



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

<b>DYDDIAD Y CYFARFOD: DATE OF MEETING:</b>	20 October 2022
<b>TEITL YR ADRODDIAD: TITLE OF REPORT:</b>	1103 – Performance Management Policy
<b>CYFARWYDDWR ARWEINIOL: LEAD DIRECTOR:</b>	Lisa Gostling, Director of Workforce and Organisational Development (OD)
<b>SWYDDOG ADRODD: REPORTING OFFICER:</b>	Jackie Wright, Culture & Workforce Experience Manager

**Pwrpas yr Adroddiad (dewiswch fel yn addas)  
Purpose of the Report (select as appropriate)**

Ar Gyfer Penderfyniad/For Decision

**ADRODDIAD SCAA  
SBAR REPORT**

Sefyllfa / Situation

The People, Organisational Development and Culture Committee (PODCC) is asked to approve the 1103 – Performance Management Policy (Appendix 1).

This report provides the required assurance that Policy 190 – Written Control Documentation has been adhered to in the development of the above mentioned written control document and that the document is in line with legislation/regulations, available evidence base and can be implemented within the Hywel Dda University Health Board (HDdUHB).

Cefndir / Background

Is this a new or revised document?	New	
Brief summary of the document	To ensure staff at all levels have clear performance objectives, with agreed development plans to support the delivery of their roles.	
Scope of the document	This policy applies to all non-medical or dental employees of the Health Board in all locations, including, temporary employees and locums. Medical staff have a separate medical appraisal system in place, however the principles of this policy also apply to medical and dental staff.	
Reason(s) for Developing the document	Improve/standardise clinical/organisational procedures	
	Response to complaint, incident or claim	
	Response to alert, safety notifications, Welsh Health Circulars (WHC)	
	Re-organisation of service/department	
	New/amended legislation	
	All Wales (AW) document, national guidance to be adopted	
Replacement/updating existing documents		

	Other – provide details	
Owning group	Name owning group: Workforce and OD (W&OD) Policy Group	
	Chair of owning group: Lisa Gostling, Director of W&OD	
	Date signed off by owning group:	
Lead author	Jackie Wright – Culture & Workforce Experience Manager	
<b>Assurance</b>		
<b>Equality Impact Assessment</b>	The attached (Appendix 2) EqIA is a full assessment.	
<b>Evidence base</b>	<p>Does the reference section list all the sources of evidence which has informed the content of the document?</p> <p><b>N/A</b></p> <p>Did the Lead Author on behalf of the Owning Group source the references themselves?</p> <p><b>NO</b></p>	
<b>Compliance with legislation/regulation/alert</b>	N/A	
<b>Targeted consultation of key stakeholders</b>	The revised policies have been reviewed with the involvement of key stakeholders including a bespoke Task & Finish Group and other colleagues as appropriate.	
	<p>All those listed above have confirmed that:</p> <ul style="list-style-type: none"> <li>• They are in agreement with their relevant section of the content of the document.</li> <li>• They are able to implement or comply with their relevant section of the content of the document.</li> </ul>	
<b>Collaboration with others (interested parties)</b>	<p>W &amp; OD Local Partnership Forum Partnership Forum Service Leads Performance Management Policy Review Group</p> <p>The above have confirmed that they are in agreement with all sections of the policy</p>	
<b>Global consultation</b>	<p><b>Global Consultation – 27.09.2022 – 11.10.2022.</b></p> <p>No comments have been received during the global consultation period.</p>	
<b>Patient Information</b>	N/A	
<b>Dissemination</b>	Following approval, the policy will be shared on global email and uploaded to the intranet site and will replace existing versions.	
<b>Implementation</b>	Performance Management training is undertaken on a weekly basis by the Culture & Workforce Experience Team.	
<b>Monitoring</b>	Performance, Appraisal and Development Review (PADR) compliance rates are monitored and reported into Welsh Government.	

	PADR compliance will be monitored via data analysis on a quarterly basis and bespoke training will be undertaken with services where support is needed.
<b>Proposed review date of the document</b>	3 years
<b><u>Argymhelliad / Recommendation</u></b>	
The People Planning and Performance Assurance Committee is requested to approve the 1103 – Performance Management Policy.	

<b>Amcanion: (rhaid cwblhau) Objectives: (must be completed)</b>	
Committee ToR Reference: Cyfeirnod Cylch Gorchwyl y Pwyllgor:	5.14 Approve organisational Health and Safety Policies, Procedures, Guidelines and Codes of Practice (policies within the scope of the Committee).
Cyfeirnod Cofrestr Risg Datix a Sgôr Cyfredol: Datix Risk Register Reference and Score:	Not applicable
Safon(au) Gofal ac Iechyd: Health and Care Standard(s):	Governance, Leadership and Accountability
Amcanion Strategol y BIP: UHB Strategic Objectives:	Not Applicable
Amcanion Cynllunio Planning Objectives	1F HR Offer (induction, policies, employee relations, access to training )
Amcanion Llesiant BIP: UHB Well-being Objectives: <a href="#">Hyperlink to HDdUHB Well-being Objectives Annual Report 2018-2019</a>	10. Not Applicable

<b>Gwybodaeth Ychwanegol: Further Information:</b>	
Ar sail tystiolaeth: Evidence Base:	Legislation and national policy
Rhestr Termau: Glossary of Terms:	Contained within each written control document
Partïon / Pwyllgorau â ymgynhorwyd ymlaen llaw y Pwyllgor Diwylliant, Pobl a Datblygu Sefydliadol:	As detailed in the assessment

Parties / Committees consulted prior to People, Organisational Development & Culture Committee:	
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<b>Effaith: (rhaid cwblhau)</b> <b>Impact: (must be completed)</b>	
<b>Ariannol / Gwerth am Arian:</b> <b>Financial / Service:</b>	Unforeseen and unbudgeted costs of investigations and/or defence of any legal action could arise from non-adherence to the Policies
<b>Ansawdd / Gofal Claf:</b> <b>Quality / Patient Care:</b>	Staff accessing written control documentation which is out of date, no longer relevant or contradicts current guidance may have a negative effect on the quality, safety and experience of care. It may also lead to unwarranted variation in care delivery
<b>Gweithlu:</b> <b>Workforce:</b>	The policy applies to all staff
<b>Risg:</b> <b>Risk:</b>	The presence of written control documentation on the intranet, outside of the Policies, Procedures and other Written Control Documentation intranet webpage, may result in staff accessing documents which are out of date, no longer relevant, or contradicting current guidance
<b>Cyfreithiol:</b> <b>Legal:</b>	It is essential that the UHB has up to date policies and procedures in place
<b>Enw Da:</b> <b>Reputational:</b>	Not applicable
<b>Gyfrinachedd:</b> <b>Privacy:</b>	Not applicable
<b>Cydraddoldeb:</b> <b>Equality:</b>	A full equality impact assessment has been undertaken for each separate policy/procedure

# Performance Management Policy

## Policy information

Policy number: 1103

Classification:  
Employment

Supersedes:  
[045 - Performance Appraisal and Personal Development Plan Policy](#) (opens in new tab)

Local Safety Standard for Invasive Procedures (LOCSSIP) reference:  
N/A

National Safety Standards for Invasive Procedures (NatSSIPs) standards:  
N/A

Version number:  
1.0

Date of Equality Impact Assessment:  
*Detail date of EqIA*

## Approval information

Approved by: People, Organisational Development and Culture Committee (PODCC)

Date of approval:  
*Enter approval date*

Date made active:  
*Enter date made active (completion by policy team)*

Review date:  
*Enter review date (normally three years from approval date)*

## Summary of document:

To ensure staff at all levels have clear performance objectives, with agreed development plans to support the delivery of their roles.

## Scope:

This policy applies to all non-medical or dental employees of the Health Board in all locations, including, temporary employees and locums. Medical staff have a separate medical appraisal system in place but the principles of this policy also apply to medical and dental staff.

