![NHS Cumbria, Northumberland, Tyne and Wear NHS Foundation Trust logo]

Document Title	Appraisal Policy (Non-Medical) (Incorporating the Talent Management conversation)
Reference Number	CNTW(HR)09
Lead Officer	Lynne Shaw Executive Director of Workforce and Organisational Development
Author(s) (name and designation)	Kim Carter, Workforce Developments Manager Claire Baxter, Trust Coach and Developments Manager
Ratified by	Business Delivery Group
Date Ratified	February 2021
Implementation Date	February 2021
Date of full Implementation	April 2021
Review Date	February 2024
Version Number	V02.1

Review and Amendment Log	Version	Type of Change	Date	Description of Change
	V02.1	Amendment	07.10.2021	Email address updated in Section 7.4 and on App 1 and App 4. Scoring system updated on App 3 and App 4 to match the policy.

This Policy supersedes the following document which must now be destroyed:

Document Number	Title
CNTW(HR)09 – V02	Staff Appraisal Policy

Appraisal Policy (Non-Medical)
(Incorporating Talent Management conversation)

Appendices – listed separate to Policy	
Appendix No.	**Description**
1	Appraisal Form
2	CNTW Visions and Values Poster
3	Appraisee's Preparation Guidance Notes
4	Appraiser's Preparation Guidance Notes
5	CNTW Strategy Diagram
6	Appraisal Timeline for staff in post prior to 1 Apr 2019 – until 31 Mar 2021
7	Appraisal Outcome Appeal Form
8	Appraisal Cycle Flowchart
Practice Guidance Notes – listed separate to Policy	
PGN No.	**Description**
SA-PGN-01	Nursing Revalidation and Triennial Review

1   Introduction

1.1   This policy sets out the Trust's arrangements for the annual performance appraisal and development review of non-medical staff. The appraisal process adheres to the principles of equity and fairness and supports the delivery of high quality care.

1.2   The Trust is committed to educating and equipping staff with the knowledge and skills to undertake their job and as such there is a commitment to continually develop the appraisal system. The Trust's appraisal process is an annual requirement, to maintain a level of competence that is in line with job role, Trust values and expected behaviour and relevant codes of conduct.

2   Policy Scope/Purpose

2.1   The purpose of this policy is to set out the context for effective performance appraisal, development review and pay progression in accordance with NHS Terms and Conditions of Service 2018, Annex 23.

2.4   Other exceptions include Medical and Dental staff, Executive Directors and staff on local Terms and Conditions of Service, Bank Staff and those on short-term contracts of three months or less.

2.5   Through the application of this Policy staff will:

- Receive recognition for their achievements.
- Receive clear, honest and objective feedback on their work.
- Understand what is expected of them.
- Know how to contribute to the Trust's objectives.
- Be able to demonstrate and understand how to uphold the Trust's expected values, behaviours and attitudes.
- Have an opportunity to discuss relevant training, development and future career aspirations to support ability to undertake role.
- Agree a range of SMART objectives, linked to the objectives of the Trust, service and role.
- To have the opportunity to discuss their future career aspirations and potential development opportunities are identified.
- To receive recognition of their ongoing wellbeing conversations.

3   Duties and Accountability

3.1   The Corporate Decisions Team are accountable to the Trust Board for ensuring the Trust-wide compliance with Policy.

1

Cumbria, Northumberland, Tyne and Wear NHS Foundation Trust
CNTW(HR)09 – Staff Appraisal Policy (Non-Medical) – V02.1-Oct 2021

3.2 CNTW Academy are responsible for the provision of training to support the application of this Policy. They are also responsible for the monitoring and reporting of compliance to relevant committees.

3.3 Locality Care Groups, Associate Directors and Corporate Managers are responsible for the application and compliance of staff within their services with the Policy

3.4 Staff are responsible for complying with the policy requirements and participation in appraisal. It is expected that managers and members of staff will prepare for and be ready to participate in the appraisal process. Staff should further be willing to undertake relevant development activities to enhance and improve performance.

3.5 Where a member of staff has a 'split role' within the organisation, it is the responsibility of both Managers to ensure the appraisal is carried out jointly.

4 Definition of Terms

4.1 Appraisal is a two way process in which a review of performance linked to job role, Trust values (see appendix 1) is undertaken, development needs identified and future SMART objectives identified.

4.4 Personal Development Plan is a document detailing the training requirements for a member of staff over the next 12 months.

4.5 SMART objectives are objectives written in a specific way to meet a range of criteria (see 6.3).

4.6 Talent conversation: a conversation held with employees regarding their aspirations, ability and potential for future career development.

