy and procedure through feedback from staff and managers. Feedback, legislation and changes to terms and conditions will be used to inform and improve policies, as well as provide recommendations for improving working practices. HR will provide relevant reports, based on this data, as required.

11 Audit and Review (evaluating effectiveness)

11.1 All policies have their effectiveness audited by the HR Working Group at regular intervals, and initially six months after a new policy is approved and disseminated.

11.2 Effectiveness will be reviewed using the tools set out in the Trust's Policy and Procedure for the Development and Management of Trust Policies and Procedures (also known as the Policy on Policies).

11.3 This document will be reviewed in its entirety every three years or sooner if new legislation, codes of practice or national standards are introduced, or if feedback from employees indicates that the policy is not working effectively.

11.4 All changes made to this policy will go through the governance route for development and approval as set out in the Policy on Policies.

12 Associated Trust Documentation

- Supporting Improved Performance Policy
- Reasonable Adjustments Guidance
- Reasonable Adjustments Passport
- Equality, Diversity, and Inclusion Policy
- We are SECAMB Toolkit

13 References

- Agenda for Change National Terms and Conditions
- 2018 NHS Pay Reform
- NHS Employers

14 Financial Checkpoint

14.1 To ensure that any financial implications of changes in policy or procedure are considered in advance of document approval, document authors are required to seek approval from the Finance Team before submitting their document for final approval.

14.2 This document has been confirmed by Finance to have financial implications and the relevant Trust processes have been followed to ensure adequate funds are available.

15 Equality Analysis

15.1 The Trust believes in fairness and equality, and values diversity in its role as both a provider of services and as an employer. The Trust aims to provide accessible services that respect the needs of each individual and exclude no-one. It is committed to comply with the Human Rights Act and to meeting the Equality Act 2010, which identifies the following nine protected characteristics: Age, Disability, Race, Religion and Belief, Gender Reassignment, Sexual Orientation, Sex, Marriage and Civil Partnership and Pregnancy and Maternity.

15.2 Compliance with the Public Sector Equality Duty: If a contractor carries out functions of a public nature, then for the duration of the contract, the contractor or supplier would itself be considered a public authority and have the duty to comply with the equalities duties when carrying out those functions.