## To be read in conjunction with:

[133 - Equality, Diversity and Inclusion Policy](#) (opens in new tab)

[203 - All Wales Capability Policy and Procedure](#) (opens in new tab)

142 – All Wales Grievance Policy - in draft currently

Learning and Development Strategy

314 - Medical Staff Appraisal Policy – in draft currently

[113 - Learning and Development Policy](#) (opens in new tab)

[443 - All Wales Pay Progression Policy](#) (opens in new tab)

[836 - All Wales Information Governance Policy](#) (opens in new tab)

[173 - Freedom of Information and Environmental Information Policy](#) (opens in new tab)

## Patient information:

Include links to [Patient Information Library](#)

## Owning group:

W&OD Policy Group

*Date signed off by owning group*

## Executive Director job title:

Lisa Gostling – Director of Workforce and Organisational Development

## Reviews and updates:

1.0 – New Policy

## Keywords

PADR, PDP, Performance Appraisal, Personal Development Plan

## Glossary of terms

PADR – Performance Appraisal and Development Review

CPD – Continuous Personal and Professional Development

HIW – Health Inspectorate for Wales

NICE – National Institute for Clinical Excellence

NPSA – National Patient Safety Agency

TNA – Training Needs Analysis

IMTP – Integrated Medium Term Plan

PDPs - Personal Development Plans

ESR – Electronic Staff Record

HR – Human Resources

HDdUHB - Hywel Dda University Health Board

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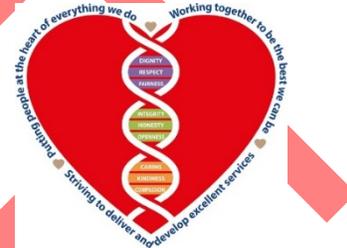
## Introduction

It is the policy of HDdUHB that all staff have continuous feedback on their performance. It is imperative that staff at all levels have clear performance objectives, with agreed development plans to support the delivery of their roles and to align with the requirements of the [443 - All Wales Pay Progression Policy](#) (opens in new tab).

## Policy statement

The purpose of this policy is to ensure that Hywel Dda University Health Board (HDdUHB) has a clear, consistent and fair performance management and development process and that there is a clear link between individual contribution and achieving team, service and organisational strategic objectives of:

1. Putting people at the heart of everything we do
2. Working together to be the best we can be
3. Striving to deliver and develop excellent services
4. The best health and wellbeing for our communities
5. Safe, sustainable, accessible, and kind care
6. Sustainable use of resources



The policy will align to one of Welsh Government's four goals for the health and care system in Wales ([the Quadruple Aim](#)) (opens in new tab) and also support:

- [A Healthier Mid and West Wales strategy](#) (opens in new tab)
- [Workforce, Organisational Development and Education Strategy 2020-2030](#) (opens in new tab).

## Scope

This policy applies to all non-medical or dental employees of the Health Board in all locations, including, temporary employees and locums. These staff will get an annual yearly appraisal as a minimum requirement. Medical staff have a separate medical appraisal system in place. The majority of staff fall under the terms and conditions of the Agenda for Change National Agreement, which includes the Development Review, and forms part of the Agenda for Change national agreement.

Consultant medical staff are subject to annual appraisal as set out in Advance Letter (MD)W5/2001. Other grades of medical staff within the organisation will receive an annual appraisal; this will be carried out using the pro forma and process described in the above Advance Letter.

## Equality

HDdUHB recognises and values the diversity of its workforce. Our aim is to provide a safe environment where all employees are treated fairly and equally and with dignity and respect. The Health Board recognises that the promotion of equality and human rights is central to its work both as a provider of health care and as an employer. This policy has been impact assessed using the Health Board integrated impact assessment tool.

## Aim and Objectives

An effective performance management system is key in supporting the delivery of the Health Board's strategic vision, purpose and objectives. All staff must be clear of what is expected of them in their roles and how this contributes to the success of their teams and the organisation. Effective performance

management is centred on agreeing clear objectives, discussing behavioural expectations and having regular feedback to review progress and agree any development or resources required.

The individual and the organisation will benefit from having clear guidance and support to enable a capable and highly motivated workforce clear on their role and expected behaviours as set out in the [HDdUHB Values and Behaviour Framework](#) (opens in new tab).

The organisation and the individual staff member benefits from the support and guidance given during regular meaningful feedback conversations which will enable them to embed an organisational value and be the best they can be. This results in an effective, efficient and highly motivated skilled workforce,

## Principles of Performance Feedback and Development

The delivery of high-quality care within the NHS depends on every member of staff:

- Having a clear understanding of their role and the part they play in their team and the organisation.
- Having an agreed set of priorities and objectives for their work.
- Possessing and applying the knowledge and skills they need to perform the role effectively and achieve their objectives.

Performance management is aligning leaders and staff to be clear about expectations and objectives and how their performance contributes to the Health Boards strategic vision and success. It also requires clarity on how progress with objectives are evaluated and measured.

The need for regular, meaningful performance feedback is one that requires a continuous process. It involves ensuring that the work and performance of all staff contributes to the goals of teams, services and HDdUHB as a whole. The aim to continuously improve performance through regular feedback supports the wellbeing of individuals, teams and maximizes workforce effectiveness.

The four key stages to the approach are:

- **Plan** – Setting goals
- **Act** – Doing the job and developing
- **Monitor** – Ongoing feedback conversations, coaching and improvement
- **Review** (PADR) – Final check in and rating

### Benefits of Positive Performance Discussions

Regular performance discussions provide benefits to the workforce and organisation as detailed in Appendix 12 (insert link)

## Welsh Language

Colleagues wishing to conduct their appraisal in Welsh can request to do so if their line manager is a Welsh speaker. All the documentation is available in the medium of Welsh to comply with Welsh Language Standards and promote the use of the Welsh language where appropriate.

During at least one PADR discussion, managers and colleagues should review welsh language proficiency and ensure it (or any changes) is updated in ESR. Colleagues should also discuss welsh language skills development as part of learning needs if it would be beneficial to the delivery of their work.

## Quality and Assurance

The OD Department in collaboration with service leads, will quality assure the implementation of the process and supporting documentation. This will be achieved through on-going quality checks, audits and ESR data, to monitor compliance and quality, as well as through PADR leads established in Directorates.

Performance metrics for PADR are as follows;

- **85%** of staff have undertaken a Performance Appraisal & Development Review with their nominated appraiser in a 12-month period.
- **85%** of staff have a Personal Development Plan in place.
- Training Needs Analysis (TNA) is completed annually from all areas.
- Number of employees passing through pay progression.
- Number of consultant and non-consultant career grade appraisals undertaken.

## Pay Progression

The [443 - All Wales Pay Progression Policy](#) (opens in new tab) and Annex 23 of the NHS Terms and Conditions of Service set out five specific pay progression standards, which outline the requirements to be demonstrated before an employee is able to progress to the next pay step point on their pay step date.

## Health Board Guidance

HDdUHB has developed guidance forms and checklists for managers and staff providing a clear explanation of the process and associated documentation. The forms are available on the intranet [forms library](#). See [Appendix 8](#), [Appendix 9](#), [Appendix 10](#) and [Appendix 11](#).

Staff who fall outside of the Agenda for Change Agreement (i.e. Directors, Medical and Dental staff) should still follow the principles of the guidance in this document, excluding the references to the [443 - All Wales Pay Progression Policy](#) (opens in new tab).

## Documentation

Copies of the framework and associated guidance for managers and staff including the PADR documentation are available on the HDdUHB Intranet are documented in from Appendix 1 – 12).

## Responsibilities

### Chief Executive

The Chief Executive holds overall responsibility for the effective management of the Organisational Policy.

### Executive Directors

Executive Directors have responsibility to ensure that:

- All staff within their responsibility are aware of and comply with the policy.
- All Executive Directors proactively role model the associate behaviours to build a performance led culture.

### Director of Workforce and Organisational Development

It is the Director of Workforce and Organisational Development's responsibility to ensure that:

- The policy is formulated and disseminated.