4.7 Talent Management is the process of recruiting, identifying, nurturing, developing and retaining staff with critical skills or areas of talent within the organisation.

4.8 Wellbeing conversation is the opportunity for an individual to discuss their health and wellbeing, any flexible working requirements and equality, diversity and inclusion.

5 Procedure/Process for staff in post before 1 April 2019 until 31 March 2021

5.1 Overview

5.1.1 The appraisal process links the achievement of agreed objectives (strategic, team and personal) supporting the development of the Trust, Service and members of staff with the demonstration of Trust values, behaviours and attitudes. Where a member of staff feels they may not be able to meet an

objective and have evidence they wish to be considered as to why this is the case, they may bring this to the appraisal for discussion.

5.1.2 Agenda for Change Statement Annex W states:

"In assessing an individual's performance, an organisation may consider not just whether the objectives have been achieved (or not) but also how they are achieved."

5.1.3 It is the Manager's responsibility to ensure all staff for whom they have responsibility have an appraisal in line with the timeline, however, Managers can delegate the process to an appropriate senior member of their team, providing they have had relevant training.

5.2 Timing

5.2.1 The process is annual with staff expected to participate in appraisal with their appraiser. However, ongoing support/one to one feedback throughout the year should be used to enhance the process.

5.2.2 Appraisers should give staff sufficient notice to prepare for the appraisal following the guidance in the appraisal documentation (appendices guidance notes 2, 3 and 4).

5.2.3 Appraisals should be undertaken between 6 and 12 weeks prior to a member of staff's pay step date to enable the member of staff to progress to the next incremental point (if appropriate). The Trust pay progression framework will need to be used in conjunction with and adhered to as part of the appraisal process.

5.2.4 Where a member of staff is moving internally (but is not promoted) it is the receiving Managers responsibility to ensure an appraisal is arranged in line with the member of staff's incremental date, however, it may be necessary to review and amend objectives set in a previous work area on commencement.

5.3 Objectives

5.3.1 All staff as part of the annual appraisal process will agree a number of objectives over two categories, Strategic/Organisational and Personal, and will form the basis of the following year's appraisal. Achievement of objectives is important, however, staff must also demonstrate the Trust Values and Attitudes throughout. Where a member of staff feels they may not be able to meet an objective and have evidence they wish to be considered as to why this is the case, they may bring this to the appraisal for discussion.

5.3.2 When reviewing the objectives that were agreed for the previous 12 months the following scoring should be used:

- Not Achieved / Performs Unsatisfactorily – 0

None of the objectives set have been achieved.

- Partially Achieved – 1
  A limited number of the objectives set have been achieved.

- Achieved / Performs satisfactorily within own remit – 2
  Objectives have been achieves to a satisfactory standard

- Achieved all/exceeding in some areas within own remit – 3
  Objectives have been achieved to a satisfactory standard with some exceeding expectations.

- Exceeded / Performs Well – 4
  Objectives have been achieved to a higher than satisfactory standard in nearly all areas.

5.3.3 Personal objectives should reflect the competencies required to competently perform the role. These can be found in competence based Job Descriptions, in competence statements from Professional Bodies or Trust developed role competencies. Only the Trust standardised job descriptions should be used or an existing job description where a new one has not been developed yet. For guidance please contact; The Workforce Transactional Services Team within NTW Solutions.

5.3.4 Personal objectives should take account of relevant codes of conduct and standards for both professional and regulatory bodies where they exist for the role.

5.3.5 Objectives should be SMART although it is acknowledged that may not be achievable in some circumstances especially Trust and service wide objectives:

- **S**pecific
- **M**easurable
- **A**chievable
- **R**elevant
- **T**imescaled

5.3.6 Where appropriate and agreed by the employee, seek to develop employees and their potential. In addition, line managers should consider succession planning and future roles.

6 Procedure/Process for staff appointed on or after 1 April 2019 or for staff promoted on or after 1 April 2019

6.1 Overview

6.1.1 The appraisal process links the achievement of agreed objectives (strategic/operational, and personal) supporting the development of the Trust,

4

Cumbria, Northumberland, Tyne and Wear NHS Foundation Trust
CNTW(HR)09 – Staff Appraisal Policy (Non-Medical) – V02.1-Oct 2021

Service and members of staff with the demonstration of Trust values, behaviours and attitudes.

6.1.2 It is the Manager's responsibility to ensure all staff for whom they have responsibility have an appraisal in line with the new timeline (Appendix 10), however, Managers can delegate the process to an appropriate senior member of their team, providing they have had relevant training.

