Summary

Line manager:
- establishes a time-table for all appraisals
- identifies the name of an appraiser for each staff member

Appraiser:
- agrees date, time and location of appraisal with appraisee (at least three weeks before the meeting to allow preparation time, ensuring appraisees have access to documentation and understand how to prepare for their appraisal).

Stage One – Scheduling
See Section 6.1

General
- All appraisers should have attended the Trust’s appraisal training course and be familiar with the appraisal documentation.
- All appraisals should be completed before a staff member’s incremental date.
- Incremental dates can be obtained from the ESR Self-Service function found by accessing Business Intelligence Report/Staff in Post dashboard/incremental date column.
- Appraisers should bring any performance concerns to the staff member’s attention as soon as they arise (not wait until their appraisal) so that supportive corrective action can be taken and staff given early notification of the shortcomings that are likely to prevent their incremental pay progression.

Stage Two – preparation
See Section 6.2

Once a date has been set:
- both appraisee and appraiser prepare for the meeting.

Stage Three – discussion
See Section 6.3

Hold appraisal discussion:
- a two-way dialogue reflecting on last review period
- appraisee shares career and development aspirations
- appraiser provides constructive feedback
- appraiser and appraisee discuss and negotiate mutually agree objectives for the coming 12 months.
- identify any shortcomings/gaps in knowledge that are likely to prevent them getting their increment with any remedial action and timescale

Stage Four – setting objectives and PDP
See Section 6.4

Jointly set objectives ensuring:
- they are SMART (specific, measurable, achievable, relevant and time-specific)
- maximum of five
- they are based on the Trust’s and department’s objectives and personal needs of the individual.

Jointly develop a Personal Development Plan referring to:
- the *Study Leave Policy for RCHT Staff (non-medical)*
- learning and development opportunities document (see Appendix 3).

Stage Five – reporting completion
See Section 6.5

Line manager in conjunction with appraiser:
- records completed appraisals on ESR within two working days of discussion taking place
- completes pay progression record (see Appendix 4)
- ensures copies of appraisal documents and pay progression record are placed on individual’s personal file.

Where a staff member fails to achieve the required criteria for pay progression, appraiser:
- ensures a CAF is submitted to the Payroll Department as soon as possible and in time to with-hold payment of an increment from the incremental date.
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1. Introduction

Please note that Microsoft Word copies of the forms referred to in this policy are available from the Appraisal and Pay Progression Policy: Supporting Documents, a copy of which is available from the Human Resources section of the Trust's document library.

1.1. The delivery of high-quality patient care within the Royal Cornwall Hospitals Trust (RCHT) critically depends on every member of staff (clinical and non-clinical):

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

1.2. Appraisals are a pivotal process within the Royal Cornwall Hospitals Trust (RCHT). They provide an opportunity for individuals to ‘step off’ from their busy jobs to formally reflect on their role and identify any gaps in their knowledge and skills. It is also an opportunity to look at developmental activities to close that gap and enable the individual to grow in both competence and confidence.

1.3. It is an opportunity for the appraiser to formally assess the individual’s performance – against the standards and competencies of their job role – although there is an expectation that this is an on-going process throughout the year; the appraiser is also able to formally acknowledge the achievements of an individual and the part they play in their role and their team. There should be no surprises.

1.4. The appraisal outcomes should act as a “road map” – setting the direction for an individual and providing a personal and professional development focus for the coming 12 months.

1.5. This process also aims to provide individuals with a greater understanding of the link between their personal objectives and those of their team and the organisation as a whole.

1.6. The changes to the NHS National Terms and Conditions of Service Handbook (specifically Annex 23, formerly Annex W) implemented in 2013, identify that an individual’s pay progression is dependent upon their ability to demonstrate that they have achieved and/or maintained the required level of knowledge, skills and performance within their role.

1.7. Incremental pay progression is therefore linked to the appraisal process.

1.8. This version supersedes any previous versions of this document.

2. Purpose of this Policy/Procedure

This policy aims to:
- set out the approach to the annual appraisal and development process
- provide consistency across the Trust ensuring that all staff members benefit from regular appraisal and development
- outline when and how appraisals should take place, taking into consideration what constitutes an effective appraisal and personal development planning
- confirm the Trust’s approach to the annual appraisal process and its formal links to pay progression
- ensures that staff members who are able to demonstrate that they have achieved the required levels of performance, and have consistently maintained these, receive incremental pay progression.

3. Scope
This policy applies to all staff employed by the Trust with the exception of medical and dental staff who should refer to the Medical Appraisal and Revalidation Policy, a copy of which can be found in the Medical Staffing section of the HR folder on the Trust’s document library.

4. Definitions / Glossary

**Appraisal** – the meeting, attended by a designated supervisor and staff member, at which the staff member’s overall performance during the past year is discussed jointly. The objectives agreed at the previous appraisal are reviewed and new objectives for the coming year are developed and agreed.

**Appraiser** – the person responsible for facilitating the staff member’s appraisal – this is usually their line manager but may be delegated to a staff member who holds a supervisory role.

**Appraisee** – the staff member receiving and taking part in the appraisal.

**ESR (Electronic Staff Record)** - an integrated HR and Payroll system for NHS organisations which has a range of functions and enables employers to record information about employees including, for example, appraisal renewal and completion dates.

**Incremental pay point** – incremental pay progression for all pay points within each of the nine NHS pay bands (1-9) will be conditional upon individuals demonstrating that they have the requisite knowledge and skills/competencies for their role and that they have demonstrated the required level of performance in accordance with the Trust values and associated behaviours framework (see Appendix 6) and delivery during the review period. Please see Section 6.6.11 for additional criteria applicable to staff on pay bands 8C, 8D and 9.

**Incremental date** – the date on which incremental progression will take place, normally on an annual basis, provided the appropriate level of performance and delivery has been achieved during a review period.
Objectives – specific and realistic written tasks agreed jointly by the supervisor and staff member which the staff member is expected to achieve within an established timescale. These should be measurable and have defined outcomes.

Personal development plan (PDP) – a written plan for an individual staff member that outlines the development activities which will support the achievement of their objectives and improve their level of performance.

Review period – the time period during which the staff member undertakes their objectives and completes their PDP. This is usually a one-year period. However, mid-year reviews are good practice.

Revalidation (nurses and midwives) – the process by which nurses and midwives demonstrate to the Nursing and Midwifery Council (NMC) that they continue to remain fit to practice in line with the requirements of their professional registration.

SMART objectives – specific and realistic written tasks agreed jointly by the supervisor and staff member which the staff member is expected to achieve within an established timescale. These should be measurable and have defined outcomes:

- **Specific:** clear and unambiguous as to what the staff member must achieve
- **Measurable:** must identify how the objectives can be measured
- **Agreed:** agreement to follow the objectives and Achievable but Flexible so that they can be adjusted in light of changes
- **Relevant:** relevant to the job and shortfall in performance
- **Time specific:** have a time limit for review.

