

# **Staff Appraisal Policy**

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# **Staff Appraisal Policy**

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#### 1. Introduction

This document outlines the importance of staff development and appraisal, and the key elements, processes and documentation of the Lewisham Clinical Commissioning Groups (CCG's) Appraisal Process – what it is, why it is important and how it works.

### There are five simple steps to managing performance and development:

1. CCG	2.Objective	3. Mid -Year Review	4. Full Year	5. Moderation
Strategic	Setting &		Review	
Planning	PDP			
	Identification			

### 1.1 Equalities

We are committed to a policy of equality in all our employment practices in accordance with the Equality Act 2010 and Human Rights Act 1998 which consolidates existing equality legislation relating to the protected characteristics and strive to eliminate unfair discrimination, harassment, bullying and victimisation. NHS Lewisham CCG will not unlawfully, unfairly or unreasonably discriminate or treat individuals less favourably on the grounds of age, disability, gender reassignment, marriage & civil partnerships, pregnancy & maternity, race, religion or belief, sex and sexual orientation.

#### 1.2 What is an Appraisal Process?

The aim of staff development and appraisal is to meet the needs of the organisation, line manager and individual employee by providing an opportunity for recognition and feedback, and ensuring that the work of all individuals contributes to the attainment of organisational goals and continuous improvement. A successful development and appraisal system is therefore a framework for good management practice.

A core part of the process is agreeing the most appropriate objectives for the year ahead and agreeing the supporting behaviours which will enable achievement of the objective. This involves planning, coaching, feedback, review and recognition. The appraisal establishes a shared understanding about 'what' is to be achieved by the reviewee and 'how' it will be achieved and ensuring that this is linked to team/service objectives. An effective appraisal framework focuses strongly on performance development; ensuring staff have the correct support, tools and mechanisms in place to develop to their full potential.

### 1.3 How does the Appraisal Process work?

The reviewee and reviewer should prepare for the Appraisal Process together through an open and honest objective setting conversation. The objectives should be mutually agreed and align to team targets, and the CCG's corporate objectives and priorities. This is the 'golden thread' where the CCG's objectives are cascaded down

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to directorate and team/service objectives which are then transferred into individual objectives, and meaning that the achievement of individual objectives can be seen to contribute to the overall success of Lewisham CCG.

As part of the Appraisal Process, individual development needs will be agreed and the reviewer and reviewee will work together to implement support mechanisms and opportunities that enable personal and professional development. The Appraisal Process is not an event, it is a process that runs throughout the entire year.

### 1.4 What are the benefits of the Appraisal Process?

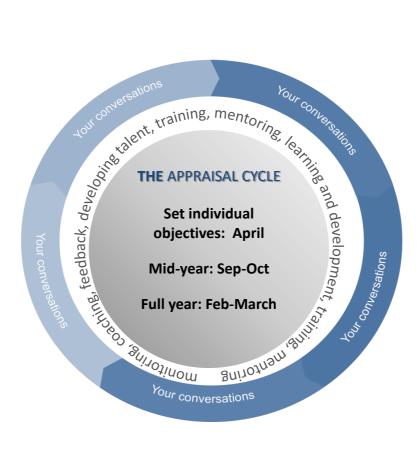
- Organisational: Strengthening the CCG's values, mission and purpose, aligning to strategic goals and achieving its short-term operational priorities and plans, supporting financial planning and efficiency, identifying and mitigating (where possible) potential disruptive staff turnover
- **Department/service:** Clear alignment of objectives within and between teams in the CCG,
- Individual: sustain individual motivation, engagement, job satisfaction and performance, targeted staff development and growth, increased recognition, clear and measurable targets.

### 2. Incremental Pay Progression and the Full Year Appraisal Review

Arrangements for incremental pay progression linked to employee performance, were established from April 2014. The arrangements involve the abolition of the two pay gateways and the introduction of an explicit requirement that progression through all pay points is conditional upon the staff member meeting the required level of knowledge and skills/competencies for their role and that they have demonstrated the required level of performance and delivery during the review period. In addition to this, pay progression through the top two pay points in pay bands 8C, 8D and 9 will be annually earned; please refer to Appendix 1 for more detailed information.