6.2 Timing

6.2.1 Regular discussions between manager/supervisor and member of staff should occur throughout the year via Management Supervision. These discussions allow for updates in relation to achievements, progress of objectives and areas of expectation that may not be being met and should be held on a frequent basis as agreed by the manager/supervisor and the member of staff. It is also an opportunity for the member of staff to raise any issues in relation to work, health and wellbeing, work patterns, working relationships or any issues that may affect their pay progression.

6.2.2 Appraisals must be undertaken annually. It is a joint responsibility that these are undertaken and both parties actively participate. It is recommended that postponement only occur in extreme circumstances (service need/personal issues). Pay progression should not be delayed if an organisational issue delays the appraisal.

6.2.3 An appraisal may occur at a different time to the pay step date (formerly called incremental date). At the pay step review the last appraisal must be taken into account as should progress made since then. Paperwork and guidelines at appendices 1, 3 and 4.

6.3 Objectives

6.3.1. All employees should have the opportunity to develop to their full potential and, where possible, this should be supported and encouraged. The appraisal conversation is the natural place for this to occur and should focus on exploring career aspirations, interests and future roles. Where development opportunities exist these may be incorporated into the PDP and link to succession planning within the team and locality.

6.3.2 All staff as part of the annual appraisal process will agree a number of objectives - these will fall into two categories, strategic and personal, and will form the basis of the following year's appraisal. Achievement of objectives is important, however, staff must also demonstrate the Trust Values and Attitudes throughout to achieve pay progression.

6.3.3 When reviewing the objectives that were agreed for the previous 12 months the following scoring should be used:

- Not Achieved / Performs Unsatisfactorily – 0
  None of the objectives set have been achieved.

5

Cumbria, Northumberland, Tyne and Wear NHS Foundation Trust
CNTW(HR)09 – Staff Appraisal Policy (Non-Medical) – V02.1-Oct 2021

- Partially Achieved – 1
  A limited number of the objectives set have been achieved.

- Achieved / Performs satisfactorily within own remit – 2
  Objectives have been achieves to a satisfactory standard.

- Achieved all/exceeding in some areas within own remit – 3
  Objectives have been achieved to a satisfactory standard with some exceeding expectations.

- Exceeded / Performs Well – 4
  Objectives have been achieved to a higher than satisfactory standard in nearly all areas.

6.3.4 Role objectives should reflect the competencies required to competently perform the role. These can be found in new standardised competence based Job Descriptions, in competence statements from Professional Bodies or Trust developed role competencies. Only the new Trust standardised job descriptions should be used or an existing job description where a new one has not been developed yet. For guidance please contact; The Workforce Transactional Services Team within NTW Solutions.

6.3.5 Role objectives should take account of relevant codes of conduct and standards for both professional and regulatory bodies where they exist for the role. The trust is committed to being a learning

6.3.6 Objectives should be SMART although it is acknowledged that may not be achievable in some circumstances especially Trust and service wide objectives:
- **S**pecific
- **M**easurable
- **A**chievable
- **R**elevant
- **T**imescaled

6.3.7 As part of the appraisal process managers are encouraged to undertake a Talent Management conversation with staff about their future career aspirations. This conversation should be open and constructive around the member of staff potential; where they are now, where they want to be, and how they can be supported taking into account the development they require, the value they bring, and the position(s) that best suit their skills currently and into the future within the Trust or elsewhere in their career journey. This element of the conversation needs to be agreed by both parties and captured in the supporting Appraisal documentation form as one of the following options:

- I'm new to the role (within the last 12 months).
- I'm unsure of this role and it may not be right for me and therefore I am exploring alternative development options.

- I'm content with this role.
- I'm content with this role but I want to develop further.
- Ready for more… I want to be challenged further or take the next step in my career.

7   Record Keeping

7.1   It is essential that the completed documentation (appendix 1) is retained as a record of the appraisal process.

7.2   Members of staff must retain the appraisal document and use to record on going 1:1s/support meetings/reviews between appraisals. It is the member of staff's responsibility to ensure the safe and confidential storage of their appraisal documentation.

7.3   The appraiser must keep a record of the agreed objectives and the member of staff's training requirements as detailed in their PDP.

7.4   Confirmation that the appraisal has taken place is through completion of the Appraisal Record Form (appendix 1) which must be forwarded electronically to the E-mail box (Appraisals@cntw.nhs.uk) by the appraiser in line with the timeline (appendix 6 or 8) and copied in to the appraisee as confirmation.