- The policy is reviewed and updated.
- Owning and monitoring the policy and audit the quality of the process
- Ensuring all managers have access to suitable training
- Reporting compliance to Welsh Government on an annual basis

### **Senior Managers, Heads of Services**

It is the responsibility of all Senior Managers and Heads of Services to ensure that:

- The policy is disseminated throughout their respective services and departments
- All Senior Managers, Heads of Service proactively role model the associate behaviours to build a performance led culture.
- All levels of staff within their department or professional group adhere to this policy in all respects
- The Welsh Government compliance attained within their services through compliance with this policy by ensuring all staff have an annual PADR and PDP and build a performance led culture through continuous feedback.
- Where development plans have associated costs identified to support learning and development, authorisation processes are clear within the team
- The required Health Board process followed within the Health Board Guidance Documentation reviews where individuals have not demonstrated the requisite delivery of objectives or knowledge and skills and pay progression may be affected.
- Payroll notified in a timely manner using the defined Health Board process and documentation if a member of staff should not progress through pay progression.
- All identified appraisers have the requisite skills and knowledge to undertake an appraiser role. (An appraiser may not necessarily be the appraisee's line manager, but must supervise them sufficiently on a regular basis).
- Collating all training needs identified through personal development plans into a local service-training plan as part of the Training Needs Analysis (TNA) process.

### **Heads of Department and Ward Managers**

Ward Managers and Heads of Department are responsible:

- All Heads of Departments/Ward Managers proactively role model the associate behaviours to build a performance led culture.
- The reporting of the number of PADRs undertaken and Personal Development Plans (PDPs) recorded in the Electronic Staff Record (ESR) to enable accurate corporate reporting monthly to the Board.
- Ensuring all staff have annual PADR and PDP and gain regular performance feedback via one-to-ones / supervisions.
- Monitoring compliance of PADRs and PDPs locally with their team.
- Following required Health Board process within the Health Board guidance documentation (accessed via the intranet [forms library](#) (opens in new tab)) reviews where individuals have not demonstrated the requisite delivery of objectives or knowledge, skills, and pay progression may be affected, and notifying line manager and HR team throughout the process.
- All identified appraisers have the requisite skills and knowledge to undertake the role (An appraiser may not necessarily be the appraisee's line manager but must supervise them sufficiently on a regular basis).
- Collating all training needs identified through Personal Development Plans into a Departmental Training Plan, and submitted to the service manager for information/authorisation and then the Learning and Development Department as part of the Training Needs Analysis process.

## Workforce and Organisation Development

The Workforce and Organisation Department are responsible for ensuring that:

- The policy is published, reviewed, updated and held on the Health Board intranet site.
- [Training](#) (opens in new tab) for appraisers and appraisees will be available for all staff to enable them to participate in Performance Appraisal and Development Review.
- Records of attendance at training held on the Health Board ESR record.

## The Employee

- Take personal responsibility to participate in regular 121's, supervision to gain feedback on their performance.
- Follow the required Health Board process within the Health Board guidance documentation (accessed via the intranet [forms library](#)) (opens in new tab).
- Undertake the Health Board's [Performance Management Training Workshop](#) (opens in new tab).
- Have an annual PADR and PDP with their appraiser.

## Data Protection Act 1998 / General Data Protection Regulations 2016 or any Subsequent Legislation to the same Effect

All documents generated under this policy, including applications, and formal notes and documents generated by managers and any review panel, that relate to identifiable individuals are to be treated as confidential documents, in accordance with the [225 - General Data Protection Policy](#) (opens in new tab). It is recommended that all parties familiarise themselves with the relevant parts of this policy.

## Freedom of Information Act 2000

All Health Board records and documents, apart from certain limited exemptions, can be subject to disclosure under the Freedom of Information Act 2000. Records and documents exempt from disclosure, under most circumstances, would include those relating to identifiable individuals arising in a personnel or staff development context. Details of the application of the Freedom of Information Act within the Health Board may be found in the [173 - Freedom of Information and Environmental Information Policy](#) (opens in new tab). It is recommended that all parties familiarise themselves with the relevant parts of this policy.

## Records Management

All documents generated under this policy, including applications, and formal notes and documents generated by managers and any review panel, are official records of the Health Board and will be managed and stored and utilised in accordance with the [Health Board's Records Management Policy](#) (opens in new tab).

## Review

This policy reviewed in three years' time. Earlier review may be required in response to exceptional circumstances, organisational change or relevant changes in legislation or guidance.

## Monitoring

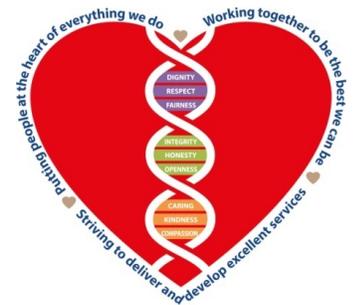
Details of all PADR's completed are recorded in a database and reported on periodically to the Partnership Forum and the Health Board.

## Discipline

Breaches of this policy being investigated and may result in the matter being treated as a disciplinary offence under the Health Board's disciplinary process. (See [201 - All Wales Disciplinary Policy and Procedure](#) (opens in new tab)).

DRAFT

## Appendix 1 – Revalidation Form



Nursing and Midwifery Council Revalidation			
Date of next Revalidation			
When do you think you will be ready for confirmation? <small>(Can be done up to 12 months before revalidation date)</small>			
Preparation of Evidence since last Revalidation			Initials of manager
How much CPD have you completed (in hours)?	Participatory	Non-Participatory	
How much feedback have you recorded?			
How many reflections have you written?			
Actions needed in the coming year to ensure you are keeping up with the requirements for Revalidation			

## Appendix 2 – NMC 2018 Practice Supervision Form

**NMC Standards for Education 2018:**

**Practice Supervisor / Practice Assessor  
(Nursing & Midwifery staff only)**



**Ongoing Practice Supervisor (PS) and Practice Assessor (PA) Updating:**

Ongoing updating for PS and PA roles involves a blended learning approach. Within a three-year period, registered health and social care professionals acting in either a PS or a PA capacity (or undertaking both roles) must provide sufficient evidence of educational activities in order to demonstrate up to date knowledge of the student programme/s they are supporting.

**Practice Supervisors**

Within Hywel Dda UHB all *Trained Practice Supervisors* are required to *access a face to face update with the Education Liaison Service (ELS)\* at least once every 3 years*. However PS can access an annual PS update if they so wish.

**Practice Assessors**

Within Hywel Dda UHB all *Trained Practice Assessors* are required to *access an annual PA update*.

It is every PS & PA individual responsibility to ensure that they access the required updates and maintain this portfolio to meet the Health Board and NMC standards.

I am completing this in my role of: Please choose and confirm 	Practice Supervisor	Practice Assessor	PS/PA signature & date
	YES	NO	
<b>I have completed Section 1. Personal Record in my Practice Supervisors and Practice Assessors Portfolio</b> <i>(page 4 in PS/PA Portfolio)</i>			
<b>I have completed Section 2. Attendance at Practice Supervisor or Practice Assessor updates</b> <i>(page 5 in PS/PA Portfolio)</i>			
<b>I have completed Section 3. Involvement in additional educational activity</b> <i>(page 6 in PS/PA Portfolio)</i>			
<b>I have completed Section 4. Record of student supervision and assessment activity</b> <i>(page 7 in PS/PA Portfolio)</i>			
<b>I have completed Section 5: Reflective Log</b> to record practice supervision and assessment activities in which I have been involved.			