### 3. Stages of the Cycle

The Appraisal cycle is based on an annual cycle. There are a minimum of three meetings a year between the individual and their line manager though the appraisal process should be on-going throughout the year. There will be three formal review periods each year each of which should be documented using the pro-formas contained in Appendix 2. The formal stages are set out below and these will be underpinned by regular informal conversations between the reviewer and the reviewee on the reviewee's performance.



### Stage 1: Objective setting (April – May)

Reviewers and reviewees should take part in an objective setting conversation to discuss and mutually agree objectives and supporting behaviours and skills for the year ahead. Individual objectives should reflect the CCG's corporate objectives (and any other relevant cross-agency key objectives) which will be cascaded to directorates and teams. The reviewee's training and development plan for the coming year should be discussed and agreed and a copy of the personal development plan (PDP) sent to the CCG OD lead to inform the CCG's training and development plan.

### **Incorporating Values & Behaviours**

We have three core values for how we work as a CCG and which are supported by important behaviours:

### 1. Everyone Counts

Lewisham CCG will work and behave in a way that ensures that everyone counts and feels valued.

### We will...

- Engage, listen and communicate effectively
- Be respectful to others in our workplace and in our community
- Work in partnership

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### 2. Openness & Transparency

As an organisation we will strive to be open and transparent in the way we work and make decisions

### We will...

- Share information that is accessible
- Give feedback and accept feedback when offered
- Encourage positive challenge
- Involve others in making decisions and explain

### 3. Learn & Improve

We are a learning organisation that is self-aware of the impact that we can make to improve health for the people of Lewisham.

#### We will...

- Review and reflect on experience to improve
- Contribute to a no-blame culture, accept and learn from mistakes
- Actively learn and participate in development opportunities
- Offer encouragement to others

The 'positive indicators' and 'warning signs' for these behaviours can be found in appendix 3.

Further role-specific skills and knowledge areas may be added by agreement between reviewer and reviewee to focus on any important areas not included above where they may be a priority for the reviewee's role. Suggested competencies that cover the commissioning cycle and management skills in the commissioning context are included in appendix 4.

### Stage 2: Mid-year review (September – October)

Although performance and feedback should be an on-going process the reviewers and reviewees should meet to discuss and record performance against progress for the first six months of the performance year. Wherever possible, supporting evidence or examples should be provided. In preparation, to support the discussion the reviewee should use the supporting documentation to record as a draft progress to date.

### Stage 3: Full-year review (February – March)

By the end of this stage all staff should have participated in an individual full year performance review and have been notified by their reviewer of their overall rating.

There are 3 steps in this stage that must all be completed by the end of March:

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- i. Reviewers and reviewees will take part in the full year review at the end of the performance year
- ii. Provisional rating is signed off by Director
- iii. Reviewer sends end of year summary to CCG OD lead

The reviewee's full year performance should be reviewed against objectives and supporting behaviours, and supporting evidence or examples should be provided. The reviewee's training and development plan should be discussed to identify what training and development needs have been met and the impact they have had upon the reviewee's performance.

Again, in preparation, to support the discussion the reviewee should use the supporting documentation to record as a draft the outcomes and progress during the year.

An assessment will take account of overall performance, recognising that some there is likely to be some variation in the achievement of objectives and behaviours, with a rating as follows:

**A:** Has significantly exceeded expected performance agreed at the start of the appraisal cycle

**B**: Has exceeded expected performance agreed during the appraisal cycle

C: Has met expected performance agreed at the start of the appraisal

**D:** Has not met expected performance agreed at the start of the appraisal (and therefore will not be awarded an increment).

The reviewer will discuss the outcome of the full year review and the provisional rating with their Director for approval of the final rating, who will in turn advise Payroll whether or not an increment will be awarded at the incremental pay progression date.

The reviewer will send a copy of end of year review summary to the CCG OD lead as confirmation that the appraisal cycle for the year has been completed.

### **Stage 4: Moderation**

Two senior managers within Lewisham CCG – The Chief Finance Officer and the Corporate Director will moderate provisional ratings after the completion of full-year reviews. This is to help ensure fairness and quality in the allocation of performance ratings across the different Directorates in the CCG. Please refer to Appendix 5 for more detailed information.