Trust values and behaviours framework - a set of values and associated behaviours’ framework (developed by staff) which aims to provide clarity to all staff regarding mutual expectation in respect of behaviours, and the importance of routinely applying these to create a positive, open and honest working environment.

5. Ownership and Responsibilities

5.1. Role of Chief Executive

The Chief Executive holds overall responsibility for this policy and for ensuring the existence of a culture where staff are encouraged to deliver a high quality performance and develop to their full potential.

5.2. Role of Director of Human Resources and Organisational Development

The Director of Human Resources (HR) and Organisational Development (OD) is responsible for developing strategies to support a fair and consistent culture in which
excellent performance is encouraged and personal developments supported. They are responsible for the integration of the process into the business planning processes and ensuring the policy is up to date and in line with legislation and good people management practices.

5.3. Role of Trust Executive Directors, Associate Directors and Heads of Service

Executive Directors, Associate Directors and Heads of Service are responsible for ensuring:

- appraisals are recognised and prioritised as a critical activity within the Trust’s day to day business

- high quality, consistent annual appraisals are undertaken by all appraisers and that personal development is supported and delivered

- line managers and /or appraisers are aware of their responsibilities and are suitably trained to undertake appraisals

- the implementation, where applicable, of the additional criteria applicable to individuals on pay points 8c, 8d and 9 (non-recurring pay progression beyond the first four pay points - see Section 6.6.11)

- compliance with annual appraisal is maintained at or above the Trust’s target

- action is taken when compliance falls below the Trust’s targets.

5.4. Role of line managers

Line managers are responsible for:

- ensuring staff have appropriate management support and regular feedback to enable them to perform to the expected standards. Ensuring any learning and/or developmental issues are identified and addressed

- proactively bringing any concerns about a staff member’s performance to their attention as soon as the issue becomes apparent, trying to establish reasons for it and ensuring supportive corrective action taken as appropriate. Ensuring staff are made aware of the possible impact of poor performance on their pay progression

- ensuring all staff they line manage have an annual appraisal. Failure to do so could result in the line manager not receiving their annual pay progression if the reason for this is due to their poor performance

- ensuring that they are competent to facilitate an appraisal through completion of appropriate training

- understanding both the Trust’s and their department’s objectives/priorities and applying these into an individual’s objectives for the next 12 months

- facilitating the completion of mandatory training and other educational activities that are identified in the staff member’s PDP (see also Study Leave Policy for
facilitating a fair and honest discussion of the staff member’s performance taking into account the staff member’s own views. This includes an objective assessment of the staff member’s achievements and performance over the last review period

- ensuring that an appraisal takes place before a staff member’s incremental date. For nurses and midwives this should also take account of their revalidation date (see ‘Definitions’ Section 4)

- if appropriate, submitting appropriate documentation to Payroll with regards to non-incremental pay progression as soon as possible but at the latest before the 4th day of the month in which the date of the incremental progression is due

- updating ESR within two working days after an appraisal has taken place.

5.5. Role of Appraiser if not the line manager

Appraisers are responsible for:

- ensuring that they are competent to facilitate an appraisal through completion of appropriate training

- understanding both the Trust’s and their department’s objectives/priorities and applying these into an individual’s objectives for the next 12 months

- facilitating the completion of mandatory training and other educational activities that are identified in the staff member’s PDP (see also Study Leave Policy for RCHT Staff (non-medical), a copy of which is available from the HR folder on the Trust’s document library)

- facilitating a fair and honest discussion of the staff member’s performance taking into account the staff member’s own views. This includes an objective assessment of the staff member’s achievements and performance over the last review period

- ensuring that an appraisal takes place at least three months before a staff member’s incremental date. For nurses and midwives this should also take account of their revalidation date (see ‘Definitions’ Section 4)

- if appropriate submitting appropriate documentation to Payroll with regards to non-incremental pay progression as soon as possible but at the latest before the 4th day of the month in which the date of the incremental progression is due

- updating ESR within two working days after an appraisal has taken place.

5.6. Role of individual staff

All staff members are responsible for:

- participating in an annual appraisal
ensuring they are compliant with mandatory and where applicable, all professional training requirements for their role

undertaking a self-assessment and reflecting on any aspects of their job role that may require further development

providing feedback from their self-assessment and discussing the identified “gaps” in skills and knowledge during the appraisal, identifying possible learning and development to close the gaps

jointly setting SMART objectives for the coming 12 months

contacting their manager at least one month before their appraisal is due if an appraisal date has not already been scheduled, so that a date can be arranged

maintaining evidence of any learning and development that they have completed during the review period.

5.7. Role of Learning and Development Team

The Learning and Development Team is responsible for:

- supporting managers and staff to identify appropriate development activities for both individuals and teams
- the provision of mandatory training
- the provision of training and support for appraisers.

5.8. Role of Human Resources

The Human Resources Department is responsible for:

- advising managers on the application of the policy
- ensuring the policy is updated and monitored, in partnership with Staff Side, in line with the changes to employment legislation, national terms and conditions and best practice.

6. Standards and Practice

It is essential that any performance issues of concern are identified and addressed at the time they arise and supportive corrective action is taken as appropriate and staff given early notification of the shortcomings that are likely to prevent their incremental pay progression.

This section outlines the five key stages in the appraisal process.

6.1. Stage one – scheduling a staff appraisal

6.1.1. Prior to the start of each financial year each department should have a clear timetable for all appraisals and have identified the name of each appraiser for each staff member.
6.1.2. Incremental dates can be obtained from the ESR Self-Service function found by accessing Business Intelligence Report/Staff in Post dashboard/incremental date column.

6.1.3. All appraisals should be completed before a staff member’s incremental date. This ensures that staff members have every opportunity to achieve pay progression and where appropriate there is sufficient time to complete documentation required by the Payroll Department.

6.1.4. At this stage, appraisers should:

- ensure they have attended the Trust’s appraisal training course and are familiar with the appraisal documentation
- agree the date, time and location of the appraisal with the appraisee. This should be at least three weeks before the meeting to allow both the appraisee/appraiser time to prepare
- ensure that appraisees have access to the appraisal documentation and understand how to prepare for their appraisal.

6.2. Stage two – preparation

6.2.1. Once a date has been set for the appraisal meeting, both appraiser and appraisee need to prepare. This stage is important and appraisers should encourage and guide appraisees regarding how best to reflect on their role, progress and achievement of objectives.