All trained supervisors will complete three yearly updates

**Clinical supervisors will be required to provide evidence of having facilitated either 1:1 or group supervision for a minimum of 4-6 hours per calendar year.**

**\*\* Please forward a copy of *Clinical Supervisors Self-Monitoring Template* to Team Leader, Education Liaison Service\*\***



## Clinical Supervisors Self-Monitoring Template

Supervisor's Name :  
 Supervisors Role & service :  
 Supervisors base:

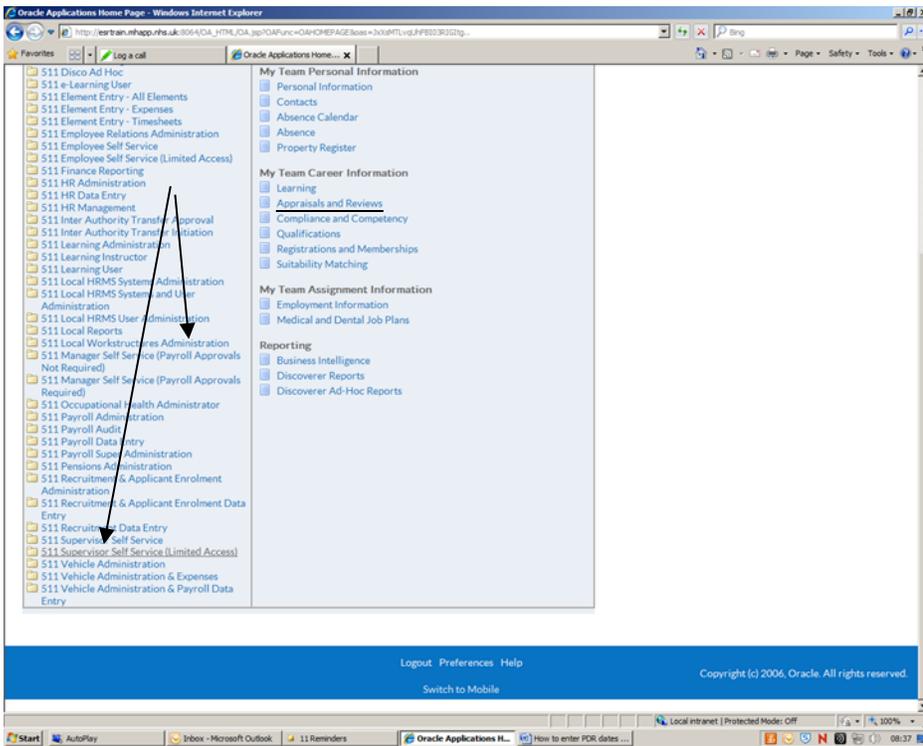
Year: 20\_\_  
 Date of 3 yearly Clinical supervision update: \_\_ / \_\_ / \_\_

Please confirm 1:1 OR group supervision	Jan Hrs. spent providing Clinical supervision	Feb. Hrs. spent providing Clinical supervision	March Hrs. spent providing Clinical supervision	Apr. Hrs. spent providing Clinical supervision	May Hrs. spent providing Clinical supervision	June Hrs. spent providing Clinical supervision	July Hrs. spent providing Clinical supervision	Aug Hrs. spent providing Clinical supervision	Sept Hrs. spent providing Clinical supervision	Oct Hrs. spent providing Clinical supervision	Nov Hrs. spent providing Clinical supervision	Dec Hrs. spent providing Clinical supervision
<b>Total No. of Hrs. spent providing Clinical supervision</b>												



# Appendix 4 – How to Enter PADR Dates to ESR

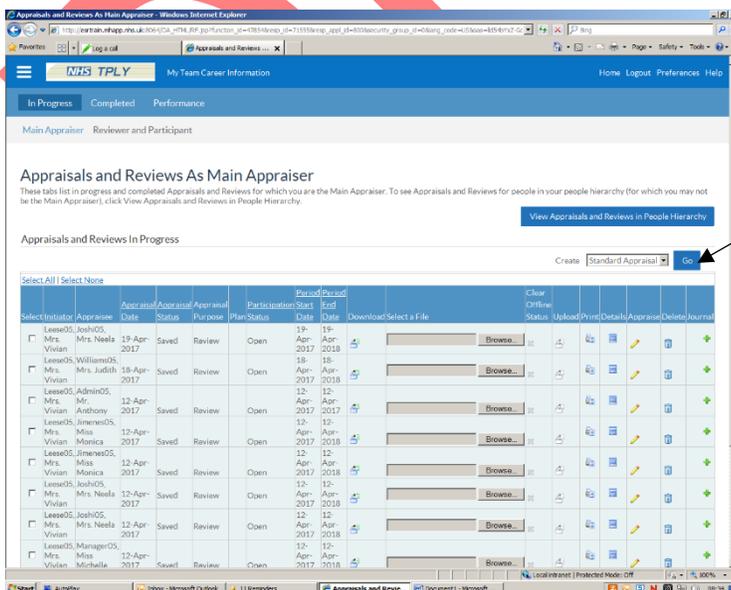
## Under Supervisor/Manager Self Service



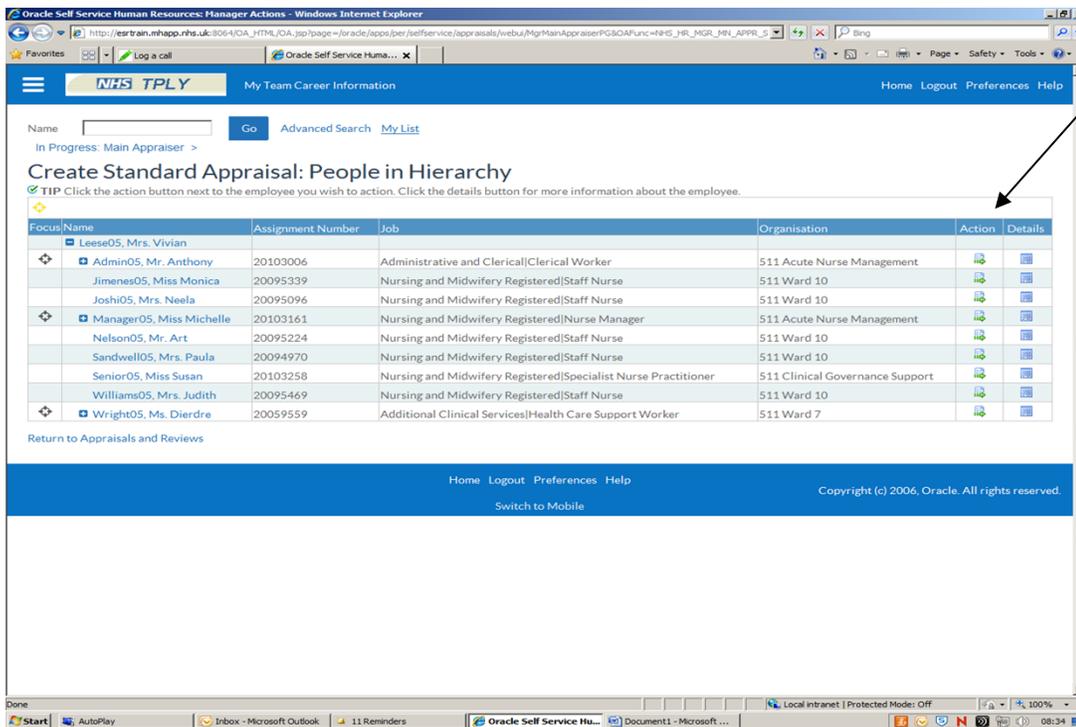
Click on **“Appraisals and Reviews”**.

Below is a list of staff that have current appraisals.

To insert new appraisals for staff that are not showing in the list below please click on **‘GO’**



You will then see all staff within your hierarchy click on **'Action'** against the relevant staff to insert PDR dates



Insert the relevant information into the following fields:-

Review Type – select Review, Period Start Date and Period End Date, Template – click on the magnifying glass, type in KSF to the empty field and click GO, choose the KSF Review template.

The correct format to use is as follows:-

**Period Start Date:- 6 July 2021**

**Period End Date:- 6 July 2022**

**Appraisal Date:- 6 July 2021**

**Next Appraisal Date:- 6 July 2022**

*(Please note the **incorrect** format:- start - 6 July 2021, end - 6 July 2022, next appraisal date - 2023)*

Manually delete the Appraisal date as it will have deferred to today's date and put in the date you undertook the review.

Main Reviewer if this is blank, Click Save and Close

Cont.....

