

**PWYLLGOR DIWYLLIANT, POBL A DATBLYGU SEFYDLIADOL  
PEOPLE, ORGANISATIONAL DEVELOPMENT & CULTURE COMMITTEE**

<b>DYDDIAD Y CYFARFOD: DATE OF MEETING:</b>	13 October 2021
<b>TEITL YR ADRODDIAD: TITLE OF REPORT:</b>	Performance Appraisal Development Review (PADR): How do we Manage and Raise Performance in Hywel Dda University Health Board (HDdUHB)
<b>CYFARWYDDWR ARWEINIOL: LEAD DIRECTOR:</b>	Lisa Gostling, Director of Workforce & Organisational Development (OD)
<b>SWYDDOG ADRODD: REPORTING OFFICER:</b>	Robert Blake, Head of Culture and Workforce Experience

**Pwrpas yr Adroddiad (dewiswch fel yn addas)**

**Purpose of the Report (select as appropriate)**

Ar Gyfer Trafodaeth/For Discussion

**ADRODDIAD SCAA  
SBAR REPORT**

**Sefyllfa / Situation**

The purpose of this report is to provide the People, Organisational Development & Culture Committee (PODCC) with a deeper understanding of the performance management agenda within Hywel Dda University Health Board (HDdUHB) and the possible direction of travel which may offer greater opportunities to develop a performance culture in the organisation.

The concern is that HDdUHB is currently utilising an annual appraisal approach which offers very little due to the inconsistent manner it is managed, disengagement from key stakeholders and a lack of accountability in undertaking a meaningful performance conversation. It is driven by leaders who are demonstrating compliance behaviours due to the way we report. It offers very little in the abundant benefits an embraced performance culture offers an organisation.

The aspiration is to create and embed a positive performance culture. One where employees are empowered to discuss their performance with leaders in an open and safe environment. A culture that recognises, develops and values talent in an equitable way. An organisation that endorses adult-to-adult conversations that improves staff experience and the quality of patient care. It will be part of our cultural make up and the way such matters will be undertaken within HDdUHB.

If people are the greatest creators of value in organisations, then good performance management is critical for an organisation's success. Employees need to understand what is expected of them, and to achieve those goals they must be managed in order that they are motivated, have the necessary skills, resources and support, and are accountable.

Performance management aims to monitor, maintain and improve employee performance in line with an organisation's objectives. It is not a single activity, it is rather a group of practices that should be approached holistically.

There is no standard definition of performance management, however it describes activities that:

- Establish objectives through which individuals and teams can see their part in the organisation's mission and strategy.
- Improve performance among employees, teams and, ultimately, organisations.
- Hold people to account for their performance by linking it to reward, career progression and termination of contracts.

At its best, performance management is centred on two-way discussion and regular, frank, yet supportive feedback of progress towards objectives. It brings together many principles that enable good people management practice, including learning and development, performance measurement and organisational development. It is often misunderstood to be synonymous with the 'traditional' annual review, or performance improvement plans to deal with underperformance, however it is broader than both of these.

Performance management also involves establishing a climate in which individuals and groups take responsibility for the continuous improvement of objectives and their own skills, behaviours and contributions. Much of how performance is discussed is shaped by behavioural norms or culture, therefore communications and leadership throughout the organisation will set a precedent and shape how colleagues discuss performance more widely.

### Cefndir / Background

The need for regular performance conversations are integral in building a performance led culture. This supports employee engagement, wellbeing and the embedment of the organisational values, which should be reviewed annually as a minimum standard. The benefits for continuous feedback for individuals and team's performance are cited in much research, and are across the spectrum of appraisee, appraiser, patients and for the organisation as a whole.

The organisational compliance rate for Performance Appraisal Development Review (PADR) is also part of the tier one reporting for Welsh Government (WG). This measure provides assurance that all employees are having one performance conversation within 12 months as a minimum standard.

#### **1. Managing performance process**

The performance management process at HDdUHB is centred on an annual review; the PADR.

The PADR can be completed through two means, electronic – inputted directly into the electronic staff record (ESR) or completed on a paper document, developed by the Culture/ Workforce Experience team. They both capture the same information, including:

- Feedback on how the employee has performed against agreed objectives set the previous year.
- Agreed specific, measurable, achievable, realistic, timely (SMART) objectives for the following 12 months.
- A discussion on employees training and future career developments.

