

**PROFESSIONAL SUPPORT (grade 1 – 3) performance review Form**

The purpose of this Professional Support (Grade 1-3) Performance Review Form is to document the Reviewee’s performance against the principal duties and responsibilities of their role over the previous year in accordance with the University’s Performance Review Policy.

|  |  |  |  |
| --- | --- | --- | --- |
| Reviewee (Employee) |  | Reviewer (Line Manager) |  |
| Reviewee Job Title |  | Reviewer Job Title |  |
| Service / Unit |  | Date of Meeting |  |
|  | Date Form Completed |  |

|  |  |
| --- | --- |
| **RESPONSIBILITY** | **ACTION**  |
| Both parties | Hold review meeting Discuss progress and assess performance against the requirements of the role using evidence and examples where appropriateDiscuss development requirements Agree final version of the form |
| Both parties | To hold mid-point review to discuss progress |

**Notes:**

**Both Reviewer and Reviewee to retain a copy of this PR form.**

**PART 1 – review and assessment of performance against the requirements of the role**

This section is to be used to review and assess the previous year’s performance against the requirements of the role.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  **PERFORMANCE CRITERIA** | **GOOD** Regularly goes over and above the requirements of the role  | **SATISFACTORY**Meets the requirements of the role  | **REQUIRES IMPROVEMENT** Less than satisfactory, requires additional development  | **UNSATISFACTORY**Below the standard reasonably expected |
| **Job Knowledge in line with Job Description**Does the employee have the knowledge to carry out their role effectively?  | 🞏 | Thorough knowledge of own role and related duties and responsibilities  | 🞏 | Acceptable knowledge of own role and related duties and responsibilities  | 🞏 | Lack of knowledge in some areas – can hinder performance  | 🞏 | Inadequate knowledge of own role and related duties and responsibilities  |
| **COMMENTS** Supporting Evidence  |
| **Teamwork**How well does the employee work with others to achieve the objectives of the role and the team?  | 🞏 | Works well with others and responds well to new challenges  | 🞏 | Cooperative and flexible team member  | 🞏 | Usually gets on well with others but can occasionally be unhelpful | 🞏 | Uncooperative and resists change  |
| **COMMENTS** Supporting Evidence  |
| **Customer Service** How well does the employee respond to internal or external contacts who ask for service or information?  | 🞏 | Responds positively to customer requests. Goes above and beyond the requirements of the role  | 🞏 | Responds well to customer requests as and when required  | 🞏 | Responses to customer requests are inconsistent  | 🞏 | Unresponsive to customer requests |
| **COMMENTS** Supporting Evidence  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **PERFORMANCE CRITERIA** | **GOOD** Regularly goes over and above the requirements of the role  | **SATISFACTORY**Meets the requirements of the role  | **REQUIRES IMPROVEMENT** Less than satisfactory, requires additional development  | **UNSATISFACTORY**Below the standard reasonably expected |
| **Planning & Organising** Consider how the employee plans their own work  | 🞏 | Displays the ability to plan own work and that of others, as required  | 🞏 | Organises own workload as required  | 🞏 | Needs to improve some aspects of planning own work  | 🞏 | Does not plan own workload effectively  |
| **COMMENTS** Supporting Evidence  |
| **Standards**How well does the employee follow laid down University procedures and achieve expected standards  | 🞏 | Always thorough requires no supervision or monitoring  | 🞏 | Little supervision & monitoring required  | 🞏 | Requires more frequent monitoring and supervision than expected  | 🞏 | Requires constant supervision and monitoring  |
| **COMMENTS** Supporting Evidence  |
| **Awareness of Health and Safety Requirements** Considerations in regard to safe working practices  | 🞏 | A good attitude to health and safety and encourages safe working practices in others  | 🞏 | Acceptable knowledge of health and safety requirements in relation to own role  | 🞏 | Sometimes needs to be reminded of safety precautions at work  | 🞏 | Disregards basic safety precautions  |
| **COMMENTS** Supporting Evidence  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **PERFORMANCE CRITERIA** | **GOOD** Regularly goes over and above the requirements of the role  | **SATISFACTORY**Meets the requirements of the role  | **REQUIRES IMPROVEMENT** Less than satisfactory, requires additional development  | **UNSATISFACTORY**Below the standard reasonably expected |
| **Punctuality & Attendance** Review of the employees punctuality and attendance  | 🞏 | Always punctual. Rarely absent  | 🞏 | Acceptable attendance levels and is rarely late  | 🞏 | Absence and/or lateness levels are higher than average across the team  | 🞏 | Frequently absent and/or late for work  |
| **COMMENTS** Supporting Evidence  |
| **Continuous Improvement** Commitment to continuous improvement and new and more efficient ways of working  | 🞏 | Actively looks for new ways of working to improve own and departmental efficiency/ performance  | 🞏 | Receptive to feedback; often uses own initiative to improve performance  | 🞏 | Does not always identify and address needs for improvement  | 🞏 | Unresponsive to feedback, improvements and new and more efficient ways of working  |
| **COMMENTS** Supporting Evidence  |

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Overall Performance**   | 🞏 | Well ahead of standard performance  | 🞏 | Satisfactory – meets all the requirements of the role  | 🞏 | Less than satisfactory – requires improvement  | 🞏 | Unsatisfactory – below the standard reasonably expected  |

Please record any general comments with regard to the employees overall performance

|  |
| --- |
| **general Comments**  |
|  |

**PART 2 – professional development, career planning and concluding remarks**

Summary and evaluation of the training and development activities undertaken since the last review (if none, please indicate)

|  |
| --- |
| **pROFESSIONAL development** |
| Development Undertaken  | Method of Development (e.g. online, course attendance, shadowing, team briefing)  | Evaluation of Learning  | Date of Completion  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

During the course of the review meeting the following areas of training and/or development needs have been identified (Please be as specific as possible).

|  |
| --- |
| **pROFESSIONAL development** |
| Description of Training and/or Development Needed  | Development Methods | Timescale | Responsibility and/or Assistance |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

|  |
| --- |
| **cAREER PLANNING / ASPIRATIONS** |
| What are your longer-term career/job plans over the next 1 -3 years? (This is to guide discussion around self-development, and potential work opportunities/training and development. This is also an opportunity to explore your future plans in a broader sense, e.g. employees who may be interested in retirement planning etc.) |
|  |

Concluding remarks by reviewer (line manager):

Concluding remarks by reviewee (Employee):

|  |
| --- |
| **mid year review**  |
| Here, the reviewer and reviewee should review progress against areas for improvement or development from the annual review and comment on the individuals general performance against the performance criteria during the interim period.  |
|  |