Oracle Self-Service Human Resources: Create Standard Appraisal: Setup Details - Windows Internet Explorer

http://esrtrain.mhapp.nhs.uk:8064/OA\_HTML/OA.jsp?\_ic=HR\_PERSON\_TREE\_TOP\_SS&\_ri=800&pCaller=NHS\_HR\_MGR\_MN\_APPR\_SS&OAFunc=XOHR\_STANDARD\_A

NHS TPLY My Team Career Information Home Logout Preferences Help

### Create Standard Appraisal: Setup Details

Step 1 of 2

Employee Name Sandwell05, Mrs. Paula  
Employee Number 20094970

Cancel Save and Close Add Details

#### Setup Details

TIP You cannot change the appraisal template or the assignment after clicking Next.  
\* Indicates required field

Review Type

Period Start Date

Period End Date

Template

Appraisal Date 19-Apr-2017

Next Appraisal Date

Assignment Number 20094970

Main Reviewer Leese05, Mrs. Vivian

April 2017

Sun	Mon	Tue	Wed	Thu	Fri	Sat
26	27	28	29	30	31	1
2	3	4	5	6	7	8
9	10	11	12	13	14	15
16	17	18	19	20	21	22
23	24	25	26	27	28	29
30	1	2	3	4	5	6

Cancel Save and Close Add Details

Home Logout Preferences Help

Copyright (c) 2006, Oracle. All rights reserved.

Switch to Mobile

Done

Local intranet | Protected Mode: Off

Start AutoPlay Inbox - Microsoft Outlook 11 Reminders Oracle Self-Service H... Document1 - Microsoft ... 08:34

## HOW TO VIEW PREVIOUS PADR VIA ESR (for previous PADR dates)

Go to **ESR Navigator** on the left hand side within the Portal

My Pages

- Dashboard
- Portal Content >
- ESR Navigator

NHS Business Services Authority

Tell Us What You Think

Click here to share your experiences of

Go into **Manager or Supervisor Self Service** access

Click on **'Appraisals and Reviews'** and select member of staff via **'Details'**

If staff are not showing there this means there is no up to date appraisal; click on **'View Appraisals and Reviews in People Hierarchy'**

Click on **'Action'** for the person you are searching for

Look to left and click on **'View'**

Click on drop down arrow 

Click on **'All'**

Press **'GO'**

Click on **'Details'** on the date you wish to view

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## Appendix 5 – PADF PDP Form

### PERSONAL DEVELOPMENT PLAN PROFORMA

Before any additional development is undertaken the member of staff **MUST** have attained their minimum mandatory training

<b>PERSONAL DEVELOPMENT NEED IDENTIFIED</b>  (PLEASE CROSS REFERENCE WITH WORK OBJECTIVE/ROLE)	<b>IMPACT UPON EFFECTIVE DELIVERY OF ROLE</b>	<b>DEVELOPMENT/ TRAINING AGREED INCLUDING TIMESCALE</b>	<b>FUNDING OR STUDY LEAVE AGREED</b>  (PLEASE NOTE SOURCE OF FUNDING AND TRAINING INSTITUTION IF EXTERNAL)	<b>EXPECTED OUTCOME FROM THE INVESTMENT IN DEVELOPMENT</b>	<b>EVALUATION FOLLOWING ATTENDANCE/DEVELOPMENT</b>  ( PLEASE NOTE HOW YOU WILL SPECIFICALLY EVALUATE THE RETURN ON THE INVESTMENT IN DEVELOPMENT)

Signature of Appraisee: .....

Signature of Appraiser: .....

# Appendix 7 – Leadership PADR Form

## PERFORMANCE APPRAISAL DEVELOPMENT REVIEW CORE PADR

### My Details / My Appraiser's Details

My Name:	_____	My Job Title:	_____
Department:	_____	County:	_____
Review Period Start Date:	_____	Review Period End Date	_____
Appraiser Name::	_____	Appraiser Job Title	_____
Date:	_____	My Pay Number:	_____

### Personal Review of Objectives– to be completed by the appraisee during the discussion

a) What have been the successes for me this year?

b) What have been the challenges for me this year?

**Objective Setting**

What are my **SERVICE** objectives for the next year?

What are my **TEAM** objectives for the next year?

Empty space for writing SERVICE objectives.

Empty space for writing TEAM objectives.

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**What are my PERSONAL objectives for the next year (Max 8 objectives)? Use SMART Guidance. How do they relate to the Organisational Values?** ([click here Hywel Dda University Health Board | Values - Introduction](#) for further guidance)



can be

*Working together to be the best we*



services

*Striving to Develop & deliver excellent*



*Putting People at the heart of everything we do*

**Core Objectives**

Objectives	Expected outcome/measure of achievement	Target date	Support/action by Manager/others	Progress Review date
1. Complete mandatory training	100% compliance on ESR			
2. Engage with & complete yearly PADR	ESR data compliance			

3. Ensure compliance with the <a href="#">Welsh Language Standards</a> and promote and facilitate the use of the Welsh Language in the workplace	WLS compliance			
<b>Personal Objectives</b>				
4.				
5.				
6.				
7.				

8.				
9.				

**Personal Development Plan**

Identify below the learning & development needs required to fulfil/maintain your personal objectives

**Development to meet objectives** [Refer to Appendix 5](#)

**Nursing Midwifery Council (NMC) Revalidation**

Are you on the NMC register? Yes  No

If 'yes' please refer to [Appendix 1](#)

**NMC Standards for Education 2018: Practice Supervisor / Practice Assessor (Nursing & Midwifery Staff only)**

Please refer to [Appendix 2](#)

**Clinical Supervision – A guidance plan for nurses in Hywel Dda University Health Board**

Please refer to [Appendix 3](#)

**General Comments**

General comments regarding this review period

What are my career aspirations for the next 12 months?

**Summary (To be completed by Appraiser)**

Provide a summary of your overall assessment of the individual's performance during the review period, including any areas requiring improvement.

**Pay Progression (To be completed by Appraiser)**

**Step 1**

Is this PADR a pay affecting progression appraisal? Yes  No  (if yes go to **Step 2** below)  
 (See the [All Wales Pay Progression Policy](#))

**Step 2**

Has the appraisee achieved their objectives for the previous year and met the standards of the pay progression policy, see below?

- |  |       |                          |           |                          |
|--|-------|--------------------------|-----------|--------------------------|
| 1. Appraisee has achieved their objectives   | Yes   | <input type="checkbox"/> | No        | <input type="checkbox"/> |
| 2. The appraisal process has been completed within the last 12 months and outcomes are in line with the organisation's standards | Yes   | <input type="checkbox"/> | No        | <input type="checkbox"/> |
| 3. The appraisal has achieved 100% compliance for mandatory training   | Yes   | <input type="checkbox"/> | No        | <input type="checkbox"/> |
| 4. There is no formal capability process in place for the appraisee  | Agree | <input type="checkbox"/> | Disagree  | <input type="checkbox"/> |
| 5. There is no formal disciplinary sanction live on the appraisee's record   | Agree | <input type="checkbox"/> | Disagree  | <input type="checkbox"/> |
| 6. <a href="#">The appraiser must complete the Pay Affecting Progression Appraisal on ESR (See ESR MSS41 online training)</a>    |       |                          | Completed | <input type="checkbox"/> |

<b>I am committing to this by signing :</b>	<b>Date:</b>
<b>My appraiser agrees by signing :</b>	<b>Date:</b>
<b>Date of Next Review:</b>	

# Appendix 7 – Leadership PADR Form

## PERFORMANCE APPRAISAL DEVELOPMENT REVIEW LEADERSHIP/MANAGEMENT PADR

### My Details / My Appraiser's Details

My Name:	_____	My Job Title:	_____
Department:	_____	County:	_____
Review Period Start Date:	_____	Review Period End Date	_____
Appraiser Name::	_____	Appraiser Job Title	_____
Date:	_____	My Pay Number:	_____

### Personal Objectives Review – to be completed by the appraisee during the discussion

a) What have been the successes for me this year?

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

b) What have been the challenges for me this year?

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

--

**Objective Setting**

What are my **SERVICE** objectives for the next year?

--

What are my **TEAM** objectives for the next year?