The appraiser must ensure that the completed PADR date is uploaded onto ESR to enable data validity for team and organisational compliance rates. The organisation periodically reviews compliance rates and has discussions at local levels with leaders as part of

performance reviews / holding to account meetings. The overall organisational compliance rate is continually measured as part of WG outcomes for HDdUHB.

## **2. Rewarding performance**

Every employee wants to be recognised as being someone whose contributions, to the team and the organisation, are valued. The two most visible ways in which value is recognised in today's working environment are through pay band progressions and promotions.

However, there are many questions that often place leaders in a challenging position:

- How do we recognise talent and ensure that one employee is more deserving of a new role than another?
- What is the basis for awarding an increase to one member of the team, while possibly not rewarding others?

It will require impartial appraisals of everyone's performance that are consistent and equitable. The performance feedback will have to be an ongoing process rather than a milestone event. It is the result of the ongoing performance feedback which will drive decisions on whom to reward and how.

***“Staff want to feel valued and appreciated and leading with compassion, being present, visible and showing gratitude for the work that staff have put in are all very important to frontline staff.”***

(Understanding the staff experience in Hywel Dda University Health Board COVID 19 Pandemic, 2021)

## **3. Pay Progression Policy**

The All Wales Pay Progression Policy will be introduced in October 2022. The policy will affect some staff who will require a performance conversation based on whether they have performed adequately to progress to the next step of their pay band.

This review is separate from the annual appraisal, however both will need to be completed with the same ethics. It will also require completing equitably and will include performance evidence, which supports the decision. It can be claimed that this decision cannot be justified, if an employee has only received an annual PADR.

The restoration of the Policy will require an implementation plan which supports the implementation for 2022 with possible alignment to how we continue to recognise and manage performance.

## **4. What does good actually look like?**

A case study (from Adobe, 2012) outlined how the software giants removed their annual appraisal system and the benefits that resulted from this change. Adobe eliminated the yearly performance review and replaced it with more frequent and less formal "check-in" processes. Managers and employees meet for check-in discussions at least once a quarter. The discussion is not scripted, and no paperwork is completed, however every check-in discussion covers three topics: expectations, feedback, and growth and development.

The benefits were significant, increasing morale, 30% in turnover and the organisation has decreased the 80,000 hours required for annual appraisals in management time.

(Lucy Adams, HR Disrupted, 2017) states that **“research shows 92% of organisations have an annual appraisal, whilst only 8% of these believe they are worth the time”**

Adams questions, **“Why do we remain wedded to an annual appraisal process, where we cannot see any tangible benefits”?**

There are two main answers to this question:

1. We have been doing it for so long we cannot see alternatives.
2. We do not know what else to do.

A recent research paper from the Chartered Institute of Personnel & Development (CIPD) 2020, corroborates these points -

**“Nonetheless, there are clearly some significant shifts afoot. An increasing number of employers appear to be questioning the value and relevance of traditional performance management processes. If employers were once enamoured with performance appraisals, they clearly are not now, and following various high profile organisations, many seem to be looking for change”**

The paper outlines many of the challenges with an annual appraisal process being the primary method used to measure employee performance. These criticisms are typically made on several grounds. They are seen to be:

- ✓ Overly time consuming and energy sapping.
- ✓ Disappointing and ultimately demotivating for individual employees.
- ✓ Divisive and not conducive to co-operation and effective team working.
- ✓ Not effective drivers of performance.

**Is this the time that we question how do we want to measure and empower performance at HDdUHB?**

## **Asesiad / Assessment**

### **1. PADR documentation**

A Corporate Health Standard Gold revalidation visit in 2017 provided valuable insights from staff that critiqued the PADR documentation which was in place at that time. The documentation was lengthy and combined education, guidance and the actual review of the employee's performance in one weighty record. It was problematic to gain some perspective on what the tangible benefits were in completing this review for any of the individuals, leaders or the organisation.

The OD department redesigned the documentation to make it a leaner process and piloted it with several staffing groups, receiving positive feedback. The revised documentation consisted of a 3-page review, together with separate guidance that supported both the appraisee and appraiser in making the PADR conversation more meaningful.

There are two separate PADR documents:

- Core PADR – this is to be completed for employees with no management accountability and aligns to the core behavioural framework.
- Leadership PADR – this is to be completed for all leaders and aligns to both advanced/excellence behavioural frameworks.

