North of England Clinical Commissioning Groups

HUMAN RESOURCES POLICY

APPRAISAL POLICY

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Document History

Version	Date	Significant Changes
1.0	April 2013	n/a
2.0	May 2015	n/a
3.0	March 2017	n/a
4.0	May 2019	Amendments following AfC Pay Reform

Equality Impact Assessment

Date	Issues
28 March 2013	None
11 September 2019	Policy to be available in alternative formats.

Policy Validity Statement

This policy is due for review on the latest date shown above. After this date, policy and process documents may become invalid. Policy users should ensure they are consulting the currently valid version of the documentation.

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POLICY STATEMENT

1.1   The CCG is committed to organisational improvement through CCG, team and personal development. This means that all employees need to continually develop their skills and expertise so that they are able to carry out their role efficiently and effectively and fully contribute to the success of the CCG.

1.2   This Appraisal Policy sets out the CCGs approach to performance review and to talent management. It is designed to give an overall statement of intent which is supported by more detailed guides for employees and managers that explain the relevant processes in full.

1.3   Actively managing performance and talent not only enables the CCG to achieve its mission of supporting, supplying and protecting the NHS, it also makes sure that each and every employee has a clear understanding of:

- What is expected of them

- How they are performing

- How this contributes to CCG performance and strategy

- What their short term development needs are

- What they need to do to develop their career in the longer term

1.4   The CCG understands the need to provide a clear and consistent framework within which employees and managers can talk about performance, and review and plan development. The appraisal process enables this, and ensures that reliable information on performance, potential, aspiration and skills sets to enable this.

2.   PRINCIPLES

2.1   The CCG recognises the contribution that values and competences make towards overall performance and these are included in the measurement of individual performance.

2.2   To be effective it is essential that the appraisal process is interactive and jointly owned by each employee and their line manager. Line managers and employees will meet in 1:1s on a regular basis to discuss performance and development. The appraisal process is ongoing and therefore less effective when addressed infrequently.

2.3   Appraisal provides a structure for the ongoing assessment of performance against agreed task and development based objectives and expected competency and behaviour.

2.4   Appraisal supports the identification of effective and meaningful learning experiences and opportunities to enable employees to develop their skills and fulfil more of their potential to deliver more effectively in their current and future

roles. The process will result in a robust Personal Development Plan (PDP) which can be monitored throughout the year.

2.5   Clear expectations will be set in terms of objectives to be achieved together with necessary competencies and behaviours for the coming review period and how these align with CCGs strategy and plans.

2.6   Appraisal will identify and record how an individual has performed against expectation for the previous review period.

2.7   The appraisal review period is 12 months, beginning 1st April and ending 31st March to coincide with the publication of business plans. Managers will hold two Appraisal Meetings with their staff throughout this period. These will occur at the beginning of and approximately half way through a review period.

2.8   People Development Meetings, consisting of management teams and lead by the senior manager, will be held after Appraisal Meetings to consider the development plans and opportunities for employees in light of current and future capability and needs.

2.9   When an individual changes manager within the CCG during a review period there will be a handover process in which the previous manager will begin an interim Appraisal Meeting by rating the individual's performance to date, and their new manager will complete this by setting expectations for the remainder of the review period. This will ensure continuity in the reviewee's personal development and that outstanding responsibilities in the original role are transferred to others so that business objectives continue to be achieved.

2.10   Appraisal is linked to the CCG's business strategy and plans, and the competencies and values to ensure that skills and behaviours are developed to meet business needs.

2.11   The CCG will ensure that all managers are suitably skilled and competent in appraisal.

3.   EQUALITY

3.1   In applying this policy, the CCG will have due regard for the need to eliminate unlawful discrimination, promote equality of opportunity, and provide for good relations between people of diverse groups, in particular on the grounds of the following characteristics protected by the Equality Act (2010); age, disability, gender, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion or belief, and sexual orientation, in addition to offending background, trade union membership, or any other personal characteristic.