6.2.2. The appraiser should consider:

- how well the staff member has performed since their last appraisal
- to what extent the staff member has achieved their objectives and any evidence to support this
- to what extent the staff member has completed their personal development plan, their mandatory training requirements and any other professional training requirements for their role
- what feedback should be given at the appraisal and the evidence that will be used to support it
- the factors that have affected the staff member’s performance (including those both within and outside the staff member’s control). Extenuating circumstances could include eg organisational change, changed priorities, resourcing vacancies within the team, service contract issues
- what actions can be taken by both the line manager (and/or supervisor) and the staff member to develop and improve performance
- what possible directions the staff member’s career could take and what reasonable support can be provided to assist this
what objectives might be agreed for the next review period

what personal development might be agreed for the next review period. This should support the achievement of individual, departmental and Trust objectives and be linked to career aspirations

consider how well the staff member reflects the Trust values in their role.

6.2.3. The appraisee should consider:

what are their main responsibilities and are these reflected in their job description

what they have achieved since their last appraisal and be able to give examples

what they consider to be their strengths (eg key skills and abilities)

what parts of the job they have found challenging and why

what additional support would help them in their role

what continuing professional development they have undertaken in the last year and the impact it has had on their role

whether they have achieved their objectives

how they would like to see their role developing

what plans they have for professional development

what are their career aspirations

have they completed all their mandatory training and any other professional training requirements for their role

what objectives they have for the next review period.

6.2.4. **Wider feedback methods**
In some instances, it may also be helpful to seek structured feedback through a 360-degree feedback process to gain a broader view of an individual’s strengths/needs. Further information can be obtained from the Learning and Development Department.

6.3. **Stage three – the appraisal discussion**

6.3.1. The appraisal meeting is essentially a “structured conversation” which is facilitated by the appraiser – it should be a two-way dialogue. The appraiser should enable the appraisee to feedback their reflections on the last review period and discuss these in more detail. It should also be an opportunity for the individual to share their aspirations and further development.
6.3.2. The appraiser then has the opportunity to provide constructive feedback on how they view the individual’s performance (strengths and needs) and this should lead to a discussion and negotiation on mutually agreed objectives for the coming 12 months. New issues with an individual’s performance must not be raised for the first time at an appraisal. These should be managed through effective line management initially and can then be reviewed as part of the appraisal process.

6.4. **Stage four – setting objectives and writing a personal development plan**

6.4.1. Objectives should be set jointly using the SMART (see Section 4 ‘Definitions’) approach. It is suggested that a maximum of five objectives are planned and these should be based on Trust and departmental objectives as well as personal learning needs and career aspirations.

6.4.2. A personal development plan should also be agreed jointly. This should also reflect the Trust and departmental development plans as well as individual career aspirations. It is important to refer to the Study Leave Policy for RCHT Staff (non-medical), a copy of which is available from the HR folder on the Trust’s document library, in consideration of study leave allocation and the learning and development opportunities and options information provided in Appendix 3.

6.4.3. Each meeting and discussion will be different in its style and pace reflecting the ‘personal’ aspect of appraisal.

6.5. **Stage five – reporting completion of an appraisal on ESR**

6.5.1. Completed appraisals must be recorded on ESR within two working days of the discussion taking place. A user guide for recording appraisal data is available from:

http://intra.cornwall.nhs.uk/Intranet/AZServices/E/ElectronicStaffRecord/UserGuides.aspx

6.5.2. A paper copy of the appraisal documentation and pay progression record (see Section 6.6) should be filed in the staff member’s personal file. Microsoft Word copies of the appraisal documentation can be obtained from the Appraisal and Pay Progression Policy: Supporting Documents, a copy of which is available from the HR folder of the Trust’s document library.

6.6. **Pay progression**

6.6.1. The changes to the National Terms and Conditions of service handbook, specifically Annex 23 (formerly Annex W), is explicit in that pay progression is dependent on an individual demonstrating that they have achieved the required level of knowledge, skills and performance for their role.

6.6.2. The Trust seeks to create a culture where staff work to their full potential, achieve their objectives and are up to date with all their mandatory training.
6.6.3. Both appraisees and appraisers are encouraged to discuss progress against objectives and performance within role on a regular basis throughout the year. If concerns exist about the failure to meet the objectives or progression criteria this must be highlighted and discussed with the individual during the course of the year so that there is an opportunity for remedial action to be taken and for support to be put in place. New issues with an individual’s performance must not be raised for the first time at an appraisal. These should be managed through effective line management initially and can then be reviewed as part of the appraisal process.

6.6.4. At the end of an appraisal discussion, the appraiser, in conjunction with the line manager if not the appraiser, is required to formally measure staff performance using the Pay Progression Record (see Appendix 4) against the following criteria:

- satisfactorily met all their objectives (see section 6.2.2)
- met all their mandatory training requirements
- demonstrated that they have the requisite knowledge and skills/competencies for their role
- demonstrated consistent behaviour and attitudes in accordance with the Trust values
- **Line managers only** – all the staff they manage have had an annual appraisal.

6.6.5. Where a staff member fails to achieve the required criteria, the reason why must be clearly documented on the Pay Progression Record and line manager must submit a Contract Amendment Form (CAF) to the Payroll Department as soon as possible in order to withhold payment of their increment from the incremental date. They should also advise the staff member’s HR practitioner. A copy of the pay progression record and CAF should be retained in the staff member’s personal file.

6.6.6. The appraisal system is based on the principle of ‘no surprises’. If there are issues of concern with individuals achieving their progression criteria or there are capability issues, these must have been addressed as and when identified. This is in line with good people management practice and should be no different from good appraisal practice as it currently exists.

6.6.7. In cases of continuing concerns about an individual’s performance, the line manager should refer to the Trust’s **Capability Policy and Procedure** for guidance. However, it is emphasised that this policy should be used at the appropriate time and action should not be delayed until the appraisal is being undertaken.

6.6.8. It is a line manager’s responsibility to ensure that the performance of staff within their department is managed appropriately. Managers and Supervisors who consistently fail in their duty to regularly appraise staff, ensure they are up to date with their mandatory training and address any performance issues in a timely manner may be subject to the Trust’s Disciplinary Policy and Procedure.
6.6.9. The Trust is keen to support staff members achieve their full potential and as such there will be no national or local quotas for pay progression. All post holders who apply the necessary knowledge, skills to meet their objectives, the requirements of their post and other pay progression criteria will receive their annual increment.

6.6.10. Staff who are at the top of their respective pay band are still expected to remain up to date with all of the core and specific mandatory training, meet the requirements of their role and achieve their objectives.

- **Staff in Pay Bands 8c, 8d and 9**

6.6.11. In accordance with National Terms and Conditions pay progression beyond the first four pay points in pay bands 8c, 8d and 9 will be dependent upon the achievement of locally determined levels of performance. Staff will progress through these last two pay points in these pay bands only when they are assessed as having met the required performance.