### 4. Roles and Responsibilities

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#### **Chief Officer**

Agreeing corporate objectives with the Governing Body

#### **CCG Directors**

- Commitment to distribute priorities/objectives prior to commencement of the appraisal cycle
- Ensuring all staff in their Directorate participate in the annual Appraisal cycle
- Determining which line managers are responsible for carrying out appraisals
- Ensure the relevant managers attend any available appraisal training
- Collecting development needs for their areas to feed into the CCG learning and development plans
- Confirming to payroll whether incremental pay awards are to be made for the members of their directorate

### **Line Manager/Appraisers** will be responsible for:

- Attending required appraiser training and refresher training
- Arranging and carrying out appraisals with the individual within the cycle timescales and in accordance to the policy in respect of setting objectives, identifying appropriate supporting behaviours, agreeing a personal development plan, and reviewing performance
- To share the responsibility with individuals to collect evidence for all discussions
- Commitment to not cancel appraisal discussions at short notice and to provide sufficient time for them
- Supporting individuals in their agreed development activities and following the
  activities, discussing with them how their new knowledge and skills can be
  implemented in their role
- Completing the appraisal documentation with the individual
- Maintaining appraisal records, to be kept confidentially in the individual's personal file
- Informing their own manager of any unresolved issues or difficulties arising from appraisal discussions
- Confirming to their director the outcomes of the full year review for the individuals they appraise

### **Individuals** will be responsible for:

- Attending any available appraisal training
- Responsible for collecting evidence for all discussions
- To prepare for all appraisal discussion, to include drafting and outlining:
  - Objective ideas
  - Knowledge and Skills areas strengths & development areas
  - PDP proposals

- General review on how you've been doing
- Contributing to and participating in the review of their own development and progress towards agreed objectives
- Liaising with their manager to ensure regular meetings take place as required in the appraisal process
- Reflecting on progress towards their objectives and PDP and keeping examples or evidence to demonstrate the skills and knowledge being applied to meet their objectives
- Alerting their manager/reviewer promptly should issue arise that might impact on their progress towards meeting their objectives
- Informing their Appraiser's manager should the annual review meetings not be taking place, or raising any unresolved issues from the review
- Completing learning and development activities to meet the agreed PDP and objectives with support of the line manager
- Implementing new skills and knowledge learned in their role
- Completing relevant documentation with Appraiser and keeping copies of these

### 5. What needs to be done?

Both the reviewee and reviewer should familiarise themselves with the appraisal process; training on the scheme will be made available at regular intervals and staff should attend the appropriate level of training.

Any questions should be forwarded to the HR Lead for the CCG whom will provide clarification and further information as required.

### 6. Appeals/Disagreements

If an individual and their manager cannot agree on the objectives being set, the objective setting process, outcome of the mid-term or full-year development reviews, both parties have the right to seek support on an informal basis from a third party (e.g from another reviewer in the CCG or someone from the Human Resources team). Should there still be disagreement, the manager's manager will need to become formally involved to try to resolve the disagreement. The reviewer's manager should look at information from both parties and come to an objective, non-discriminatory decision. If this process cannot address the problem, then the individual can pursue their case through the grievance procedure. Directors should seek resolution, in accordance with the above process, by meeting with either a member of the HR team or a Director colleague.

The process is depicted as follows:

Individual has disagreement about aspect of the appraisal process and seeks

### **Informal Resolution**

Meet with 3rd party e.g. HR or another reviewer in the CCG



Individual feels issue is not resolved and seeks
Formal Resolution

Meet with manger's manager/Director (not previously involved with the case)



Individual feels issue is not resolved Pursues through **Grievance Procedure** 

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### Appendix 1 – Agenda for Change Pay Circular 2/2013

### **AfC Incremental Progression Guide**

Incremental pay progression for all pay points 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 and delivery. This guide sets out the principles and criteria for applying the incremental progression policy.

### 1. Principles

The following principles will apply:

- Local appraisal, performance and development reviews will be consistent with the CCG's objectives and the NHS Constitution
- Regular appraisal, performance and/or development reviews will continue to be
  the basis for determining whether an individual has met the standards required
  of them locally for pay progression, as set out in their local policies
  - All those staff demonstrating and applying the required levels of performance and delivery consistently during the performance review period will benefit from incremental pay progression
  - In assessing an individual's performance, the CCG will consider not just whether the objectives have been achieved (or not) but also how they are achieved
  - Progression into the annually earned pay points and the last two pay points in pay bands 8C, 8D and 9, will be available to all members of staff in these bands subject to the criteria set out in this guide
  - Individuals will have the right to seek a review of any decision where the required level of performance is deemed not to have been met
  - Should apply equally to all staff covered by this agreement
  - Every line manager undertaking appraisal should have access to appropriate training and development in relation to undertaking appraisal and their equality responsibilities.

