Joint Policy for Cumbria Partnership Foundation Trust & North Cumbria University Hospital NHS Trust

Policy Title: Quarterly TALKS (formerly Appraisal)

<table>
<thead>
<tr>
<th>Reference</th>
<th>POL/WOR/025</th>
</tr>
</thead>
<tbody>
<tr>
<td>Version</td>
<td>1.0</td>
</tr>
<tr>
<td>Date Ratified</td>
<td></td>
</tr>
<tr>
<td>Next Review Date</td>
<td>01/10/2022</td>
</tr>
<tr>
<td>Accountable Director</td>
<td>Director of Workforce and OD</td>
</tr>
<tr>
<td>Policy Author</td>
<td>CLIC – Workforce and OD</td>
</tr>
</tbody>
</table>

Please note that the Intranet / internet Policy web page version of this document is the only version that is maintained.

Any printed copies or copies held on any other web page should therefore be viewed as “uncontrolled” and as such, may not necessarily contain the latest updates and amendments.

Cumbria Partnership NHS Foundation Trust | North Cumbria University Hospitals NHS Trust
The Trust(s) are committed fully to compliance with the requirements of the General Data Protection Regulations (GDPR) 2016 and the Data Protection Act (DPA) 2018. The GDPR and DPA legislation aims to balance the requirements of organisations to collect, store and manage various types of personal data in order to provide their services, with the privacy rights of the individual about whom the data is held. The GDPR and DPA legislation covers both manual and computerised records in any format, where the record contains details that can identify, directly or indirectly data on a natural person or persons. The DPA sets out principles which must be followed by those who process data; it gives rights to those whose data is being processed.
**SUMMARY & AIM**

We want staff to be recognised, encouraged, supported and valued in delivering excellent health and care for the people of Cumbria.

This policy sets out the requirements for ongoing and annual review that assists employees in realising and attaining their full potential – being their best self.

The ongoing and annual reviews undertaken with their managers will ensure everyone’s work is linked to the overall objectives, vision and values and behaviours of the organisation.

In areas where management supervision has been delivered. This policy brings these two conversations together.

**KEY REQUIREMENTS**

- All qualifying employees will take part in four reviews annually (Quarterly TALKS) the one of these will be recorded as the annual appraisal.
- Each review is framed on conversation’s covering:
  - Talent – performance, values and behaviours, career
  - Appreciation – Glimpse of Brilliance, appreciation of self and work of others
  - Learning and Development – current needs to meet objectives and grow skills, mandatory training
  - Kaizen – continuous small service improvements
  - Support – Wellbeing, working arrangements, leave etc.
- All new employees will receive a review and set objectives within the first 3 months of employment.
- All reviewers (appraisers) to meet compulsory assessment to ensure consistency in delivery of an effective TALKS (pg. 7).
- All employees to be given at least 1 months’ notice of dates and time of all Quarterly TALKS and only moved in exceptional circumstances.
- The process for the Quarterly TALKS that take place will contain 4 elements. (see flow chart pg. 4).
- Objectives will be agreed and set annually and reviewed quarterly. Objectives must be aligned to the employee’s work area, care group, organisation and system priorities.
# TABLE OF CONTENTS

SUMMARY FLOWCHART – ................................................................. 5

1. INTRODUCTION ........................................................................... 5

2. PURPOSE ..................................................................................... 7

3. POLICY DETAILS.......................................................................... 7
   3.1 Overview ..................................................................................... 7
   3.2 Timing ......................................................................................... 8
   3.3 Reviewer (Appraiser) ................................................................. 8
   3.4 Values Based Review ............................................................... 9
       3.4.1 Preparation and discussion ............................................... 9
   3.5 Setting Objectives ..................................................................... 9
   3.6 New Starters ............................................................................. 9
   3.7 Staff with more than one assignment / role ......................... 9
   3.8 Appraisal and pay structure for Agenda for Change .......... 10

4. TRAINING AND SUPPORT............................................................ 10

5. PROCESS FOR MONITORING COMPLIANCE............................ 11

6. REFERENCES: .............................................................................. 11

7. ASSOCIATED DOCUMENTATION: .......................................... 11

8. DUTIES (ROLES & RESPONSIBILITIES): .................................. 11
   8.1 Chief Executive / Trust Board Responsibilities: .................... 11
   8.2 Executive Director Responsibilities – Director of Workforce and OD ........ 12
   8.3 Managers Responsibilities: .................................................... 12
   8.4 Staff Responsibilities: ............................................................ 12
   8.5 Approving Committee Responsibilities: .................................. 12

9. ABBREVIATIONS / DEFINITION OF TERMS USED .......... 12

DOCUMENT CONTROL ........................................................................ 13
SUMMARY FLOWCHART –

**TIME LINE** (April - Sept = Annual Appraisal window)

*2x Quarterly TALKS. take place one recorded as Appraisal on ESR both recorded using TALKS paperwork*