6.6.12. Pay progression for this level of performance will be non-recurring and reviewed on an annual basis. When an individual who holds an annually-earned pay point has not met the required level of performance and delivery for a given year, they will have one annually earned pay-point withdrawn. The last two annually earned pay points in bands 8c, 8d and 9 will not be subject to pay protection.

6.6.13. In these circumstances their line manager must submit a CAF to the Payroll Department as soon as possible so that the annually earned pay-point can be withdrawn from staff member’s incremental date.

6.6.14. The withdrawal of points does not preclude normal capability and disciplinary proceedings being followed and action taken where appropriate.

6.6.15. This policy will apply to objectives set after the first implementation date of this policy, 1 June 2017 for incremental pay progression post June 2018.

- **Line managers**

6.6.16. Line managers who do not ensure that all appraisals of the staff they manage are completed annually (assessed at the date of their appraisal) taking into consideration any ‘exceptional circumstances’) will not achieve pay progression.

- **New Appointments**

6.6.17. Staff members who undertake a change in position which does not result in a new incremental date must still participate in an appraisal at least four weeks before their incremental date. This should be discussed at appointment and the requirement for the appraisal identified with the new line manager.
6.6.18. Staff members who undertake an internal move to a new position with a new incremental date must still complete an appraisal within twelve months of their last one. In this situation, it is advised that an appraisal to set objectives and look at learning needs is undertaken as soon as possible in their new role.

- **Exceptional circumstances**

6.6.19. There may be exceptional circumstances that have prevented a staff member from completing the required criteria.

6.6.20. Where staff have been unable to complete mandatory training and can confirm extenuating circumstances the line manager can approve an extension of four weeks. If training is completed within this time-scale a Contract Amendment form (CAF) can be written and the incremental pay award can be backdated to the normal incremental date. If the training is not completed within the four-week extension, pay progression will not take place for that year.

6.6.21. Staff members will gain automatic pay progression if their appraisal has not been completed and they can demonstrate that they have actively contacted their line manager/appraiser to request this.

6.6.22. Other extenuating circumstances such as sickness, bereavement, cancellation of training courses, operational pressure affecting release of staff, etc, can be taken into account when considering pay progression.

6.6.23. **Maternity/adooption leave**

During maternity and adoption leave, service is considered to be continuous. Where leave coincides with an incremental date, pay progression will be authorised. An appraisal meeting will take place within four weeks of the staff member’s physical return to the workplace at which the objectives and development needs for the following year should be identified.

6.6.24. **Paternity leave/parental leave/special leave**

As these periods of leave are relatively short, managers and staff members are encouraged to plan ahead where possible so that an appraisal can take place prior to the incremental date. In the event of leave being in place and preventing an appraisal from being undertaken, pay progression will go ahead and a retrospective appraisal must take place immediately on an individual’s return to the workplace.

6.6.25. **Career/employment breaks**

Career/employment breaks are, by definition, the choice of the individual. Therefore, if a member of staff chooses to take a career/employment break the pay progression is “frozen” at the pay-point they have reached at their last working day. The staff member returns to work on the same pay-point that they left on and an incremental date is re-calculated on their return (please refer to the Trust’s Career/Employment Break Policy, a copy of
which is available from the HR folder on the document library). An appraisal should take place within four weeks of their return to identify objectives and learning needs.

6.6.26. Long-term sickness

Where a period of long-term sickness coincides with an incremental date, pay progression will be authorised and appraisal should take place within four weeks of the staff member’s return to work.

6.6.27. Disability

Reasonable adjustments will be made for staff protected under the Equality Act 2010 to facilitate both their appraisal and access to training.

6.7. Appeal

6.7.1. Every effort will be made to ensure that appraisers and appraisees are able to resolve differences of opinion during the appraisal without recourse to formal procedures.

6.7.2. If there is a disagreement over the appraisal content, the staff member can request that a third party acts as a mediator. The third party will be a member of staff who is more senior to both the appraiser and the appraisee.

6.7.3. Should mediation fail to reach a satisfactory outcome the staff member has the right to seek a formal review using the local Appraisal and Pay Progression Appeal procedure.

7. Dissemination and Implementation

7.1. The Learning and Development Team will advertise and make staff aware of the revised policy.

7.2. The Learning and Development Team will advertise and inform staff (eg L&D newsletter, One & All Daily Bulletin) of the appraisal training to support the implementation of the revised process.

7.3. A copy of the policy will be stored electronically in the HR section of the Trust’s document library on the internet/intranet site.

7.4. A clear communication will be sent to managers to make them aware that the revised policy has been issued and that they are responsible for cascading the information to their staff members including those who do not have regular access to email.

7.5. A copy of the policy will be circulated to the HR Practitioners to enable them to support the implementation of the policy.

7.6. The Trust’s Directors and Chair of the Joint Consultative and Negotiating Committee (JCNC) will be advised of the issue of the new policy.

7.7. New members of staff will be given a copy of this policy by their line
manager as part of their local induction programme.

8. Monitoring compliance and effectiveness

<table>
<thead>
<tr>
<th>Element to be monitored</th>
<th>Compliance – ie that all staff have had an appraisal</th>
<th>Quality – analysis of the feedback from appraisees on the quality of the process and the appraiser’s facilitation style.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Lead</td>
<td>Ruth Bardell – Associate Director of Workforce and Organisational Development</td>
<td></td>
</tr>
<tr>
<td>Tool</td>
<td>Electronic Staff Record (ESR) and quarterly monitoring using a recognised Trust template.</td>
<td></td>
</tr>
<tr>
<td>Frequency</td>
<td>Monthly and annually.</td>
<td></td>
</tr>
</tbody>
</table>

### Reporting arrangements

- The Governance Committee will receive quarterly reports on:
  - **Compliance**: ie that all staff have had an appraisal PDR
  - **Quality**: analysis of the feedback from appraisees on the quality of the process and the appraiser's facilitation style.

  JCNC will receive a quarterly report post Governance Committee.

  The Learning & Development Department will hold training compliance records and produce monthly reports to the Trust Board and JCNC.

  The outcome of any relevant Staff Opinion Survey results on appraisals will be reported on an annual basis.

  Any actions resulting from the above reports will be recorded in the relevant meeting notes or minutes. The Chair of the meeting/committee is expected to identify any shortcomings in the operation of the policy and make recommendations for improvement.

| Acting on recommendations and Lead(s) | The Head of Learning & Development will ensure subsequent recommendations are undertaken including the development of an action plan for any deficiencies within an agreed time-frame. |
| Change in practice and lessons to be shared | Any system improvements agreed via the action planning process will be actioned in partnership with Staff-Side within six months. Lessons will be shared with all the relevant stakeholders. Any revision to policy will be communicated to staff. |

9. Updating and Review

This policy will be reviewed every three years or earlier in view of developments which may include legislative changes, national policy instruction (NHS or Department of Health), Trust Board decision, or request by either party.