The incorporation of measuring employees against the newly formed behavioural frameworks was integrated into the new documentation. This supported an evaluation based on how the employee has performed in their role and the behaviours they have demonstrated. It would also support individual behavioural objectives being agreed, that could be measured in the next PADR cycle.

The leadership PADR has two dedicated ongoing objectives as part of their personal objectives which should be reviewed as part of the conversation. These are in place to gain engagement and accountability in driving the performance agenda in HDdUHB:

- ✓ Engage with and complete my yearly PADR.
- ✓ Ensure that I have undertaken regular 1-2-1s and completed the PADR process with my team.

An internal audit completed in 2019 provided evidence that the majority of PADRs reviewed as part of that process did not meet the required standard. The majority failed in the area of objective setting, with objectives not being SMART. An action plan was devised that saw a SMART objective table integrated into the documentation and quarterly site visits arranged by the OD team, who would review PADRs and offer support when appropriate. Quarterly site visits were paused due to COVID-19, however have recently resumed, with the first one taking place in June 2021 at Withybush General Hospital. The feedback from the visit is attached for reference.

The current documentation being used has received much positivity regarding its ease of use compared to the earlier version. The documentation is always evolving from best practice and feedback from attendees on the managing performance module.

## **2. Leadership Development**

Until recently there was very little development on managing performance for leaders within HDdUHB. In 2018, the revitalisation of the managers passport programme initiated the development of a dedicated managing performance module. This was part of the three-month programme and offered theory and practical leadership knowledge. It concentrated on the importance for PADRs to be completed and the overarching benefits for all. This session also established the need for the PADR to be part of an ongoing performance process, recognising that one conversation with employees was not enough for them to feel genuinely recognised or influence a change in behaviours.

The OD team also recognised that the managers passport was having small impacts in numbers attending. Bespoke managing performance modules were offered to any services, who requested them. These were delivered virtually on a monthly basis throughout the COVID-19 pandemic due to social distancing. The numbers of attendees who completed the managing performance module are listed below:

<b>Type</b>	<b>Dates from</b>	<b>Dates to</b>	<b>How many completed</b>
Managers Passport Programme	June 2018	March 2020 *	120
Bespoke workshops	May 2018	March 2020	312
<b>Total</b>			<b>432</b>

\*Paused due to pandemic

The module has received excellent feedback from attendees. The majority centred on gaining a greater understanding on why leaders should be having open and transparent performance

conversations, and the benefits recognised in undertaking them regularly and equitably to allow strengths to be valued and weaknesses to be supported.

A performance and motivation session was also developed and facilitated as part of the STAR programme (Band 7 Nurse Leadership programme). 29 attendees received the learning prior to it being paused due to COVID-19. This programme is being reinitiated in the next few weeks where attendees will gain this development.

### 3. Measuring Impact

The organisation has historically reviewed diagnostic measures in assessing performance management. Compliance rates and staff surveys all provide a percentage of the workforce that have received a PADR in the last 12 months. Over recent years, the OD department have gained more dialogical intelligence on the impact in measuring how we manage performance.

The requirement for more staff experiences is vital in the cultural progression journey for HDdUHB. There will need to be a greater understanding of experiences of performance management and how this contributes to retention, motivation and the development of the talent of our workforce.

### 4. Current PADR compliance rates

The current situation with compliance rates across HDdUHB evidences substantial variances. There is only one team within the directorate which meets the WG rate of 85% performance. The team only consists of five staff, therefore it would be astute to have conviction in them achieving 100%. The remaining directorates vary, which could be as a result of the additional challenges over the last 18 months, and being able to undertake performance conversations in an organisation that has continually changed during that time.

#### PADR COMPLIANCE BY DIRECTORATE

16/09/2021 (source ESR)

Directorate	Number of Staff	Number of Reviews Completed	Number of Reviews Completed %
ASSISTANT DIRECTOR OPERATIONAL QUALITY & NURSING	22	4	18%
COUNTY CARMARTHENSHIRE, CEREDIGION, PEMBROKSHIRE	830	564	68%
CHIEF EXECUTIVES OFFICE	82	31	38%
DIGITAL	174	132	76%
FACILITIES	1121	769	69%
FINANCE	101	54	53%
MEDICAL	89	66	74%
MEDICINES MANAGEMENT	246	167	68%
MENTAL HEALTH & LEARNING DISABILITIES	1090	860	79%
NURSING	214	98	46%
ONCOLOGY & CANCER SERVICES	93	66	71%
OPERATIONS DIRECTORATE MANAGEMENT	278	189	68%
PATHOLOGY	254	95	37%
PERFORMANCE	5	5	100%
PLANNED CARE	1052	627	60%
PRIMARY CARE & PRIMARY CARE MANAGEMENT	228	130	57%
PUBLIC HEALTH	471	224	48%