#### 2. Criteria

The CCG will operate an effective process for objective, evidence based performance appraisal, development and review, recognising team work wherever this is appropriate. Individual performance will need to be monitored throughout the year so that under performance is identified by all concerned and addressed appropriately as soon as possible. The schemes for pay progression will take account of the following:

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- The KSF or other relevant competency frameworks will continue to be the basis for the annual systems of review and development for staff
- Information on performance throughout the year will need to be taken into
  account in the performance appraisal and development review process, so
  that undue influence of experiences close to the review are avoided. Timely
  recognition of accomplishment (or feedback about poor performance) is
  more effective/motivational. Managers and staff will need to build a picture of
  performance during the course of the review period
- In assessing an individual's performance, line managers should be mindful
  of factors that have been outside the control of individual staff

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### Appendix 2

### APPRAISAL FORM

### **Summary Information – Objective Setting**

Reviewee's name	
Reviewer's name	
Reviewee's job title and directorate/service/team	
Reviewee's AfC grade	
Objective setting conversation date	
Mid – year review date:	
Full -year review date (to be completed before the	
end of March)	

### Notes:

STAGE 1 objective setting session: use forms on pages 14-18

STAGE 1 Personal Development Plan: use forms on page 17-18

STAGE 2 Mid-year review: use forms on pages 19-22

**STAGE 3 Full – year review:** use forms on pages 23-27

Please refer to the summary descriptions of the CCG values and behaviours and commissioning competencies.

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STAGE 1: Objective Setting 1: 'the what'

In line with good practice reviewers and reviewees should aim to identify approximately 5 objectives

Objective	Steps towards achieving objective	Timescale	Success Criteria
1.			
2.			
3.			
4.			
5.			

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STAGE 1: Objective Setting 2: behaviours 'the how'

CCG Values & Behaviours Group	How will these behaviour be demonstrated? Which objectives does it relate to?
<b>Everyone Counts</b>	
We will	
<ul> <li>Engage, listen and communicate effectively</li> <li>Be respectful to others in our workplace and in our community</li> <li>Work in partnership</li> </ul>	
Openness & Transparency	
We will	
<ul> <li>Share information that is accessible</li> <li>Give feedback and accept feedback when offered</li> <li>Encourage positive challenge</li> <li>Involve others in making decisions and explain</li> </ul>	

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## Learn & Improve We will... Review and reflect on experience to improve Contribute to a no-blame culture, accept and learn from mistakes Actively learn and participate in development opportunities Offer encouragement to others Additional Any additional, role-specific dimensions may be added by agreement between reviewer and reviewee to focus on core skills not included above such as specific commissioning, management, technical or project related skills

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### **STAGE 1: Personal Development Plan**

Name	Directorate

## A copy of this section of the form to be sent to CCG lead for Organisational Development

What are my areas for personal development	Priority (H/M/L)	What activities do I need to undertake to achieve these?	What support/resources do I need to achieve my personal development?	Target date for achieving	Actual Date of completion

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**STAGE 1: Statutory and Mandatory Training Plan** 

What are my Statutory and Mandatory training requirements?	Frequency required	Target date for completing training	Actual date of completion
1. Equality & diversity	Every three years		
2. Health, Safety and security	On-line annual		
	Face to face every		
	three years		
3. Counter Fraud and anti-	Annual		
bribery			
4. Information governance	Annual		
5. Fire safety	On-line annual		
	Face to face every		
	three years		
6. Safeguarding children Level 1	Every three years		
7. Safeguarding adults Level 1	Every three years		
8. Moving and handling	Every three years		
9. Prevent Awareness	Once		

### A copy of this form should be sent to CCG lead for Organisational Development

Reviewer's name (printed)	Reviewee's name (printed)
Reviewer's signature	Reviewee's signature

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### **STAGE 2: Mid - Year Review**

## Mid-Year Review 1: Objectives 'the what'

Objective	Success Criteria	Reviewee's mid-year progress comments	Reviewer's mid-year progress comments
1.			
2.			
3.			
4.			
_			
5.			