4.   MONITORING & REVIEW

4.1   This policy and procedure will be reviewed periodically by Human Resources in conjunction with operational managers and Trade Union representatives. Where review is necessary due to legislative change, this will happen immediately.

5.   PROCEDURE

This procedure must be read in conjunction with any local procedures

5.1   Individuals will be introduced to the appraisal process at the start of their time in role and initial performance and development expectations will be set.

5.2   All managers will have regular 1:1 meetings with their staff to discuss performance and development. These meetings should take place at least monthly and in some cases, at the discretion of the manager and individual, may occur more frequently.

5.3   1:1 meetings should provide both the manager and individual with the opportunity to discuss any aspects of performance, competence, behaviour and development that may be appropriate in the context of the individual's role and their current objectives.

5.4   Appraisal Meetings are held between April and May. At these meetings performance during the previous period will be recorded and expectations for the forthcoming year set.

5.5   Reviews will be cascaded through the business to ensure there is a continuous line of sight between the CCG strategy, local business plans and individual objectives.

5.6   Completed documentation from Appraisal Meetings will be reviewed and signed off by the reviewer's line manager (as well as the reviewee and the reviewer) to ensure consistency in performance bandings awarded and expectations set.

5.7   Management teams will participate in People Development Meetings after Appraisal Meetings to consider and refine the development plans and opportunities for employees in light of current and future capability and needs.

5.8   Interim Appraisal Meetings will be held half way through the review period during October and November. At interim meetings performance against objectives to date is rated and consideration is given to any necessary changes to expectations for the remainder of the review period.

Incremental Pay Progression

5.9   For staff appointed or promoted under NHS Terms and Conditions of Service, on or after 1 April 2019 the completion of an appraisal in the preceding 12 months will be required as one of the criterion required to achieve pay progression.

5.10   Where staff have line management responsibility, the completion of an appraisal for each of their staff in the preceding 12 months will be required as a further criterion when considering pay progression.

5.11   After 1 April 2021, all staff engaged on NHS Terms and Conditions of Service will be subject to the pay progression framework and its respective requirements.

5.12   Appraisals will be carried out as part of an ongoing schedule, in line with the CCGs appraisal schedule.

5.13   Incremental pay increases will be considered at a pay step review meeting. Completion of appraisals in the preceding 12 months will be reviewed at this meeting.

5.14   Completion of your appraisal and your staff (where applicable) does not guarantee incremental pay progression. For full details see HR37 Incremental Pay Progression Framework Policy.

Flexibility

5.15   The CCG recognises that due to the number and diversity of its employee groups, appraisal needs to be flexible. To support this, a 1:1 meeting to review performance or a more formal interim Appraisal Meeting can be requested by either party at any time.

Appraisal Meetings

5.16   All Managers must ensure that priority is given to the Appraisal Meetings and that scheduled appointments are issued and only re-arranged where the needs of the business are paramount.

5.17   Appraisal Meetings are most effective when well prepared for. Guidance has been provided to support the preparation of reviewers and reviewees. Management teams will also meet prior to Appraisal Meetings to ensure a consistent and transparent approach to these meetings.

5.18   Managers must allocate a quiet place with no interruptions and sufficient time to each meeting to ensure that an effective conversation is able to take place and that an accurate and reflective record of this is made.

5.19   The conversation will include:

- Review of performance against objectives and standards

- Review of behaviour in relation to the CCGs competencies and values

- An overall performance banding combining performance against objectives, competencies and values

- Discussion of personal aspirations and career development

- Agreement of personal objectives and performance standards over the coming year and how these are aligned with the CCG strategy and local business plans

- Review of personal development during the last year

- Development of a PDP for the coming year

Performance Bandings

5.20   The allocation of a performance banding should clearly reflect the performance of the individual during the entire review period and must be a combination of all three aspects of performance – objectives, competencies and Values.

5.21   There are four performance bands:

Exceptional performer
- All expectations in terms of objectives, competencies and values have been met and some will have been exceeded.