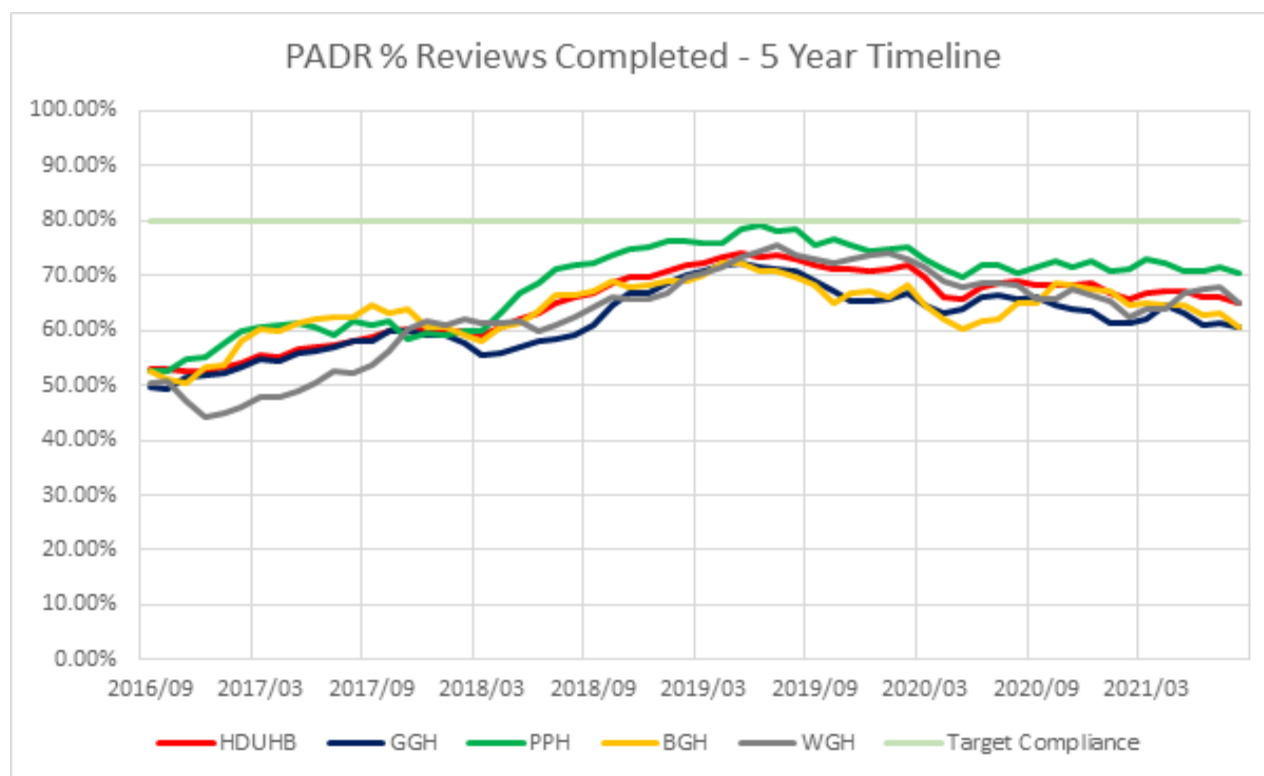
RADIOLOGY	230	80	35%
STRATEGIC PLANNING	33	21	64%
THERAPIES	623	408	65%
UNSCHEDULED CARE - BGH, GGH, PPH, WGH	2091	1346	64%
WOMEN & CHILDREN	649	419	65%
WORKFORCE & ORGANISATIONAL DEVELOPMENT	185	142	77%
<b>Grand Total</b>	<b>10163</b>	<b>6498</b>	<b>64%</b>