--

**What are my PERSONAL objectives for the next year (Max 8 objectives)? Use SMART Guidance. How do they relate to the Organisational Values? ([click here for Welsh Dda University Health Board | Values – Introduction for further guidance](#))**



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**Striving to Develop & deliver excellent services**



**Putting People at the heart of everything we do**

**Core Objectives**

Objectives	Expected outcome/measure of achievement	Target date	Support/action by Manager/others	Progress Review date
1. Complete mandatory training for myself & ensure that my team completes all mandatory training	100% compliance on ESR			
2. Engage with & complete my yearly PADR	ESR data compliance			
3. Ensure that I have undertaken regular 1-2-1's and completed the PADR process with my team	100% compliance			
4. Manage sickness absence for my team in accordance with the <a href="#">All Wales Managing Attendance at Work Policy</a>	WG % compliance			
5. Undertake regular Team Brief with my team				
6. Actively promote staff health & well-being within my team				

7. Ensure compliance with the <a href="#">Welsh Language Standards</a> and promote and facilitate the use of the Welsh Language in the workplace	WLS compliance			
<b>Personal Objectives</b>				
<b>Objectives</b>	<b>Expected outcome/measure of achievement</b>	<b>Target date</b>	<b>Support/action by Manager/others</b>	<b>Progress Review date</b>
8.				
9.				
10.				
11.				
12.				

### Personal Development Plan

Identify under the headings below the learning & development needs required to fulfil/maintain your personal objectives

**Development to meet objectives** [Refer to Appendix 5](#)

### Nursing Midwifery Council (NMC) Revalidation

Are you on the NMC register?

Yes

No

If 'yes' please refer to [Appendix 1](#)

### NMC Standards for Education 2018: Practice Supervisor / Practice Assessor (Nursing & Midwifery staff only)

Please refer to [Appendix 2](#)

### Clinical Supervision – A guidance plan for nurses in Hywel Dda University Health Board

Please refer to [Appendix 3](#)

### General Comments

General comments regarding this review period



4. The appraisee has achieved 100% compliance for mandatory training	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
5. There is no formal capability process in place for the appraisee	Agree	<input type="checkbox"/>	Disagree	<input type="checkbox"/>
6. There is no formal disciplinary sanction live on the appraisee's record	Agree	<input type="checkbox"/>	Disagree	<input type="checkbox"/>
7. <a href="#">The appraiser must complete the Pay Affecting Progression Appraisal on ESR (See ESR MSS41 online training)</a>			Completed	<input type="checkbox"/>

<b>I am committing to this by signing :</b>	<b>Date:</b>
<b>My manager agrees by signing :</b>	<b>Date:</b>
<b>Date of Next Review:</b>	

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## Appendix 8 – Appraisee Guidance

### PERFORMANCE APPRAISAL DEVELOPMENT REVIEW GUIDANCE FOR APPRAISEES

To be used by **appraisees** for Core and Leadership PADR's

My Details / My Appraiser's Details	
My Name:	My Job Title:
Department:	County:
Review Period Start Date:	Review Period End Date
Appraiser Name::	Appraiser Job Title
Date:	My Pay Number:

#### Personal Objectives Review – to be completed by the appraisee during the discussion

a) What have been the successes for me this year?

*Have you achieved the objectives agreed at your last review? What has gone well since your last review? Be as specific as you can!*

*For example;*

- A learning or development opportunity that you have been able to apply to your role.*
- A specific job or issue that went really well and that you learnt from.*

- *Involvement in a project or activity outside your normal role that has developed you as a person, or provided skills that you can transfer to your role.*
- *Achievements which have been highlighted in your ongoing 1-2-1's? (see PADR appendix 5)*

b) What have been the challenges for me this year?

*Have you had difficulty achieving your agreed objectives from your last review? What have you learnt during the last 12 months about yourself, others and your work?*

*For example:*

- *Any new changes you are unsure about.*
- *Equipment or procedures you'd like to feel more confident with.*
- *Any difficult situations that you would like to have dealt with differently.*
- *Anything you have tried to achieve that was not as successful as you would have hoped.*

*Think about the reasons why you feel things could have been better and anything you could have done differently to overcome the issues.*

### **Objective Setting**

What are my **SERVICE** objectives for the next year?

*Are you aware of the Health Board's objectives and how you fit in?*

What are my **TEAM** objectives for the next year?

*Your manager will discuss the team objectives and how they relate to you and your role*

**What are my PERSONAL objectives for the next year? (Max 8 objectives). How do they relate to the Organisational Values?** (click here [Hywel Dda University Health Board | Values - Introduction](#) for further guidance)



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**Striving to  
Develop &  
deliver  
excellent  
services**



**Putting People at the  
heart of everything we  
do**

### **Core & Leadership PADR**

There are 2 core objectives for all staff:

- 1 Complete all mandatory training
- 2 Engage with & complete yearly PADR

In addition to your core objectives you should agree your personal objectives with your appraiser, ie:

- What are you required to do for your job for the next year? Your objectives should relate to the 3 Organisation Values and should be specific, measurable, achievable, realistic, timed (SMART) (Appendix 3)
- Think about your personal development objectives for the next year.
- How are you going to achieve them?
- When are you going to achieve them?
- How will you know when you have achieved them?
- How will you promote health & well-being within your team or the wider organisation? Click here [Health Promotion and Advice](#)

### **Leadership PADR only**

There are 5 core objectives for all staff managers;

1. Ensure your staff members complete mandatory training updates within the year.
2. Undertake regular 1-2-1's and complete PADR with your team (see PADR appendix 5).
3. Manage sickness absence in accordance with the [All Wales Managing Attendance at Work Policy](#)
4. Undertaken regular Team Brief with your team.
5. Have you actively promoted staff health & well-being

## Personal Development Plan

Identify under the headings below the learning & development needs required to fulfil/maintain your personal objectives

**Development to meet objectives** (click here for [Hywel Dda e-Prospectus](#)) identify category (Health Board Priority / CD1 / CD2)

**Before any additional development is undertaken you must have attained the minimum mandatory training**

*Is there any additional training/development that will enhance your knowledge and skills for your role for example; shadowing a colleague, mentorship, in house training courses*

*What can you do to take ownership of your own learning?*

## General Comments

*Any general comments regarding this review period*

What are my career aspirations for the next 12 months?

- *What are YOUR personal aspirations for the future?*
- *What is your real passion?*
- *Where do you want to be?*
- *What are your long term plans?*
- *How can the Health Board and others help you?*

## Pay Progression (To be completed by Appraiser)

### Step 1

Is this PADR a pay affecting progression appraisal? Yes  No  (if yes go to **Step 2** below) (See the [All Wales Pay Progression Policy](#))

### Step 2

Has the appraisee achieved their objectives for the previous year and met the standards of the pay progression policy, see below?

- |    |   |     |                          |    |                          |
|----|---|-----|--------------------------|----|--------------------------|
| 1  | Appraisee has achieved their objectives   | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> |
| 2. | The appraisal process has been completed within the last 12 months and outcomes are in line with the organisation's standards | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> |
| 3. | The appraisee has achieved 100% compliance for mandatory training   | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> |

- |  |                                    |                                   |
|--|------------------------------------|-----------------------------------|
| 4. <i>There is no formal capability process in place for the appraisee</i>   | Agree <input type="checkbox"/>     | Disagree <input type="checkbox"/> |
| 5. <i>There is no formal disciplinary sanction live on the appraisee's record</i>                                    | Agree <input type="checkbox"/>     | Disagree <input type="checkbox"/> |
| 6. <i>The appraiser must complete the Pay Affecting Progression Appraisal on ESR (See ESR MSS41 online training)</i> | Completed <input type="checkbox"/> |                                   |

**Summary (To be completed by Appraiser)**

Provide a summary of your overall assessment of the individual's performance during the review period, including any areas requiring improvement.

*To be completed by your manager*

<b>I am committing to this by signing :</b>	<b>Date:</b>
<b>My appraiser agrees by signing :</b>	<b>Date:</b>
<b>Date of Next Review:</b>	

## Appendix 9 – Appraiser Guidance

### PERFORMANCE APPRAISAL DEVELOPMENT REVIEW GUIDANCE FOR APPRAISERS

To be used by **appraisers** for Core and Leadership PADR's

My Details / My Appraiser's Details	
My Name:	My Job Title:
Department:	County:
Review Period Start Date:	Review Period End Date
Appraiser Name::	Appraiser Job Title
Date:	My Pay Number:

#### Personal Objectives Review – to be completed by the appraisee during the discussion

a) What have been the successes for me this year?