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### STAGE 2: Mid - Year Review

### Mid - Year Review 2: Behaviours 'the how'

CCG Values & Behaviours Group	Demonstration of these behaviours
<b>Everyone Counts</b>	
We will	
<ul> <li>Engage, listen and communicate effectively</li> <li>Be respectful to others in our workplace and in our community</li> <li>Work in partnership</li> </ul>	
Openness & Transparency We will	
<ul> <li>Share information that is accessible</li> <li>Give feedback and accept feedback when offered</li> <li>Encourage positive challenge</li> <li>Involve others in making decisions and explain</li> </ul>	

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## Learn & Improve We will... Review and reflect on experience to improve Contribute to a no-blame culture, accept and learn from mistakes Actively learn and participate in development opportunities Offer encouragement to others Additional Any additional, role-specific dimensions may be added by agreement between reviewer and reviewee to focus on core skills not included above such as specific commissioning, management, technical or project related skills

## Mid - Year Review 3: Development

Summary of progress with personal development plan and statutory and mandatory training		

Reviewer's name (printed)	Reviewee's name (printed)
Reviewer's signature	Reviewee's signature

### **STAGE 3 - FULL YEAR REVIEW**

## Full Year Review 1: Objectives 'the what'

Objective	Success Criteria	Reviewee's full-year review comments	Reviewer's full-year review comments
1.			
2.			
3.			
4.			
5.			

### Full Year Review 2: Behaviours 'the how'

CCG Values & Behaviours Group	Demonstration of these behaviours
Everyone Counts	
We will	
<ul> <li>Engage, listen and communicate effectively</li> </ul>	
<ul><li>Be respectful to others in our workplace and in our community</li><li>Work in partnership</li></ul>	
Onenness & Transparency	
Openness & Transparency	
We will	
<ul> <li>Share information that is accessible</li> <li>Give feedback and accept feedback when offered</li> <li>Encourage positive challenge</li> <li>Involve others in making decisions and explain</li> </ul>	
'	

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## Learn & Improve We will... Review and reflect on experience to improve Contribute to a no-blame culture, accept and learn from mistakes Actively learn and participate in development opportunities Offer encouragement to others Additional Any additional, role-specific dimensions may be added by agreement between reviewer and reviewee to focus on core skills not included above such as specific commissioning, management, technical or project related skills

### STAGE 3 - FULL YEAR REVIEW SUMMARY

## A copy of this section of the form to be sent to CCG lead for Organisational Development

Name	Directorate

Full Year Review - Ratings and Assessment with Definitions:

A: Has significantly exceeded expected performance agreed at the start of the appraisal cycle

B: Has exceeded expected performance agreed during the appraisal cycle

C: Has met expected performance agreed at the start of the appraisal

**D**: Has not met expected performance agreed at the start of the appraisal (and therefore will not be awarded an increment)

The reviewee's performance will be assessed against their objectives, together with their supporting behaviours and skills and based on evidence.

Reviewee's comments	
Reviewer's comments	

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Overall Rating (A-D)	Α	В	С	D
AFC Incremental Progression		Approved		Not Approved

Reviewer's name (printed)	Reviewee's name (printed)
Reviewer's signature	Reviewee's signature
Date	Date

## **Director Sign-off**

Director's name (printed)
Director's signature
Date

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## **Appendix 3 Lewisham CCG Values & Behaviours**

## 1. Everyone Counts

Lewisham CCG will work and behave in a way that ensures that everyone counts and feels valued.

We will	Positive Indicators	Warning Signs
Engage, listen and communicate effectively	2-way interaction with other parties using appropriate and varied channels and ways of communicating  Checks understanding  communication is adapted to take account of others' culture, background and preferred way of communicating	Over-reliance on particular type of communication such as e-mail.
Be respectful to others in our workplace and in our community	Take into account inequalities, support equalities and be responsive to diversity	Failure to take into account the different needs and perspectives of others – colleagues in the CCG, from other agencies/organisations, patients and the public
Work in partnership	Proactively connect with others inside and outside the organisation	Planning/activity/decision-making is carried out in isolation

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## 2. Openness & Transparency

As an organisation we will strive to be open and transparent in the way we work and make decisions.