10. Equality and Diversity

10.1. General statement

This document complies with the Royal Cornwall Hospitals NHS Trust service Equality and Diversity statement which can be found in the 'Equality, Diversity & Human Rights Policy' or the Equality and Diversity website.
10.2. **Equality Impact Assessment**
The Initial Equality Impact Assessment Screening Form is at Appendix 2.

Specific provision has been made in the policy for staff where exceptional circumstances apply. For example, staff on maternity leave, adoption leave, parental leave, special leave and for those individuals protected under the Equality Act 2010 (as amended) in respect of disability.
## Appendix 1. Governance Information

<table>
<thead>
<tr>
<th>Document Title</th>
<th>Appraisal and Pay Progression Policy</th>
</tr>
</thead>
<tbody>
<tr>
<td>Date Issued/Approved:</td>
<td>June 2009</td>
</tr>
<tr>
<td>Date Valid From:</td>
<td>1st June 2017</td>
</tr>
<tr>
<td>Date Valid To:</td>
<td>1st June 2020</td>
</tr>
<tr>
<td>Directorate / Department</td>
<td>Helen Lewis, Head of Learning &amp;</td>
</tr>
<tr>
<td>responsible (author/owner):</td>
<td>Development</td>
</tr>
<tr>
<td>Contact details:</td>
<td>01872 258176</td>
</tr>
<tr>
<td>Brief summary of contents</td>
<td>This policy sets out the frame-work</td>
</tr>
<tr>
<td></td>
<td>and process for conducting appraisals.</td>
</tr>
<tr>
<td>Suggested Keywords:</td>
<td></td>
</tr>
<tr>
<td>Target Audience</td>
<td>RCHT</td>
</tr>
<tr>
<td></td>
<td>✓</td>
</tr>
<tr>
<td>Executive Director responsible</td>
<td>Director of HR and OD</td>
</tr>
<tr>
<td>for Policy:</td>
<td></td>
</tr>
<tr>
<td>Date revised:</td>
<td>June 2017</td>
</tr>
<tr>
<td>This document replaces (exact</td>
<td>Personal Development Review (PDR)</td>
</tr>
<tr>
<td>title of previous version):</td>
<td>Policy</td>
</tr>
<tr>
<td>Approval route (names of</td>
<td>POD/JCNC</td>
</tr>
<tr>
<td>committees)/consultation:</td>
<td></td>
</tr>
<tr>
<td>Divisional Manager confirming</td>
<td>Associate Director of Workforce and</td>
</tr>
<tr>
<td>approval processes</td>
<td>Organisational Development</td>
</tr>
<tr>
<td>Signature and name of JCNC</td>
<td>Original copy signed</td>
</tr>
<tr>
<td>Chair or nominated deputy</td>
<td></td>
</tr>
<tr>
<td>Signature of Executive Director</td>
<td>Original copy signed</td>
</tr>
<tr>
<td>giving approval</td>
<td></td>
</tr>
<tr>
<td>Publication Location (refer to</td>
<td>Internet &amp; Intranet ✓ Intranet Only</td>
</tr>
<tr>
<td>Policy on Policies – Approvals</td>
<td></td>
</tr>
<tr>
<td>and Ratification):</td>
<td></td>
</tr>
<tr>
<td>Document Library Folder/Sub</td>
<td>Human Resources</td>
</tr>
<tr>
<td>Folder</td>
<td></td>
</tr>
<tr>
<td>Links to key external standards</td>
<td>CQC Regulation 18 - Staffing</td>
</tr>
<tr>
<td>Related Documents:</td>
<td>- Appraisal and Pay Progression</td>
</tr>
<tr>
<td></td>
<td>Policy: Supporting Documents</td>
</tr>
<tr>
<td></td>
<td>- Capability Policy and Procedure</td>
</tr>
<tr>
<td></td>
<td>- Disciplinary Policy and Procedure</td>
</tr>
<tr>
<td></td>
<td>- Equality, Inclusion and Human</td>
</tr>
<tr>
<td></td>
<td>Rights Policy</td>
</tr>
</tbody>
</table>
Version Control Table

<table>
<thead>
<tr>
<th>Date</th>
<th>Version No</th>
<th>Summary of Changes</th>
<th>Changes Made by</th>
</tr>
</thead>
<tbody>
<tr>
<td>Jun 2009</td>
<td>V1.0</td>
<td>Initial Issue</td>
<td>Nicole Steinkruger HR Manager</td>
</tr>
<tr>
<td>October 2012</td>
<td>V2.0</td>
<td>Re framing of policy and paperwork following a qualitative audit and focus group feedback</td>
<td>Ian Alford/Ruth Bardell, Learning and Development</td>
</tr>
<tr>
<td>December 2016</td>
<td>V2.1</td>
<td>Minor updates to reflect current practice.</td>
<td>Helen Lewis, Head of Learning and Development</td>
</tr>
<tr>
<td>June 2017</td>
<td>V3.0</td>
<td>Full review of policy to reflect National Terms &amp; Conditions ref pay progression.</td>
<td>Helen Lewis, Head of Learning and Development</td>
</tr>
</tbody>
</table>

All or part of this document can be released under the Freedom of Information Act 2000

This document is to be retained for 10 years from the date of expiry.

This document is only valid on the day of printing

Controlled Document
This document has been created following the Royal Cornwall Hospitals NHS Trust Policy on Document Production. It should not be altered in any way without the express permission of the author or their Line Manager.
## Appendix 2. Initial Equality Impact Assessment Form

<table>
<thead>
<tr>
<th>Name of the strategy / policy / proposal / service function to be assessed (hereafter referred to as policy)</th>
<th>Provide brief description: Appraisal and Pay Progression Policy</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Directorate and service area:</strong></td>
<td>Is this a new or existing Policy?</td>
</tr>
<tr>
<td>Human Resources</td>
<td>Existing</td>
</tr>
<tr>
<td><strong>Name of individual completing assessment:</strong></td>
<td>Telephone:</td>
</tr>
<tr>
<td>Helen Lewis</td>
<td>01872 258176</td>
</tr>
</tbody>
</table>

1. **Policy Aim**
   - To ensure compliance, ie that all staff take part in an annual appraisal.
   - To provide a framework and guidance for appraisees and appraisers.
   - To incremental pay increases are linked to the appraisal process.