8   Identification of Stakeholders

8.1   This Policy follows the criteria set out in NTW(O)01 – Development and Management of Procedural Documents, this Policy was circulated Trust-wide for a **two week consultation** to the standard distribution listed below:

- North Locality Care Group
- Central Locality Care Group
- South Locality Care Group
- Cumbria Locality Group
- Corporate Decision Team
- Business Delivery Group
- Safer Care Group
- Communications, Finance, IM&T
- Commissioning and Quality Assurance
- Workforce and Organisational Development
- NTW Solutions
- Local Negotiating Committee
- Medical Directorate
- Staff Side
- Internal Audit
- Health Safety and Resilience

7

Cumbria, Northumberland, Tyne and Wear NHS Foundation Trust
CNTW(HR)09 – Staff Appraisal Policy (Non-Medical) – V02.1-Oct 2021

9 Training

9.1 Training will be available for Managers/appraisers in the application of the Policy and new process and will be available for all members of staff on how to get the most out of the appraisal process, these will not be mandatory. Appraisers who have never appraised before will be expected to have completed the training before taking up the role.

10 Implementation

10.1 Changes to the Policy and process will be communicated via a range of Trust routes once agreed via the Business Delivery Group.

10.2 Taking into consideration all the implications associated with this Policy including the training required, it is considered that this Policy will be implemented by April 2021

11 Fair Blame

11.1 The Trust is committed to developing an open learning culture. It has endorsed the view that, wherever possible, disciplinary action will not be taken against members of staff who report near misses and adverse incidents, although there may be clearly defined occasions where disciplinary action will be taken.

12 Fraud, Bribery and Corruption

12.1 The falsification of any of the appraisal documentation is an offence and subject to discipline under the Trust's CNTW(HR)04 - Disciplinary Policy.

12.2 In accordance with the Trust's CNTW(O)23 - Fraud, Bribery and Corruption Policy, all suspected cases of fraud and corruption should be reported immediately to the Trust's Local Counter Fraud Specialist or to the Director of Finance.

13 Monitoring

13.1 Compliance with the policy and information on pay deferral will be maintained via the Trust-wide Quality and Performance Group.

13.2 Compliance with annual appraisals will be monitored via the Corporate Decision Team Workforce.

14 Associated Documents

- CNTW(O)01 Development and Management of Procedural Documents
- CNTW(O)23 Fraud, Bribery and Corruption Policy and Response Plan
- CNTW(HR)04 Disciplinary Policy

8

Cumbria, Northumberland, Tyne and Wear NHS Foundation Trust
CNTW(HR)09 – Staff Appraisal Policy (Non-Medical) – V02.1-Oct 2021

- Trust Pay Progression Framework
- Trust Talent Management Approach and Career Pathways
- Agenda for Change Terms and Conditions of Service - Annex 23 **https://www.nhsemployers.org/employershandbook/tchandbook/annex-23-pay-progression-england.pdf** -Accessed 22.02.21

NHS
Cumbria, Northumberland,
Tyne and Wear
NHS Foundation Trust

Appendix A

Equality Analysis Screening Toolkit			
Names of Individuals involved in Review	**Date of Initial Screening**	**Review Date**	**Service Area / Locality**
Christopher Rowlands	Feb 2021	Feb 2024	Trust-wide
Policy to be analysed		**Is this policy new or existing?**	
CNTW(HR)09		Existing Policy - change of name and complete re-write	

What are the intended outcomes of this work? Include outline of objectives and function aims

The purpose of this Policy is to set out the context for effective performance appraisal and development review. Including supporting documents and guidance for all staff participating in the process.

Who will be affected? e.g. staff, service users, carers, wider public etc.

Non-Medical Staff

Protected Characteristics under the Equality Act 2010. The following characteristics have protection under the Act and therefore require further analysis of the potential impact that the policy may have upon them

Disability	No impact
Sex	No impact
Race	No impact
Age	No impact
Gender reassignment (including transgender)	No impact
Sexual orientation.	No impact
Religion or belief	No impact
Marriage and Civil Partnership	No impact
Pregnancy and maternity	No impact
Carers	No impact
Other identified groups	No impact

How have you engaged stakeholders in gathering evidence or testing the evidence available?