### PADR COMPLIANCE BY ACUTE SITE

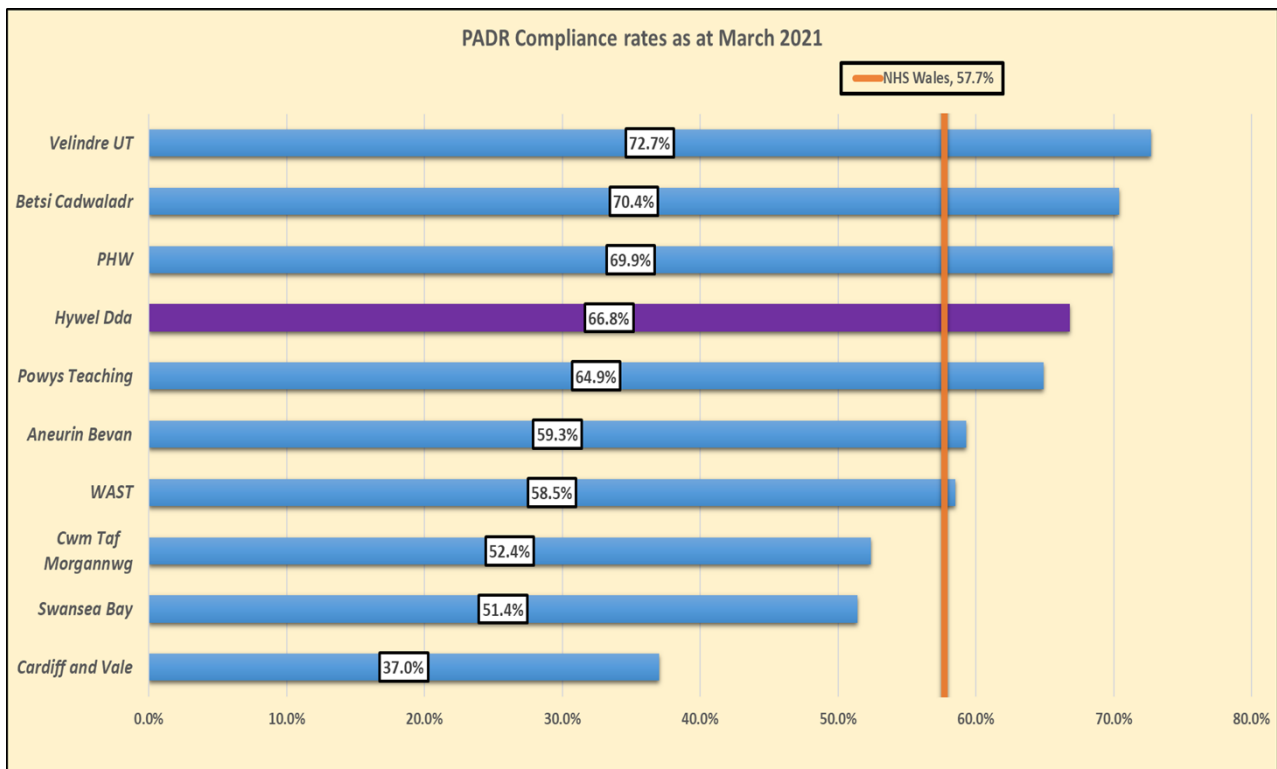
16/09/2021 (source ESR)

	Number of Staff	Number of Reviews Completed	Number of Reviews Completed %
Glangwili General Hospital	2722	1640	60%
Prince Phillip Hospital	1580	1086	69%
Bronglais General Hospital	1120	659	59%
Withybush General Hospital	1709	1102	64%
All other sites	3032	2011	66%
<b>HDdUB Grand Total</b>	<b>10163</b>	<b>6498</b>	<b>64%</b>

Evident in many of the directorates is the variance in compliance rates, whilst sites are quite comparable. This compliance rate does not provide any analysis on the quality of the PADR conversation. The figures show how many are being completed, however do not indicate how meaningful they have been.



It is apparent from the graph that the work started in 2018 by the Culture/ Workforce Experience team on the leadership development and PADR documentation had been having a positive impact on compliance rates. There remains a question - with this work ongoing, did a higher compliance rate equate to improved quality in the PADR?



The above statistics provide an insight to how HDdUHB is performing against other NHS organisations. It is reassuring that even with the decline in the past 24 months we are still holding a notable place on this list.

## 5. Challenges to managing performance

The challenges to HDdUHB concerning the managing performance agenda remain the actual system the organisation is operating within, and one in which provides substantial barriers for regular performance conversations or annual appraisals being completed to the required standards.