2. **Policy Objectives**
   - This policy will:
     - set out the approach to the annual appraisal and development process
     - provide consistency across the Trust ensuring all staff benefit from regular appraisal and development
     - outline when and how appraisals should take place
     - confirm the Trust's approach to the annual appraisal process and its formal links to pay progression
     - ensures that staff members who are able to demonstrate that they have consistently maintained these, benefit from incremental pay progression.

3. **Policy – intended Outcomes**
   - That all staff take part in a meaningful appraisal process which provides the appraisee with clear objectives for the next 12 months and identifies the learning and development required to help meet those objectives. That all staff who demonstrate that they have achieved /maintained the required level of knowledge, skills and performance within their role receive their incremental pay progression.

4. **How will you measure the outcome?**
   - Through the monitoring of compliance and quality of the process as described in the policy document.

5. **Who is intended to benefit from the policy?**
   - All staff working at the Trust and patients.

6a) **Is consultation required with the workforce, equality groups, local interest groups etc. around this policy?**
   - Yes

   b) **If yes, have these groups been consulted?**
   - Yes

   c) **Please list any groups who have been consulted about this procedure.**
   - JCNC
7. The Impact
Please complete the following table.

<table>
<thead>
<tr>
<th>Are there concerns that the policy could have differential impact on:</th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Equality Strands:</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>Age</td>
<td>✓</td>
<td></td>
</tr>
<tr>
<td>Sex (male, female, transgender / gender reassignment)</td>
<td>✓</td>
<td></td>
</tr>
<tr>
<td>Race / Ethnic communities / groups</td>
<td>✓</td>
<td></td>
</tr>
<tr>
<td>Disability - Learning disability, physical disability, sensory impairment and mental health problems</td>
<td>✓</td>
<td></td>
</tr>
<tr>
<td>Religion / other beliefs</td>
<td>✓</td>
<td></td>
</tr>
<tr>
<td>Marriage and civil partnership</td>
<td>✓</td>
<td></td>
</tr>
<tr>
<td>Pregnancy and maternity</td>
<td>✓</td>
<td></td>
</tr>
<tr>
<td>Sexual Orientation, Bisexual, Gay, heterosexual, Lesbian</td>
<td>✓</td>
<td></td>
</tr>
</tbody>
</table>

You will need to continue to a full Equality Impact Assessment if the following have been highlighted:
- You have ticked “Yes” in any column above and
- No consultation or evidence of there being consultation- this excludes any policies which have been identified as not requiring consultation. or
- Major service redesign or development

8. Please indicate if a full equality analysis is recommended. Yes No ✓

9. If you are not recommending a Full Impact assessment please explain why.

Specific provision has been made in the policy for staff where exceptional circumstances apply. For example, staff on maternity leave, adoption leave, parental leave, special leave and for those individuals protected under the Equality Act 2010 (as amended) in respect of disability.

Signature of policy developer / lead manager / director | Date of completion and submission
---|---

Names and signatures of members carrying out the Screening Assessment | 1. 2.

Keep one copy and send a copy to the Human Rights, Equality and Inclusion Lead, c/o Royal Cornwall Hospitals NHS Trust, Human Resources Department, Knowledge Spa, Truro, Cornwall, TR1 3HD
Appendix 3. Learning and development opportunities

Learning can often be viewed as only ‘a course in a classroom’, but there are other ways to learn and develop to help meet objectives. The following are some examples but this is not an exhaustive list. If you would like more information or would like to discuss any in more detail, please contact the **Learning & Development** team: training@cornwall.nhs.uk

<table>
<thead>
<tr>
<th>Learning &amp; Development options</th>
<th>A brief description and overview</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Mentoring</strong></td>
<td>Mentoring is a relationship between an experienced person (mentor) and a less experienced person (mentee) for the purpose of helping the one with less experience. The mentee seeks the advice and support of the more experienced person. The mentor answers questions concerning the tasks that the individual needs to succeed in reaching his / her goals. A mentor provides wisdom, guidance and advice based on their experience with a view to helping the mentee move forward.</td>
</tr>
<tr>
<td><strong>Coaching</strong></td>
<td>Coaching is usually a 1:1 process where a facilitator (coach) meets with an individual (coachee) who identifies an issue they wish to explore. The coach will listen and ask questions to help the coachee make sense of the situation and determine what action he / she wishes to take to move things forward. <em>Coaching is different from mentoring – in its truest sense it is giving the responsibility to the learner to come up with their own answers.</em></td>
</tr>
<tr>
<td><strong>Classroom/ Taught Course</strong></td>
<td>A programme with clear learning objectives, usually delivered in a classroom setting, designed to provide knowledge &amp; skills and raise personal awareness and understanding of a work-related topic.</td>
</tr>
<tr>
<td><strong>e-learning</strong></td>
<td>A specific programme that is accessed through a computer. The term 'platform' is often used to describe the framework or how the course is structured – e.g. <em>Learning for Health</em> platform.</td>
</tr>
<tr>
<td><strong>Self-directed study</strong></td>
<td>This could be reading or an internet search around a certain topic that you have identified, or discussed with your reviewer or coach / mentor. It could also be in the form of a personal reflection to try and gain a better understanding of a particular situation.</td>
</tr>
<tr>
<td><strong>Experience in other settings</strong></td>
<td>This could be a short visit to another department or health facility, designed to give individuals an insight into other ways of working, or to gain a greater understanding of how that department links to your own. This could also take the form of an exchange visit – to help both departments / teams appreciate the other’s perspective.</td>
</tr>
<tr>
<td><strong>Shadowing</strong></td>
<td>A term used to describe a structured situation where an individual requests that they spend some time observing and spending negotiated time with another person (e.g. colleague, manager,). This can be to gain a greater insight into how that individual works, their style or perhaps how they relate to your area of work. This is an informal agreement between the two people concerned.</td>
</tr>
</tbody>
</table>
### Appendix 4. Pay Progression Record

<table>
<thead>
<tr>
<th>Name of staff member (appraisee)</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Incremental date</td>
<td></td>
</tr>
<tr>
<td>Payroll number</td>
<td></td>
</tr>
<tr>
<td>Department</td>
<td></td>
</tr>
<tr>
<td>Name of appraiser</td>
<td></td>
</tr>
<tr>
<td>Name of line manager</td>
<td></td>
</tr>
<tr>
<td>Date of appraisal</td>
<td></td>
</tr>
</tbody>
</table>

During the last review period, I confirm that the staff member named above has:—

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
<th>If not, why not?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Met all their objectives/requirements</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Met all mandatory training requirements</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Demonstrated satisfactory performance within their role</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Demonstrated consistent behaviour and attitudes in accordance with the Trust values</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Line managers only – all staff have had an annual appraisal</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

If all the above criteria apply the staff member can obtain pay progression.