Through standard consultation routes

How have you engaged stakeholders in testing the policy or programme proposals?
Through standard consultation routes

For each engagement activity, please state who was involved, how and when they were engaged, and the key outputs:
Trust-wide Policy Consultation

Summary of Analysis Considering the evidence and engagement activity you listed above, please summarise the impact of your work. Consider whether the evidence shows potential for differential impact, if so state whether adverse or positive and for which groups. How you will mitigate any negative impacts. How you will include certain protected groups in services or expand their participation in public life.
No impact

Now consider and detail below how the proposals impact on elimination of discrimination, harassment and victimisation, advance the equality of opportunity and promote good relations between groups. Where there is evidence, address each protected characteristic	
Eliminate discrimination, harassment and victimisation	**Not applicable**
Advance equality of opportunity	**Not applicable**
Promote good relations between groups	**Not applicable**
What is the overall impact?	**Not applicable**
Addressing the impact on equalities	**Not applicable**

From the outcome of this Screening, have negative impacts been identified for any protected characteristics as defined by the Equality Act 2010?   NO
If yes, has a Full Impact Assessment been recommended? If not, why not?
Manager's signature: Christopher Rowlands   Date: February 2021

NHS
Cumbria, Northumberland,
Tyne and Wear
NHS Foundation Trust

Appendix B

Communication and Training Check List for Policies

Key Questions for the accountable committees designing, reviewing or agreeing a new Trust policy

Is this a new policy with new training requirements or a change to an existing policy?	Complete re-write of existing Policy
If it is a change to an existing policy are there changes to the existing model of training delivery? If yes specify below.	Yes see below
Are the awareness/training needs required to deliver the changes by law, national or local standards or best practice? Please give specific evidence that identifies the training need, e.g. National Guidance, CQC, NHS Solutions etc. Please identify the risks if training does not occur.	Local and national changes linked to Agenda for Change Terms and Conditions
Please specify which staff groups need to undertake this awareness/training. Please be specific. It may well be the case that certain groups will require different levels e.g. staff group A requires awareness and staff group B requires training.	All staff require awareness via the online E learning. Managers and existing appraisers can update via attendance at face to face training New appraisers must attend the face to face training
Is there a staff group that should be prioritised for this training / awareness?	New appraisers
Please outline how the training will be delivered. Include who will deliver it and by what method. The following may be useful to consider: Team brief/e bulletin of summary Management cascade Newsletter/leaflets/payslip attachment Focus groups for those concerned Local Induction Training Awareness sessions for those affected by the new policy Local demonstrations of techniques/equipment with reference documentation Staff Handbook Summary for easy reference Taught Session E Learning	Face to face delivered by Training and Development E learning PowerPoint with commentary on the intranet Guidance documents available on the intranet
Please identify a link person who will liaise with the training department to arrange details for the Trust Training Prospectus, Administration needs etc.	Kim Carter – Workforce development manager

12

Cumbria, Northumberland, Tyne and Wear NHS Foundation Trust
CNTW(HR)09 – Staff Appraisal Policy (Non-Medical) – V02.1-Oct 2021

Cumbria, Northumberland,
Tyne and Wear
NHS Foundation Trust

Appendix B – continued

Training Needs Analysis

Staff / Professional Group	Type of Training	Duration of Training	Frequency of Training
New Appraisers	Face to Face	3 hours	Once
Existing Appraisers	E learning Face to face		As required
Appraisees	Interactive Guide		As required

Copy of completed form to be sent to:

Training and Development Department,
St. Nicholas Hospital

Should any advice be required, please contact:- 0191 245 6777 (Option 1)

Appendix C

Monitoring Tool

Statement

The Trust is working towards effective clinical governance and governance systems. To demonstrate effective care delivery and compliance, Policy authors are required to include how monitoring of this Policy is linked to Auditable Standards / Key Performance Indicators will be undertaken using this framework.

CNTW(HR)09 - Staff Appraisal Policy (Non-Medical) - Monitoring Framework		
Auditable Standard / Key Performance Indicators	**Frequency / Method / Person Responsible**	**Where Results and Any Associate Action Plan will be reported To implemented and monitored;** (this will usually be via the relevant Governance Group)
1. Appraisals undertaken against target	Monthly via Performance Report produced by Performance Managers	Corporate Decision Team Workforce, Quality and Performance Sub Group
2. Details of any pay deferrals or activations	Six Monthly Report undertaken by Workforce Transactional Team	Trust-wide Quality and Performance Meeting

The Author(s) of each Policy is required to complete this monitoring template and ensure that these results are taken to the appropriate Quality and Performance Governance Group in line with the frequency set out.

14

Cumbria, Northumberland, Tyne and Wear NHS Foundation Trust
CNTW(HR)09 – Staff Appraisal Policy (Non-Medical) – V02.1-Oct 2021