We will	Positive Indicators	Warning Signs
Share information that is accessible	Take responsibility for sharing information, keeping information up to date	Information is out of date or inaccurate  Information is hard to follow or not understood
Give feedback and accept feedback when offered	Views/opinions are sought from others Suggestions are made	Resistance to views/opinions of others
Encourage positive challenge	Welcome suggestions or questions  Test or provide an alternative viewpoint to ideas	No opportunities are provided for challenge  Alternative viewpoints are dismissed without consideration
Involve others in making decisions and explain	Decision-making includes those who may be affected by decisions  Information on decisions made that provides the reasons	Decisions are made in isolation (individually or small groups)  No information is provided on the outcomes or reasons for decisions

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## 3. Learn & Improve

We are a learning organisation that is self-aware of the impact that we can make to improve health for the people of Lewisham.

We will	Positive Indicators	Warning Signs
Review and reflect on experience to improve	In discussions (formal or informal) (1 to 1 or team) able to explain and suggest improvement needs and actions	No apparent insight to areas for improvement
Contribute to a no-blame culture, accept and learn from mistakes	Take steps to avoid repeating mistakes  Ask for and offer help to others when needed	Focus on criticism and finding fault with others and their work
Actively learn and participate in development opportunities	Follow-up on areas identified in PDP and application of learning	Development is not completed and/or is cancelled
Offer encouragement to others	Seek to understand motivations of others  Provides constructive feedback to others	

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### **Appendix 4 Commissioning Competencies**

The following tables provide descriptions for competencies that cover the commissioning cycle. Managers will determine with the individuals in their teams the most relevant competencies for their roles and the level of expertise required

Competencies	Definition
Change management	Able to manage the process of deploying and integrating change programmes into the organisation in a way that is sensitive to and fully compatible with operations.
	Able to build or contribute to a successful culture of change.
	Able to define the change, ensures the organisation is ready for change, makes change happen and ensures that the organisation accepts and implements the change.
	Able to effectively manage the emotional implications of change management.
Resource investigation	Understanding of where to access specialist information or consultancy/market research services.
Healthcare requirements analysis	Able to effectively forecast the needs/wants of particular healthcare areas and ensure that capacity planning is appropriate to ensure delivery.
	Prioritises actions, negotiates successful outcomes, and effects changes in direction, including changes in supply.
Healthcare systems analysis	Understands care and patient pathways currently in place and the potential development of those likely to be required to meet future needs.
Healthcare solutions design	Able to scope and design healthcare solutions for care/patient pathways drawing on own

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	understanding of healthcare system and supplier/partner landscape.			
	Maintains an active short, medium and long-term view of the design of healthcare solutions to meet healthcare requirements analysis.			
Programme and project	Able to accurately specify programmes of work to address improvement areas.			
management	Develops project definitions within programmes of work to deliver improvement items.			
	Effectively plans, tracks and manages project delivery activity.			
Stakeholder analysis	Able to analyse all stakeholder interests to address a given healthcare issue and design an appropriate engagement strategy/approach.			
	Able to understand aims and objectives of stakeholders, what they want and how effective their business is – stakeholders include the public, patients, providers, clinical and managerial staff.			
Partnership working	Builds effective partnerships with suppliers and partner agencies (such as local authorities and providers) throughout all stages of the commissioning cycle.			
	Ensures risk mitigation through building alternative/backup partner arrangements.			
	Develops joint strategy with partner agencies.			
Patient/public engagement	Executes effective engagement approaches to understand, quantify and analyse healthcare requirements.			
	Employs a variety of engagement methods appropriate to patient or public grouping. For example, surveys, workshops, observation, public meetings.			
Clinical engagement	Able to build strong relationships with clinical leaders.			

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	Capacity to understand clinical issues and communicate effectively with clinicians.				
	Able to identify and engage with expert clinicians when defining services and outcomes.				
Procurement strategy development	Able to develop and implement market sector procurement strategies, ranging from single deal contracts to longer term regional commodity/service contracts.				
	Aligning procurement strategies with overall strategy, and maximising the contribution of suppliers.				
	Understanding the market: its historic, current and future capabilities; supply chains; and carrying out supply and demand analyses.				
	Developing relationships that prevent unnecessary supplier dependencies, with contingency plans for exit that minimises switching costs.				
Procurement management	Manages the procurement process including the following:				
Procurement management	<ul> <li>Manages the procurement process including the following:</li> <li>Sourcing – engaging with specialists, who are accountable for making market approaches and commitments, to analyse the market and identify sourcing options.</li> </ul>				
Procurement management	<ul> <li>Sourcing – engaging with specialists, who are accountable for making market</li> </ul>				
Procurement management	<ul> <li>Sourcing – engaging with specialists, who are accountable for making market approaches and commitments, to analyse the market and identify sourcing options.</li> <li>Effective contracting – including an understanding of contract law, the role of contract</li> </ul>				
Effective negotiation	<ul> <li>Sourcing – engaging with specialists, who are accountable for making market approaches and commitments, to analyse the market and identify sourcing options.</li> <li>Effective contracting – including an understanding of contract law, the role of contract specialists and associated contract negotiation.</li> <li>Supplier performance measurement &amp; management – getting best value from</li> </ul>				
	<ul> <li>Sourcing – engaging with specialists, who are accountable for making market approaches and commitments, to analyse the market and identify sourcing options.</li> <li>Effective contracting – including an understanding of contract law, the role of contract specialists and associated contract negotiation.</li> <li>Supplier performance measurement &amp; management – getting best value from relationships with suppliers and contractors.</li> <li>Plans the negotiating strategy, utilising leverage, identifying risks, and developing options to</li> </ul>				