If the staff member is deemed not to have satisfactorily met the criteria, the reason why should be documented below:

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Signature of appraiser:</td>
<td></td>
</tr>
<tr>
<td>Signature of line manager (if not appraiser):</td>
<td></td>
</tr>
<tr>
<td>Date:</td>
<td></td>
</tr>
</tbody>
</table>
### Appendix 5. Trust values

<table>
<thead>
<tr>
<th>Care &amp; Compassion</th>
<th>Trust &amp; Respect</th>
<th>Working Together</th>
<th>Inspiration &amp; Innovation</th>
<th>Pride &amp; Achievement</th>
</tr>
</thead>
<tbody>
<tr>
<td>We look after our patients, and each other, as we would like to be looked after ourselves:-</td>
<td>We trust and respect our patients and colleagues:-</td>
<td>We appreciate and value the role of all our colleagues in patient care and experience and work together towards a common purpose:-</td>
<td>We inspire innovation in all that we do:-</td>
<td>We take pride in our work and our achievement:-</td>
</tr>
<tr>
<td>* Show empathy and compassion, offer reassurance, smile and be friendly.</td>
<td>* Be polite, honest and non-judgemental at all times when we communicate with each other and our patients.</td>
<td>* Work with our colleagues and our patients to identify and reach common goals and take responsibility for our part in achieving them.</td>
<td>* Seek innovative solutions to improve the things that challenge us.</td>
<td>* Be professional in our approach and our appearance.</td>
</tr>
<tr>
<td>* Take time to listen to patients, families and carers, keep them involved and informed at every step.</td>
<td>* Engage, listen and value the contribution of all.</td>
<td>* We will share information and expertise within the team and between the team and the wider organisation.</td>
<td>* Build a sense of shared purpose together across our service areas.</td>
<td>* Set ourselves high standards and strive to achieve success.</td>
</tr>
<tr>
<td>* Be vigilant and attentive, take responsibility for ensuring the safety and wellbeing of all those in our care.</td>
<td>* Support all of my colleagues and challenge unacceptable behaviour.</td>
<td>* Demonstrate integrity, consistency and transparency in all decision making.</td>
<td>* Encourage and support creativity to generate ideas for on-going success.</td>
<td>* Take personal responsibility for doing the very best we can in our roles and for our own development.</td>
</tr>
<tr>
<td>* Protect patients’ dignity and confidentiality at all times.</td>
<td>* Be responsible and accountable for our own actions and their part in collective actions.</td>
<td>* Be clear about what we expect of each other and do what we say we will do, explaining clearly, the reasons why we are unable to do something.</td>
<td>* Create a stimulating learning environment through sharing knowledge and experience with others.</td>
<td>* Being passionate about enhancing our care for our patients, seeing and acting on things that need improvement.</td>
</tr>
<tr>
<td>* Empower and support individuals to develop confidence and to reach their full potential.</td>
<td>* Understand, respect and value the qualities of individuals and the diversity of those around us.</td>
<td>* Explore and push the boundaries of research, technology and clinical practice to be the very best at what we do.</td>
<td>* Share and celebrate achievement building pride in our reputation.</td>
<td>* Share and celebrate achievement building pride in our reputation.</td>
</tr>
<tr>
<td>* Create and sustain a safe, healthy environment in which to work and care for our patients.</td>
<td>* Respect the value of what we have and ensure the wise and responsible use of time, money and resources.</td>
<td>* Endeavour to continuously improve and implement positive change.</td>
<td>* Recognise and be responsive to commercial change to protect and develop our services.</td>
<td></td>
</tr>
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</table>
## Appendix 6. Trust values – behavioural frameworks

### Care & Compassion

<table>
<thead>
<tr>
<th>Expected Behaviours</th>
<th>Aspirational Behaviours</th>
<th>Negative Behaviours</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Our required behaviours</strong></td>
<td><strong>These behaviours are required by employees looking to develop and those in senior and managerial positions</strong></td>
<td><strong>Examples of behaviours that fail to demonstrate ‘Trust and respect’ are outlined below:</strong></td>
</tr>
<tr>
<td>You are empathetic to both patients and colleagues.</td>
<td>You actively promote a culture of safety and quality.</td>
<td>You don’t display empathy or offer reassurance.</td>
</tr>
<tr>
<td>You communicate relevant information honestly, clearly and regularly check that there is mutual understanding.</td>
<td>You monitor patient outcomes and patient experience indicators and take action to address any issues of concern.</td>
<td>You disregard patient confidentiality.</td>
</tr>
<tr>
<td>You communicate relevant information honestly, clearly and regularly check that there is mutual understanding.</td>
<td>You engage with colleagues across the Trust and external partners to ensure that clinical pathways are effectively and efficiently delivered for the benefit of patients.</td>
<td>You are inattentive and fail to notice and respond to issues affecting the safety and wellbeing of patients and colleagues.</td>
</tr>
<tr>
<td>You convey concern for the wellbeing of the patient and are actively engaged in their care.</td>
<td>You regularly monitor your team’s health, safety and wellbeing and address concerns.</td>
<td>Your record keeping is untidy, inaccurate and/or completed late.</td>
</tr>
<tr>
<td>You see the person in every patient.</td>
<td></td>
<td>You lack insight and do not appreciate the impact of your actions/behaviours.</td>
</tr>
<tr>
<td>You understand the impact of what you do.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
### Inspiration & Innovation

<table>
<thead>
<tr>
<th>Expected Behaviours</th>
<th>Aspirational Behaviours</th>
<th>Negative Behaviours</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Our required behaviours</strong></td>
<td>These behaviours are required by employees looking to develop and those in senior and managerial positions</td>
<td>Examples of behaviours that fail to demonstrate ‘Trust and respect’ are outlined below:</td>
</tr>
</tbody>
</table>

- You are open to new ideas and suggestions and speak up when you see a better way.
- You look to streamline processes, suggesting ways to reduce waste and enhance quality.
- You are flexible in providing solutions to deliver improvements and resolve issues.
- You use your initiative to solve problems.
- You share the benefits of your professional learning and experiences with colleagues.
- You participate fully in multi-disciplinary MDT, Audit and Mortality Review meetings etc.
- You participate in research and development initiatives as appropriate.

- You support a blame free culture empowering and supporting colleagues to initiate service improvements.
- You plan and instigate changes in working practices and effectively manage the transition to introduce new ways of working.
- You keep focused on the bigger picture, creating clear, strategic direction.
- You see failure and problems as an opportunity to learn, develop and improve.
- You promote a culture of continuous improvement providing colleagues with the opportunity to reflect on and enhance service delivery.
- You actively promote and facilitate the promotion and conduct of research and development initiatives.