### 5.1 Leadership

Consistent compassionate leadership is a fundamental requirement for effective performance management. The work of Michael West (Professor of Work & Organisational Psychology) outlines the basic elements of this leadership style being an ability to listen with fascination, show empathy, understanding and stepping closer to challenges and taking appropriate actions; all of which should be primary elements on how we undertake performance conversations at HDdUHB.

***“What clearly was important to all staff was human contact and engagement from management. Although staff felt very supported and encouraged within their own teams, there were some instances where staff felt like they would have liked to have seen some level of engagement at the ‘coal face’ to at least feel that those in a position of leadership could identify with what they were going through. This was very apparent for some hospital wards feeling that they needed greater presence from hospital management and also for some community teams who felt very isolated at the start of the pandemic”*** (Understanding the staff experience in Hywel Dda University Health Board COVID 19 Pandemic, 2021).

Michael West also summarises a need for organisations to create compassionate 1-2-1 supervision and leadership. This provides employees with a sense of support to enable,



through conversations with leaders, an ability to feel their needs for growth and development are supported.

We are now facing the most severe workforce crisis in the history of the NHS. It is imperative that compassionate leadership is practiced at every level.

## **5.2 Time pressures**

Time is one of the areas that severely impacts the system negatively, or the lack of it. Pressures due to excessive workload does not provide leaders and team members with the time to pro-actively reflect and review individual performances, especially in clinical settings. It is widely recognised the workforce challenges in HDdUHB regarding absenteeism, presenteeism, staff stress, turnover and inability to recruit all cause a significant detrimental impact in time for reflection and feedback.

It cannot be ignored that due to this increased workload, reflection and performance conversations are perhaps not considered a high priority for many in the workforce. It is slightly concerning that due to the sheer amount of pressure in the system, questions remain that when PADRs are completed, are they undertaken to a high standard or is it merely viewed as a tick box exercise to ensure the leader gains a green on the Red, Amber, Green (RAG) rating measure.

## **5.3 Building relationships**

Advancements in agile working due to the pandemic are now proving problematic for office-based staff to regularly meet. This provides an inability to connect regularly face to face and discuss performance in a significant way. The virtual platforms are suitable as communication methods, however are not effective in building trust, rapport and safety. All of these elements are vital in having meaningful reflection and to discuss performance.

The level of psychological safety within the organisation may negatively influence holding open, transparent performance conversations. The team have gained qualitative feedback from the managing performance module, with leaders claiming they are reluctant to provide constructive feedback, due to possible allegations of bullying. Historically the PADR process has been developed within a parent/child dynamic. The need to move from that dynamic to a more adult-to-adult one provides a challenge, however, we are progressing with this agenda across HDdUHB.

The understanding the staff experience survey undertaken in HDdUHB during the 2020/21 COVID-19 Pandemic report recommended that the organisation has to ***“create a workplace which supports our staff to do their jobs as effectively as possible. Staff wants us to get the basics right from a physical and also an emotional workspace perspective and it’s imperative that we listen and respond”***

In order to progress, HDdUHB must obtain deeper levels of listening to the workforce; not as token gestures but as an authentic method in transforming organisational culture.

## **5.4 Objective setting**

Many of the leaders who undertake the managing performance module feed back that there is a lack of service objectives. This leads to disparity in developing SMART team and individual performance objectives. Research shows that effective teams require real objective setting, one which drives performances and supports innovation and improves patient care.

A major disadvantage in having an annual appraisal process is SMART objectives quickly become outdated due to the ever-increasing changes within roles. This can only be resolved with more regular conversations that consider these fluctuations in objective setting.

## **6. Future Direction of Performance Management in HDdUHB**

### **6.1 Building on learning to date**

The messaging concerning engagement, commitment, employee wellbeing, gratitude and recognition of service needs to be strengthened. The need for greater understanding in the theory of managing performance is still required. This will bring some consistency in the process across HDdUHB for new and existing leaders.

HDdUHB had started to make some consistent improvements in the completion of PADR's with rates rising steadily up to September 2019. It would be astute to attribute these rises to work completed on leadership development and the evolution of the PADR documentation.

The decline in compliance rates could be attributed to winter pressures and the pandemic. Compliance remains steady at approximately 60-65%, which is higher in comparison to other large health boards across Wales.