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Financial analysis	Applies financial knowledge, tools and analysis techniques to determine cost effectiveness of service provision options.  Uses techniques such as supply chain analysis, portfolio analysis and financial modelling techniques to analyse current and future service provision choices.
Supplier performance management	Understands the data required for assessment of providers and its collection via third parties.  Able to use data collected to manage suppliers.
Service management analysis	Able to work as an integral part of a commissioning team to identify and implement opportunities for improving service performance.  Able to manage the collection and analysis of supplier performance information against contractual requirements and expectations.

	Direction setting - driving the	Able to willingly take the lead, including painting a picture which inspires others to contribute in a
	commissioning agenda	way that ensures alignment of goals.
		Able to use a range of styles to influence and gain involvement, for example coaching others to help their development, facilitating others to play to their strengths.
		Understands the strategic context and can define the vision to be clearly communicated and operationalised. Delivers the strategic vision appropriately in the given context.

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Influencing/ persuading	Understands how the organisation functions and identifies key levers to effectively get things done.  Understands individual motivations and how to work effectively with others to achieve an outcome.
Horizon scanning	Able to work effectively with medium and long-term planning scenarios.  Scans for healthcare innovation.  Identifies key information and trends which will determine future requirements.
Decision making (prioritisation)	Able to make informed and effective decisions, while considering the merits of differing positions or opposing viewpoints.  Anticipates future situations and plans ahead to meet them.  Clarifies key issues in complex and ambiguous situations.  Uses innovative approaches to understand implications of diverse information.  Takes appropriate risks whilst managing the implications of action.

### **Appendix 5 - Moderation Process**

#### What is moderation?

Moderation is a process that evaluates the Appraisal process to ensure consistency and fairness in the allocation of ratings across the CCG. The moderation process may prompt further analysis of ratings to ensure it is an accurate reflection of the individuals' performance. In such cases further evidence is required to support the reviewee's performance against objectives and support behaviours.

The moderation process should focus on:

- Quality of evidence to support ratings
- Correlations between role and directorate/service performance
- How the overall distributed ratings compare with the CCG expected distribution

#### What are the benefits to CCG?

Moderation helps to ensure fairness and quality in the allocation of performance ratings across the different directorates/services/teams within the CCG.

### Who is involved in the moderation process?

The moderation process will be carried out by the Chief Finance Officer (CFO) and Corporate Director within Lewisham CCG. The HR lead will forward the allocated ratings of all staff in the CCG by Directorate.

### What are the key principles for the moderation process?

The key principles for the moderation process are as follows:

- The full-year conversation assessment process should be complete for the whole of CCG before the moderation process begins.
- The performance ratings from the full-year conversation are to be allocated before the moderation process begins.
- The moderation process should highlight areas of concern or required improvement in the future.

### When should moderation take place?

Moderation should take place at the end of the performance year, after the full-year review and allocation of ratings have taken place and the full year review conversation content and rating has been signed off by the manager. This is likely to be in **April/May**.