- You don’t use your initiative, demonstrating an unwillingness to do things differently.
- You put up barriers to working differently and discourage change from happening.
- You focus on the problems, not the solutions.
- You stick to outdated methods and practices that have become ineffective.
- You concentrate only on narrow operations objectives and not the bigger picture.
- You dismiss alternative ideas and discourage colleagues from suggesting new ways of doing things.
- You don’t listen to, research or question information for a better understanding.

### Pride & Achievement

<table>
<thead>
<tr>
<th>Expected Behaviours</th>
<th>Aspirational Behaviours</th>
<th>Negative Behaviours</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Our required behaviours</strong></td>
<td>These behaviours are required by employees looking to develop and those in senior and managerial positions</td>
<td>Examples of behaviours that fail to demonstrate ‘Trust and respect’ are outlined below:</td>
</tr>
</tbody>
</table>

- Your appearance is appropriately professional at all times.
- You take pride in your own work and that of your colleagues.
- You are willing to go the “extra mile” for patients and colleagues.
- You promote and discuss continuous improvement by asking “how could we do this better?”
- You review your own performance and ask for feedback to learn and improve.
- You appropriately challenge unacceptable behaviours or standards of dress.
- You take accountability for your development needs.

- You lead by example, influencing and inspiring confidence in others.
- You understand how your team learn and develop and use this knowledge to lead performance improvements.
- You recognise good performance and take the time to thank and praise others.
- You recognise talent within your team and develop potential through training, mentoring and coaching.
- You actively promote the success of your team across the Trust and with external partners.
- You ensure quality is at the heart of all you do, taking the initiative to improve service delivery.
- You understand the challenges and opportunities relating to the delivery of your service and proactively promote change to protect and/or develop services.
- You actively seek out research data, best practice and/or benchmarking data to assess the existing levels, quality of service and establish targets for the maintenance or improvement of standards.

- You ignore problems and do not contribute to discussions about service improvements.
- You do not deliver what is expected of you and show a lack of concern in the quality of your work.
- You are unreliable and your timekeeping is poor.
- Your appearance does not comply with the Trust’s dress code.
- You do not take any responsibility for identifying/addressing your development needs.
- You talk negatively about individuals, your team and/or the Trust but do not do so at the forums where appropriate concerns might be addressed.
### Trust & Respect

<table>
<thead>
<tr>
<th><strong>Expected Behaviours</strong></th>
<th><strong>Aspirational Behaviours</strong></th>
<th><strong>Negative Behaviours</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Our required behaviours</strong></td>
<td><strong>These behaviours are required by employees looking to develop and those in senior and managerial positions</strong></td>
<td><strong>Examples of behaviours that fail to demonstrate ‘Trust and respect’ are outlined below:</strong></td>
</tr>
</tbody>
</table>
| ▪ You are respectful and considerate.  
▪ You understand how your behaviours can be interpreted and consider the impact you have on others.  
▪ You continue to give time to colleagues who need help, even when the pressure is on.  
▪ You support the diversity of teams and working groups.  
▪ You trust colleagues to fulfil their responsibilities.  
▪ You listen carefully to others – showing that you respect and value their input.  
▪ You manage your reaction to situations professionally and calmly.  
▪ You appropriately challenge assumptions and unhelpful behaviour. | ▪ You display a clear appreciation of your team’s efforts and support them when there are difficulties.  
▪ You encourage team members to recognise and value individual contributions.  
▪ You involve and gain consensus from those affected by decisions and actions.  
▪ You look to understand other people and their behaviours, and use this knowledge to adapt your approach for effective working relationships.  
▪ You are a role model for an inclusive leadership style; respecting colleagues and partners.  
▪ You instigate changes in behaviour to improve the use of resources.  
▪ You engage with internal and external partners, making sure a full range of views are taken into account.  
▪ You stand by difficult decisions and openly acknowledge errors.  
▪ You listen to the views of your team; checking that approaches are united and encouraging them to challenge and provide feedback. | ▪ You are disrespectful, insensitive or unhelpful to patients or colleagues and your manner causes upset to others.  
▪ You don’t listen to patients or colleagues.  
▪ You don’t recognise the value of different perspectives or professional contributions.  
▪ You make little or no effort to understand things from your patient or colleagues point of view.  
▪ You allow disrespectful or discriminatory behaviour to take place.  
▪ You do not take responsibility for your actions, blame the system or others and show a lack of concern about the quality of your work.  
▪ You close others down by being judgemental, interrupting or talking over them. |
## Working Together

<table>
<thead>
<tr>
<th>Expected Behaviours</th>
<th>Aspirational Behaviours</th>
<th>Negative Behaviours</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Our required behaviours</strong></td>
<td><strong>These behaviours are required by employees looking to develop and those in senior and managerial positions</strong></td>
<td><strong>Examples of behaviours that fail to demonstrate 'Trust and respect' are outlined below:</strong></td>
</tr>
<tr>
<td>You take the time to build effective relationships with stakeholders, colleagues and partners. You celebrate team successes and create a positive team spirit. You recognise and appreciate the value of working. You share skills and knowledge and encourage and support others in applying their ideas to work – helping others to help themselves. You encourage working together for the benefits of patients. You listen to and involve colleagues and partners and respond positively to suggestions before making decisions. You share information openly with colleagues. You honour your commitments to colleagues and partners. You take personal responsibility for your part in delivering services. You acknowledge when you make mistakes and take responsibility for addressing and correcting them. You respond positively to requests from colleagues for assistance providing advice and/or suggested alternatives when immediate support is not possible.</td>
<td>You look for ways to maximise the value of working together by building support, providing focus and giving direction to deliver joint outcomes. You support others in working together; helping them to develop common focus. You are happy to give up control, power or resource to benefit patients. You facilitate staff involvement and consult with representative groups when formulating strategies. You make evidential based decisions and share the rationale for your actions openly. You build networks, locally, regionally and/or nationally to help provide support and expertise by shaping and driving forward agendas and addressing concerns. You resolve conflicts and disagreements quickly and professionally. You work to build commitment and engagement. You provide feedback on your team’s performance during regular one to one and team meetings. You build a sense of shared purpose across your service areas. You articulate vision, meaning and direction to focus service delivery, translating clear objectives to your team. You appropriately deploy the skills and behaviours of your team, independently and interactively in order to best deliver services.</td>
<td>You do not accept colleagues as internal customers. You play power games and use your status to disrupt collaborative working. You show little sign of cooperating within your team or working in partnership with other teams. You do not share information or make your professional expertise available to colleagues. You don’t ask others for opinions or ideas. You choose not to work as a team by pursuing your own agenda. You adopt a command and control approach. You display a negative attitude towards colleagues. You fail to engage meaningfully with patients or colleague and don’t keep them fully informed.</td>
</tr>
</tbody>
</table>