Whilst improvement is encouraging, HDdUHB still needs to progress in embedding a performance led culture. A culture where feedback seeks to improve and progress both individual and team performance. It has been extremely difficult to assess the quality of performance conversations. The planned quarterly site visits will provide a greater opportunity, however these have only just re-commenced due to COVID-19.

### **6.2 Performance Management Cultural Training**

The managing performance module is being increased to twice monthly from September 2021, due to the extra resource within the Culture/ Workforce Experience team. These extra dates will reduce the current waiting list by January 2022. Work is also being undertaken currently to develop bite-sized videos outlining the theory and practice that is contained in the module; these will enable just in time learning.

### **6.3 Improving intelligence**

There has been continuing development of Board measures that will include the question – have you had a PADR in the past 12 months that was meaningful and provided objectives. This will add a further thermometer check on the performance management agenda and culture within HDdUHB.

The quarterly acute site visits will continue and provide more workforce intelligence in the quality of ongoing performance conversations. These visits will be facilitated by the People and Workforce Experience team with the ongoing support of the newly recruited Organisation Development Relationship Managers (ODRMs).

### **6.4 Talent development**

The PADR does not provide any integrated links to personal development. The best practice for appraisals supports them being an excellent source for identifying workforce development requirements. These should be collated and built into an all-encompassing training needs analysis to inform the education and development provision across HDdUHB.

## **6.5 Amplifying the message**

There is also a substantial cultural shift required in performance conversations. There is an opportunity that any future developments can be fully embedded into the organisation through ODRMs. They will work with our services to create “People Culture Plans” which will drive and embed our aspired culture. Our aspiration is to create and embed a positive performance culture where these matters are talked about every day. It is part of our cultural makeup and the way we do things. It is part of every employee’s journey. The ODRMs will offer significant opportunities in gaining engagement and understanding with regard to measuring performance within the workforce. This is an agenda where we have only been able to make limited impacts due to limited resources and the pandemic.

## **6.6 Pay progression policy**

The way we implement the policy across HDdUHB can support and promote softer messages of the benefits of employee feedback and our collected expectation of an adult-to-adult performance culture. An implementation plan to support this approach will be required to be developed by the Summer 2022.

## **6.7 Further areas of exploration**

More research is required relating to team performance cultures, how they are applied in other organisational settings and health board environments, which show direct links to improvements in patient care.

## **Argymhelliad / Recommendation**

The People, Organisational Development & Culture Committee is asked to:

- Note the progress over the past five years, which includes an improvement in performance up to 2019 and current comparators against similar sized health boards in Wales.
- Support the outlined direction of travel to enable the growth of an employee led performance management culture in Hywel Dda University Health Board.

<b>Amcanion: (rhaid cwblhau)</b>	
<b>Objectives: (must be completed)</b>	
Committee ToR Reference: Cyfeirnod Cylch Gorchwyl y Pwyllgor:	2.3 To provide assurance to the Board on the organisation’s ability to create and manage strong, high performance, organisational culture arrangements
Cyfeirnod Cofrestr Risg Datix a Sgôr Cyfredol: Datix Risk Register Reference and Score:	To be confirmed
Safon(au) Gofal ac Iechyd: Health and Care Standard(s):	6.3 Listening and Learning from Feedback 7.1 Workforce
Amcanion Strategol y BIP: UHB Strategic Objectives:	2. Living and working well.

Amcanion Llesiant BIP: UHB Well-being Objectives: Hyperlink to HDdUHB Well-being Objectives Annual Report	2. Develop a skilled and flexible workforce to meet the changing needs of the modern NHS
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<b>Gwybodaeth Ychwanegol: Further Information:</b>	
Ar sail tystiolaeth: Evidence Base:	Ongoing staff experience and thematic analysis
Rhestr Termiau: Glossary of Terms:	Contained within the body of the report.
Partïon / Pwyllgorau â ymgynhorwyd ymlaen llaw y Pwyllgor Diwylliant, Pobl a Datblygu Sefydliadol: Parties / Committees consulted prior to People, Organisational Development & Culture Committee:	Not applicable

<b>Effaith: (rhaid cwblhau) Impact: (must be completed)</b>	
<b>Ariannol / Gwerth am Arian: Financial / Service:</b>	Not applicable
<b>Ansawdd / Gofal Claf: Quality / Patient Care:</b>	Not applicable
<b>Gweithlu: Workforce:</b>	Potential positive impact on staff morale and future engagement opportunities
<b>Risg: Risk:</b>	Not applicable
<b>Cyfreithiol: Legal:</b>	Not applicable
<b>Enw Da: Reputational:</b>	Not applicable
<b>Gyfrinachedd: Privacy:</b>	Not applicable
<b>Cydraddoldeb: Equality:</b>	Not applicable