- The reviewee will have demonstrated a consistent positive, flexible and proactive approach to their work.

- The reviewee takes responsibility for their own performance and development.

Sound performer
- Consistently meets most expectations and some may have been exceeded.

- Where expectations have not been met this has been marginal. Reasons have been identified and addressed.

- The reviewee demonstrates a positive and flexible approach to their work and their development.

Developing performer
- Some expectations will have been met or exceeded.

- Some expectations will not have been met and improvement is needed. Reviewee recognises and understands the reasons for this and is developing. (This may reflect an individual getting to grips with a new role.)

- The reviewee demonstrates a positive approach to their work and development.

Under performer
- Consistently fails to meet some expectations. Immediate improvement is required.

- A formal development plan will have been agreed with the reviewee to achieve a minimum standard of performance to enable the reviewee to achieve in their role.

5.22 People Development Meetings will be held within all management teams which will:

- Explore performance bandings, ensuring consistency across the team

- Consider development plans for employees in light of current capability needs within and outside of the team, and the capabilities the CCG needs to develop for the future. This will include identifying secondments, changes to responsibilities and personal development activities where appropriate.

- Review action plans for underperforming employees to ensure they have appropriate help back to performance including the use of HR policies.

The role of the reviewer's manager

5.23 The reviewer's manager has two key roles in the appraisal process.

- They ensure a consistent approach is taken in the setting of objectives and expectations, how performance is measured and how development is supported. This is done by facilitating the team preparation meeting before reviews are carried out and by subsequently signing off completed reviews and participating in People Development Meetings.

- The reviewer's manager also monitors progress with reviews during review periods to ensure these are being completed in a timely fashion so that the cascade of reviews is not interrupted.

5.24 The reviewer's manager will:

- Facilitate Team Preparation Meetings for their direct reports. This includes ensuring the consistency of objectives set and their alignment with CCGs strategy and business plans and a consistent approach to the allocation of performance bandings.

- Monitor the progress and completion of Appraisal Meetings for their direct reports.

- Sign-off completed Appraisal Meeting forms.

6. QUALITY AND MONITORING

6.1 Quality is monitored to ensure the quality and consistency of appraisal meetings and that meetings are taking place across the CCG.

6.2 The reviewer's manager is responsible for facilitating Team Preparation meetings before Appraisal Meetings are carried out. Team Preparation meetings will explore common objectives within business areas and agree what levels of performance look like to enable consistency during Appraisal Meetings.

6.3 All individual Appraisal Meeting forms will be reviewed by the Reviewer's

Manager following the meeting for sign off. This enables the reviewer's manager to ensure the consistency of the objectives set and their alignment with the CCG strategy and plans, and the performance bandings allocated. It also enables them to understand the performance and talent within their team, and to support their team in ensuring adequate focus is given to managing each individual in their team appropriately.

6.4 Where the outcomes of an Appraisal Meeting do not appear to be of sufficient quality or consistency, the reviewer's manager will explore this with the reviewer and the reviewee to understand the reasons behind this and ensure a consistent approach in the future. Meeting outcomes should be adjusted as necessary before paperwork is signed off by the relevant committee.

6.6 The outputs from individual performance and talent reviews will be collated by the relevant committee to extract data on talent, learning and development needs and completion rates. Where appraisal Meetings are not being completed within agreed timescales, the reviewer's manager will explore and address reasons for this.

7. PLANNING DEVELOPMENT INCLUDING PDPs

7.1 The reviewer and the reviewee share responsibility for identifying learning needs and taking advantage of learning and development opportunities. An individual PDP will be kept up to date and referred to during Appraisal Meetings.