- *Has the staff member met their objectives agreed at the last review?*
- *Are there any specific incidences that have gone well for this team member?*
- *Have they been involved in projects or learning activities outside their normal role?*
- *Have you had positive feedback about this team member from a third party?*
- *Has this team member shown improvement in an area where they previously had difficulty?*

- *What achievements have been highlighted in the staff member's ongoing 1-2-1's? (see PADR appendix 5)*

b) What have been the challenges for me this year?

- *Is there anything specific that you are aware of that could be improved by your staff member?*
- *Are you aware of any situations where the team member could have handled things differently?*

### Objective Setting

What are my **SERVICE** objectives for the next year?

*Explain the Health Board's objectives and how the staff member fits in*

What are my **TEAM** objectives for the next year?

*Discuss the team objectives and how they relate to the staff member and their role*

**What are my PERSONAL objectives for the next year (Max 8 objectives)? Use SMART Guidance ([Appendix 3](#)). How do they relate to the Organisational Values? ([click here Values and Behaviours Framework Staff Information Booklet](#) for further guidance)**



**be**

**Working together to be the best we can**



**services**

**Striving to Develop & deliver excellent**



**we do**

**Putting People at the heart of everything**

### **Core & Leadership PADR**

There are 2 core objectives for all staff:

- 3 Complete all mandatory training
- 4 Engage with & complete yearly PADR

In addition to your core objectives you should agree your personal objectives with your appraiser, ie:

- What is the staff member required to do for the next year? Their objectives should relate to the 3 Organisation Values and should be specific, measurable, achievable, realistic, timed (SMART) ([Appendix 3](#))
- How will they promote Health & well-being within their team or the wider organisation? [click here Health Promotion and Advice](#)
- Think about their personal development objectives for the next year and how you can support them to meet their objectives.

### **Leadership/Management PADR only**

There are 5 core objectives for all managers with staff responsibility, plus up to 10 individual objectives;

There are 5 core objectives for all staff managers;

1. Ensure your staff members complete mandatory training updates within the year.
2. Undertake regular 1-2-1's and complete PADR with your team (see PADR appendix 5).
3. Manage sickness absence in accordance with the [All Wales Managing Attendance at Work Policy](#)
4. Undertaken regular Team Brief with your team.
5. Have you actively promoted staff health & well-being

<b>Personal Development Plan</b>
Identify under the headings below the learning & development needs required to fulfil/maintain your personal objectives
<b>Mandatory Training</b> (click here <a href="#">Mandatory Training Matrix</a> for further guidance)
Is all mandatory training up to date/attendance booked?
<b>Development to meet objectives</b> (click here for <a href="#">Hywel Dda e-Prospectus</a> ) identify category (Health Board Priority / CD1 / CD2)
<b>Before any additional development is undertaken the staff member must have attained the minimum mandatory training</b>
Is there any additional training/development that will enhance the staff member's knowledge and skills in their role. For example; shadowing a colleague, mentorship, in house training courses

<b>General Comments</b>
Staff member to complete
What are my career aspirations for the next 12 months?
Staff member to complete

<b>Summary (To be completed by Appraiser)</b>
Provide a summary of your overall assessment of the individual's performance during the review period, including any areas requiring improvement.
Summarise your overall assessment of the staff member's performance during this review period

<b>Pay Progression (To be completed by Appraiser)</b>
<b>Step 1</b> Is this PADR a pay affecting progression appraisal? Yes <input type="checkbox"/> No <input type="checkbox"/> (if yes go to <b>Step 2</b> below) (See the <a href="#">All Wales Pay Progression Policy</a> )
<b>Step 2</b> Has the appraisee achieved their objectives for the previous year and met the standards of the pay progression policy, see below?
1 Appraisee has achieved their objectives Yes <input type="checkbox"/> No <input type="checkbox"/>

2. <i>The appraisal process has been completed within the last 12 months and outcomes are in line with the organisation's standards</i>	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
3. <i>The appraisee has achieved 100% compliance for mandatory training</i>	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
4. <i>There is no formal capability process in place for the appraisee</i>	Agree	<input type="checkbox"/>	Disagree	<input type="checkbox"/>
5. <i>There is no formal disciplinary sanction live on the appraisee's record</i>	Agree	<input type="checkbox"/>	Disagree	<input type="checkbox"/>
6. <i>The appraiser must complete the Pay Affecting Progression Appraisal on ESR (See ESR MSS41 online training)</i>			Completed	<input type="checkbox"/>

<b>I am committing to this by signing :</b>	<b>Date:</b>
<b>My appraiser agrees by signing :</b>	<b>Date:</b>
<b>Date of Next Review:</b>	

Once the PADR is completed the date must be recorded on ESR  
(see PADR appendix 4)

## Appendix 10 – Checklist for Appraisees

### PERFORMANCE APPRAISAL DEVELOPMENT REVIEW (PADR) CHECKLIST FOR APPRAISEES

#### 1) Preparation

Has your appraiser approached you to arrange a time and place that is convenient for both of you?

Has your appraiser advised you if this review is a pay affecting progression review

Have you received an appraisal pack including;

- Blank PADR form to complete (you can choose whether you return this to your appraiser before the meeting or bring it with you).
- Guidance notes and checklist to help with preparation.
- A copy of last year's review.

To get the most from your conversation please take some time to prepare and think about your development objectives. If there is anything you are unsure of, please contact your appraiser

If applicable have you forwarded your professional portfolio to your appraiser (1 week before the review)

#### 2) The Conversation

It is your conversation about you – your past, present and future. To make the most of it, engage fully in the process

Be prepared to do most of the talking. Your appraiser should be predominantly asking you questions and listening

Be honest with each other, as this will help the learning. Acknowledge what has gone well and what you have learnt. Help each other to get the best from yourself at work

If this is a pay affecting progression review your appraiser will discuss this with you and confirm if you have reached the required standards to receive your pay step point

**Enjoy it – it's your dedicated time!**

#### 3) Recording

Make sure that one of you is recording the conversation so that you are both clear about what you need to do following your PADR and for the coming year.

Ensure that your line manager has recorded the review dates in ESR

If this is a pay affecting progression review your appraiser must ensure that the pay step submission process is completed on ESR.

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# Appendix 11 – Checklist for Appraisers

## PERFORMANCE APPRAISAL DEVELOPMENT REVIEW GUIDANCE FOR APPRAISEES

To be used by **appraisees** for Core and Leadership PADR's

My Details / My Appraiser's Details	
My Name:	My Job Title:
Department:	County:
Review Period Start Date:	Review Period End Date
Appraiser Name::	Appraiser Job Title
Date:	My Pay Number:

**Personal Objectives Review – to be completed by the appraisee during the discussion**

a) What have been the successes for me this year?

*Have you achieved the objectives agreed at your last review? What has gone well since your last review? Be as specific as you can!*

*For example;*

- A learning or development opportunity that you have been able to apply to your role.
- A specific job or issue that went really well and that you learnt from.

- *Involvement in a project or activity outside your normal role that has developed you as a person, or provided skills that you can transfer to your role.*
- *Achievements which have been highlighted in your ongoing 1-2-1's? (see PADR appendix 5)*

b) What have been the challenges for me this year?

*Have you had difficulty achieving your agreed objectives from your last review? What have you learnt during the last 12 months about yourself, others and your work?*

*For example:*

- *Any new changes you are unsure about.*
- *Equipment or procedures you'd like to feel more confident with.*
- *Any difficult situations that you would like to have dealt with differently.*
- *Anything you have tried to achieve that was not as successful as you would have hoped.*

*Think about the reasons why you feel things could have been better and anything you could have done differently to overcome the issues.*

### **Objective Setting**

What are my **SERVICE** objectives for the next year?

*Are you aware of the Health Board's objectives and how you fit in?*

What are my **TEAM** objectives for the next year?