# HDUHB commitment

- Create positive PADR podcasts to show peoples progression through the organisation and the 'Grow Your Own' scheme
- Link PADR to the annual training plan
- Allow all staff protected time to undertake PADR, paying additional hours if they can't have time in their shift to prepare and meet
- Mandate ODs Managing Performance sessions so that staff understand PADR
- Create clear guidance to managers and staff on the reasons for PADR and some do's and don'ts
- Create a list of bookable offices/rooms for staff to undertake their PADR
- Create podcasts of managers and staff who use them for development as best practise examples highlighting what is required of them in the values session
- Allow staff to meet and do PADR off site if needed
- Map best practise to show people visually how they should/could be done
- Look at having blended teams in terms of age and experience as they learn from each other

Show career pathways with staff stories, have an open forum for staff to ask how they get there!

Ensure training requirements are followed up, linking them to the annual training plan.

Action plan and list possible jobs/roles they could look at, becoming champions or doing audits or nutrition.

Encourage the 'Grow Your Own' scheme, it helps staff progress and develop and they also bring that learning back to the ward.



Find and book a suitable space to have the PADR, possibly away from your normal ward/office so you won't be disturbed. Give staff a safe space to ask questions, come up with ideas and have a voice and being led by staff! Staff need to be in a position to hear feedback.

Value each member of staff as this time is all about them!

## Progression/Acting Up

- The are no clear progression pathways to go from one band to another.
- If you are a band 6 you don't get the opportunity to act up!
- They don't affect your pay grade, shouldn't progression be triggered by it!
- Nothing is followed up unless you push it or the training is not available!

## Environment

- We don't have the time or space to do them, due to staff shortages! Shifts don't crossover!
- There are no suitable rooms to do PADR
- I don't get any time to do PADR due to being pulled away to incidents! They are done when I have a spare hour!

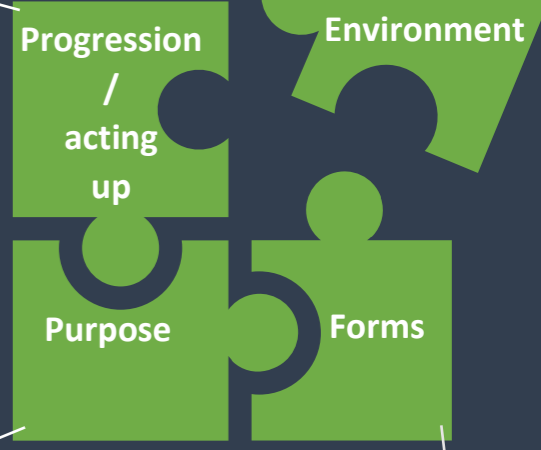
## Purpose

- It's tedious!
- We shouldn't wait a year to address performance!
- It depends who is doing it, some people see it as focusing on bad performance and a telling off session!

## Forms

- Why do we do them, nothing happens with them!
- I don't want or need a PADR!
- I say the same thing every year and nothing happens!
- Being in red on ESR means nothing to me!

**Qtr PADR visit WBH**



**You said!**

← What isn't working!      What's working! →

Attend the virtual OD Managing Performance sessions to get the best out the PADR and understand the process and value.

Set clear and achievable goals together. If someone says they don't want or need a PADR just have a 5 minute 1 to 1 conversation to check in with them asking the 3 basic questions.

Have a process map to show managers and staff how they should work. If nothing has changed as a result of their last PADR explain why.

Ensure staff know that it is a discussion around their development not a session to address bad performance

Send a letter to staff highlighting their training compliance.

Use or create your own template in plain English. Use the guidance notes as prompts.

Create a simple form to capture 1 to 1s. Print blank forms and put them notice boards to remind staff to prepare. For those not wanting development the form can be as simple as 'What has gone well, what hasn't gone well and what will they do differently next year'.

Be prepared by sending the documents out early for both managers and staff to come to the meeting with their thoughts which then helps engage conversation.

The forms are not helpful! They are not in plain English for everyone to understand and are wordy – especially the values part. I would rather print it out as otherwise its impersonal!

I don't understand the values section, what are we supposed to do?