7.2 Individual PDPs will encompass learning needs relating to:

- Development of the core capabilities the CCG needs to develop

- Recovery of performance objectives / standards missed in the last performance year including technical training

- Development of ability to act congruently with the CCGs values

- Demonstrating the CCGs competencies

- Learning to support the achievement of performance objectives and standards for the coming year

7.3 Learning is most effective in causing an improvement in performance and personal change when it is conducted according to the following ratio:

- 70% of development is on the job

- 20% of development comes through learning from others

- 10% of development comes from formal learning opportunities

8. APPEALS PROCESS

8.1 Each reviewer and reviewee must agree the content of and sign the Appraisal Meeting form. Where no agreement can be reached a review with a more senior manager should be sought (this can be requested by either party). Where it is still not possible for any agreement to be reached the CCGs Grievance Procedure should be followed.

Equality Impact Assessment

What impact will the new policy/system/process have on the following:
Age - Consider and detail age related evidence. This can include safeguarding, consent and welfare issues Appropriate methods of communication of the Policy have also been carefully considered to ensure they reach all ages of the workforce. Email and the internet can be accessed by all users in the workplace.
Disability - Consider and detail disability related evidence. This can include attitudinal, physical and social barriers as well as mental health/ learning disabilities The disability status of the workforce across the region is largely unknown therefore relevant tools could be made available to staff that potentially do have a disability that the organisations are unaware of. The policy should be able to be communicated in alternative methods as required for those with a disability and/or visual impairment such as braille, large font, interpreters etc.
Gender reassignment (including transgender) - Consider and detail evidence on transgenderpeople. This can include issues such as privacy of data and harassment. The policy does not include content or vocabulary that could cause offense or discriminate against any staff members who have undergone or are undergoing gender reassignment or that identify as transgender.
Marriage and civil partnership - Consider and detail evidence on marriage and civil partnership. This can include working arrangements, part-time working, and caring responsibilities. The content of this policy does not include content or vocabulary that discriminates against staff that may be married or in a civil partnership.
Pregnancy and Maternity - Consider and detail evidence on pregnancy and maternity. This can include working arrangements, part-time working, and caring responsibilities. The policy does not discriminate against staff that are currently pregnant or on maternity leave and can be accessed while on maternity leave or any other leave of absence via the organisation's website.
Race - Consider and detail race related evidence. This can include information on difference ethnic groups, Roma gypsies, Irish travellers, nationalities, cultures, and language barriers. The policy does not include vocabulary or content that discriminates against staff on the grounds of race.
Religion or belief - Religion is defined as a particular system of faith and worship but belief includes religious and philosophical beliefs including lack of belief (e.g. Atheism). Generally, a belief should affect your life choices or the way you live for it to be included in the definition. The policy does not discriminate against staff that hold any particular religion or belief.

Sex/Gender - Consider and detail evidence on men and women. This could include access to services and employment.

The Policy does not discriminate between staff that are men or women.

Sexual orientation - Consider and detail evidence on heterosexual people as well as lesbian, gay and bisexual people. This could include access to services and employment, attitudinal and social barriers.

The content of this policy and vocabulary used does not discriminate against staff based on their sexual orientation.

Carers - Consider and detail evidence on part-time working, shift-patterns, and general caring responsibilities.

The content of this policy and vocabulary used does not discriminate against staff who have carer responsibilities.

Other Identified Groups and Health Inequalities - Consider and detail evidence on groups experiencing disadvantage and barriers to access and outcomes. This can include different socio-economic groups, geographical area inequality, income, resident status (migrants, asylum seekers). What is the potential impact of your work on health inequalities?

Other groups have been considered however as the policy is for staff there are no additional impacts on health inequalities.

Action Plan

Ref no.	Potential Challenge/ Negative Impact	Protected Group Impacted (Age, Race etc)	Action(s) required	Expected Outcome	Owner	Timescale/ Completio n date
1	Staff unable to access policy due to particular characteristic	Age, disability	Have a process in place for alternative formats provided if required. As part of reasonable adjustments on appointment or during employment any policy should be adapted by the CCG	All staff can access and use the policy. NECS HR or Equality Team can be contacted for any requests.	Jenna McGui nness , HR Mana ger	On receipt of individual request