*Your manager will discuss the team objectives and how they relate to you and your role*

**What are my PERSONAL objectives for the next year? (Max 8 objectives). How do they relate to the Organisational Values?** (click here [Hywel Dda University Health Board | Values - Introduction](#) for further guidance)



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**Striving to  
Develop &  
deliver  
excellent  
services**



**Putting People at the  
heart of everything we  
do**

### **Core & Leadership PADR**

There are 2 core objectives for all staff:

- 5 Complete all mandatory training
- 6 Engage with & complete yearly PADR

In addition to your core objectives you should agree your personal objectives with your appraiser, ie:

- What are you required to do for your job for the next year? Your objectives should relate to the 3 Organisation Values and should be specific, measurable, achievable, realistic, timed (SMART) (Appendix 3)
- Think about your personal development objectives for the next year.
- How are you going to achieve them?
- When are you going to achieve them?
- How will you know when you have achieved them?
- How will you promote health & well-being within your team or the wider organisation? Click here [Health Promotion and Advice](#)
- Has your manager explained the Turnaround Programme to you? Are you able to offer any ideas to save money and improve efficiency

### **Leadership PADR only**

There are 5 core objectives for all staff managers;

6. Ensure your staff members complete mandatory training updates within the year.
7. Undertake regular 1-2-1's and complete PADR with your team (see PADR appendix 5).
8. Manage sickness absence in accordance with the [All Wales Managing Attendance at Work Policy](#)
9. Undertaken regular Team Brief with your team.
10. Have you actively promoted staff health & well-being

## Personal Development Plan

Identify under the headings below the learning & development needs required to fulfil/maintain your personal objectives

**Development to meet objectives** (click here for [Hywel Dda e-Prospectus](#)) identify category (Health Board Priority / CD1 / CD2)

**Before any additional development is undertaken you must have attained the minimum mandatory training**

*Is there any additional training/development that will enhance your knowledge and skills for your role for example; shadowing a colleague, mentorship, in house training courses*

*What can you do to take ownership of your own learning?*

## General Comments

*Any general comments regarding this review period*

*What are my career aspirations for the next 12 months?*

- What are YOUR personal aspirations for the future?*
- What is your real passion?*
- Where do you want to be?*
- What are your long term plans?*
- How can the Health Board and others help you?*

## Pay Progression (To be completed by Appraiser)

### Step 1

*Is this PADR a pay affecting progression appraisal?* Yes  No  (if yes go to **Step 2** below) (See the [All Wales Pay Progression Policy](#))

### Step 2

*Has the appraisee achieved their objectives for the previous year and met the standards of the pay progression policy, see below?*

- |   |     |                          |    |                          |
|---|-----|--------------------------|----|--------------------------|
| <i>1 Appraisee has achieved their objectives</i>  | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> |
| <i>2. The appraisal process has been completed within the last 12 months and outcomes are in line with the organisation's standards</i> | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> |
| <i>3. The appraisee has achieved 100% compliance for mandatory training</i>   | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> |

- |  |                                    |                                   |
|--|------------------------------------|-----------------------------------|
| 4. <i>There is no formal capability process in place for the appraisee</i>   | Agree <input type="checkbox"/>     | Disagree <input type="checkbox"/> |
| 5. <i>There is no formal disciplinary sanction live on the appraisee's record</i>                                    | Agree <input type="checkbox"/>     | Disagree <input type="checkbox"/> |
| 6. <i>The appraiser must complete the Pay Affecting Progression Appraisal on ESR (See ESR MSS41 online training)</i> | Completed <input type="checkbox"/> |                                   |

**Summary (To be completed by Appraiser)**

Provide a summary of your overall assessment of the individual's performance during the review period, including any areas requiring improvement.

*To be completed by your manager*

<b>I am committing to this by signing :</b>	<b>Date:</b>
<b>My appraiser agrees by signing :</b>	<b>Date:</b>
<b>Date of Next Review:</b>	

## Appendix 12 – Benefits of Positive Performance Management

Regular performance discussions can provide the following benefits (which are in no particular order):

### **For Staff:**

- Provides clarity and understanding of how each individual contributes to the vision and direction of their service and the Health Board;
- Improves communication and working relationships between leaders and colleagues. Leaders can facilitate and empower rather than control and restrict their team. Showing appreciation, respect, compassion and a commitment to develop and value individual's skills;
- Increase job satisfaction by clarifying roles, objectives and acknowledging achievements;
- Offers opportunity for learning and development for career advancement and pay progression.

### **For our Patients and Stakeholders:**

- Provides a system which allows us to continually improve our standards of care and patient outcomes;
- Provides a positive environment and service which meets patient needs;
- Makes the Health Board and workforce accountable for the services that we provide;
- Provides a basis for effective communication.

### **For the Organisation:**

- Identifies Health Board priorities and ensures everyone is working together and focusing on achieving them;
- Provides an understanding of the development needs of staff;
- Ensures work is achieved on time to agreed standards and with the resources and skills needed;
- Provides evidence of continuous improvement;
- Improves decision making;
- Encourages behavior which is consistent with the organisation's Values and Behaviors Framework;
- Provides a competent and highly motivated workforce;
- Improves productivity;
- Can support a reduction in mortality rates – Appraisal (PADR) has the strongest link with overall patient mortality – An organisation that trains 20% more appraisers who appraises approx. 20% more staff is likely to have 1.090 fewer deaths per 100,000 admissions;

Source: *Effective Human Resource Management & Lower Patient Mortality*, Carol Borrill & Michael West, Aston University (2015)

*Conclusions drawn based on analysis of two specific areas of mortality: deaths after admissions for hip fracture, and deaths within 30 days of emergency surgery*

## 15. Equality Impact Assessment



### SUMMARY EQUALITY IMPACT ASSESSMENT

<b>Organisation:</b>	Hywel Dda University Health Board
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<b>Proposal Sponsored by:</b>	<b>Name:</b>	Jackie Wright
	<b>Title:</b>	Culture and Workforce Experience Manager
	<b>Department:</b>	Workforce & OD

<b>Policy Title:</b>	<b>1103 - Performance Management Policy</b>
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<b>Brief Aims and Objectives of Policy:</b>	<p>An effective performance management system is key in supporting the delivery of the Health Board's strategic vision, purpose and objectives. All staff must be clear of what is expected of them in their roles and how this contributes to the success of their teams and the organisation. Effective performance management is centred on agreeing clear objectives, discussing behavioural expectations and having regular feedback to review progress and agree any development or resources required.</p> <p>The individual and the organisation will benefit from having clear guidance and support to enable a capable and highly motivated workforce clear on their role and expected behaviours as set out in the <a href="#">HDdUHB Values and Behaviour Framework (opens in new tab)</a>.</p> <p>The organisation and the individual staff member benefits from the support and guidance given during regular meaningful feedback conversations which will enable them to embed an organisational value and be the best they can be. This results in an effective, efficient and highly motivated skilled workforce.</p>
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<b>Was the decision reached to proceed to full Equality Impact Assessment?:</b>	<b>Yes</b>	<b>No</b>
<b>If no, are there any issues to be addressed?</b>	<b>Yes</b>	<b>No</b>
	<p>Managers will ensure that PADR's are undertaken with individuals in an environment which is suitable for their individual needs eg: quiet areas for people with sensory loss, hearing loss, learning disabilities etc. Any reasonable adjustments will be made throughout the PADR process for staff who require it.</p>	

<b>Is the Policy Lawful?</b>	<b>Yes</b>	<b>No</b>
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<b>Will the Policy be adopted?</b>	<b>Yes</b>	<b>No</b>
	<b>If no, please record the reason and any further action required:</b>	

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<b>Are monitoring arrangements in place?</b>	<b>Yes</b>	<b>No</b>
	PADR compliance will be monitored via data analysis on a quarterly basis and bespoke training will be undertaken with services where support is needed.	

<b>Who is the Lead Officer?</b>	<b>Name:</b>	Lisa Gostling
	<b>Title:</b>	Director of Workforce & OD
	<b>Department:</b>	Workforce
<b>Review Date of Policy:</b>	3 years	

Signature of all parties:	Name	Title	Signature
	Lisa Gostling	Director of Workforce & OD	
	Jackie Wright	Culture and Workforce Experience Manager	Jackie Wright 6/10/2022

**Please Note: An Action Plan should be attached to this Outcome Report prior to signature  
N/A at this stage**