### The Stages to Moderation

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- HR Lead to forward schedule of allocated ratings in each Directorate
- The CFO and Corporate Director will select a 'sample' of Appraisal Forms for further review.
- Selected Appraisal Forms are made anonymous.
- Each level of moderation will be supported by the HR Lead and review selected Appraisal Forms to check for:
  - Ability of evidence to support ratings
  - o Correlations between role and directorate/service performance

If any issues are identified during the moderation meeting, performance reviewers will be asked to clarify evidence to support ratings

### **Questions to consider:**

At each stage of the moderation process the following types of questions should be considered when reviewing Appraisal performance ratings and evidence:

### a. Quality of evidence to support ratings

The reviewer should use the following questions to assess the evidence to ensure that it is a true and complete reflection of the reviewee's performance:

- Does the evidence appear to come from a reliable source?
- Is the evidence accurate?
- Is the evidence complete, where possible?
- Is the evidence up-to-date and current?

To check data quality the moderator should consider the following questions:

- Is there enough evidence to support Appraisal performance ratings for the objectives which were set?
- Is there enough evidence to support Appraisal performance ratings for behaviours?

### b. Correlations between role, grade, directorate and service performance

Performance data will vary across directorate/services but will usually be information such as:

- KPIs
- Budgets/financial results
- Customer satisfaction information/feedback

Depending on the data available, the issues may vary but the following types of questions should be considered:

• Is the data relevant? Should there be a correlation between the data and Appraisal performance ratings?

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- Is the data reliable?
- Can the data provide strong evidence to support strong/poor Appraisal performance ratings?

### c. General questions

These general questions should also be considered:

- How do the Appraisal performance form ratings of the reviewees in different directorates/services compare?
- Should there be similarities/differences? Why?

### **Key issues arising from moderation**

Some key issues which may arise from the moderation process are:

- Overly generous Appraisal performance ratings; reviewers will be unable to effectively manage poor performance or retain credibility with excellent performers if they pursue this approach.
- Halo/horns effect; being influenced by one or two very positive or very negative incidents which drives the performance ratings – reviewers should ensure performance is considered on an overall and evidenced basis.
- Attribution; explaining away good or bad performance on external factors reviewers may be looking to external factors to justify performance ratings, these should only be considered where relevant and the focus should be on individual performance.
- **Central tendency**; rating everyone more or less the same and being reluctant to use the higher and lower extremes of the scale.
- **Strictness**; being overly harsh reviewers should be reasonable and should guard against setting the bar too high or disregarding reviewee evidence.
- **Inadequate information**; ratings based on little or no knowledge of the individual/service area.

Any issues arising should be fed back to the performance reviewers immediately for future assessment.

### **Outcomes of moderation meetings**

The moderation notes should document key issues discussed and will be used as part of the moderation record. This will be presented to the CCG Management Team.

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### **Appendix 6: Equality Impact Assessment**

This is a checklist to ensure relevant equality and equity aspects of proposals have been addressed either in the main body of the document or in a separate equality & equity impact assessment (EEIA)/ equality analysis. It is not a substitute for an EEIA which is required unless it can be shown that a proposal has no capacity to influence equality. The checklist is to enable the policy lead and the relevant committee to see whether an EEIA is required and to give assurance that the proposals will be legal, fair and equitable.

The word proposal is a generic term for any policy, procedure or strategy that requires assessment.

	Challenge questions	Yes/No	What positive or negative impact do you assess there may be?
1.	Does the proposal affect one group more or less favourably than another on the basis of:		
	<ul><li>Race</li></ul>	No	
	<ul><li>Pregnancy and Maternity</li></ul>	No	
	■ Sex	No	
	<ul> <li>Gender and Gender Re-Assignment</li> </ul>	No	
	<ul> <li>Marriage or Civil Partnership</li> </ul>	No	
	<ul><li>Religion or belief</li></ul>	No	
	<ul> <li>Sexual orientation (including lesbian, gay bisexual and transgender people)</li> </ul>	No	
	<ul><li>Age</li></ul>	No	
	<ul> <li>Disability (including learning disabilities, physical disability, sensory impairment and mental health problems)</li> </ul>	No	
2.	Will the proposal have an impact on lifestyle?	No	
	(e.g. diet and nutrition, exercise, physical activity, substance use, risk taking behaviour, education and learning)		
3.	Will the proposal have an impact on social environment? (e.g. social status, employment (whether	No	
	paid or not), social/family support, stress,		

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	income)		
4.	<ul> <li>Will the proposal have an impact on physical environment?</li> <li>(e.g. living conditions, working conditions, pollution or climate change, accidental injury, public safety, transmission of infectious disease)</li> </ul>		
5.	Will the proposal affect access to or experience of services?  (e.g. Health Care, Transport, Social Services, Housing Services, Education)	No	