---

**STEP 1: Preparation**

- Brief self and or team on business and service priorities, give one month’s notice to allow for preparation time
- Review last quarters T.A.L.K.S
- Consider & acknowledge current training, professional requirements, guidelines and current organisational direction and campaigns
- Allocate sufficient time & provide privacy and ensure reviewer meets compulsory assessment criteria

**STEP 2: Undertake the conversation**

- Reflect on what has gone well & what has been tricky, and on reflection what might of done differently
- Discuss the extent to which the individual meeting the current objectives
- If relevant set agree new objectives Identify the link to the 4S’s, Staff, System Working, Service Quality, Sustainability and align to those of the joint business priorities
- Use template document (one booklet per annum) both parties hold a copy.
- Ensure each section – Talent, Appreciation, Learning and Development and Support is reviewed and PDP, objectives updated where relevant

**STEP 3: Effective and Meaningful**

- Use guidance documents to aid both staff member and the reviewer
- Reviewers to review own developments needs for next quarterly TALKS and seek training etc. as required.

**STEP 4: Recording TALKS**

- To allow the Trust to provide accurate compliance rates and for payroll purposes one Quarterly TALKS held during the appraisal window (April – Sept) must be recorded in line with latest ESR guidance.
- All four TALKS to be recorded using TALKS document with individual and reviewer holding a copy.
1. INTRODUCTION

There is considerable evidence across both the NHS and other organisations that supports the role of regular appraisal, performance reviews and personal development as a key factor supporting staff to deliver high quality care.

When staff engage in a well-structured performance review (appraisal), where clear objectives are set, the review is helpful in improving how the employee does their job and the employee feels valued, there are significant benefits for both the Trust and individual. Effective review’s and supportive line management have been identified as particularly important in promoting staff engagement and have significant associations with patient satisfaction, patient mortality, infection rates, staff absenteeism and turnover (West, M & Dawson, J, 2012, Kings Fund 2013 & 2014).

This policy applies to all (Agenda for change) AFC staff (excl. Bank contracts) who work at North Cumbria University Hospital Trust (NCUHT) and Cumbria Partnership Foundation Trust (CPFT).

The Trust(s) have adopted an approach of four reviews a year and will be referred to as Quarterly TALKS one of which will be classed as the annual appraisal. The review will be framed around the T.A.L.K.S. acronym which refer to conversation subject areas, Talent, Appreciation, Learning and Development, Kaizen (continuous service improvement) and Support.

![Diagram of T.A.L.K.S. acronym]

Business Priorities
Values and Behaviours
Performance Planning (CGIMs/A3s)
Professional Standards
Quarterly T.A.L.K.S
2. PURPOSE

The aim is to create a partnership approach between staff and line managers where line managers are supported to make the experience as positive as possible and where staff are supported to take shared responsibility for showing how they meet the required standards (values and behaviours, aligning objective to those for the organisation, performance and contribution to meeting individual objectives).

All staff will be asked to reflect and give examples of how they demonstrate the Trust values. The conversations will identify the areas for personal development, objective setting and identify training required to meet the objectives and will be aligned with individual, team, Care Group and Trust priorities (golden thread).

This policy sets out the requirements for employee annual and ongoing reviews to assist employees in realising and attaining their full potential - while ensuring everyone’s work is linked to the overall objectives, vision and expected values and behaviours of the Trust.

These ongoing reviews will replace any past requirement for management supervision. However, in areas where management supervision happens more frequently, then this practice is encouraged to continue.

3. POLICY DETAILS

3.1 Overview

A person centred approach using the documentation (available on staff web pages) has been adopted by the Trust(s) and reflects the importance that our ‘values and behaviours framework’ has within the organisation and underpins all the work that we do and the culture we aspire to. It will be the primary framework that is used in reviewing employee performance.

Quarterly TALKS should be linked to outcomes from supervision, professional revalidation / re-registration. It may also include the Key Skills Framework (KSF) or Healthcare Leadership model to discuss expected standards of practice in the role.

It is ultimately the manager’s responsibility to ensure all employees for whom they hold responsibility have an annual appraisal with reviews. (Refer to AFC New Pay framework). One of the TALKS that takes place during the appraisal window of April to September should be recorded as the annual appraisal. Managers may delegate the process to an appropriate level senior employee within their team, providing they meet the compulsory assessment (pg.7), and hold sufficient knowledge which has been forged via a working relationship with the person whom they will review.

It is expected that both the manager and employees will hold a copy of the documentation.
3.2 Timing

The process is quarterly. (Where management supervision happens more frequently the minimum requirement is for the TALKS framework to be used quarterly).

As part of the business planning cycle one of the TALKS during April - September will be classed as the annual appraisal and recorded on ESR as appraisal.

It is advised that all line managers have their TALKS booked in a timely manner with the required minimum of 1 months’ notice.

Where an employee is moving internally it is the receiving manager’s responsibility to ensure this is arranged. It may be necessary to review and amend as appropriate any objectives set in a previous work area on commencement and/or set new objectives for the new area of work. It may also be relevant for a discussion on progress made against agreed actions with the outgoing manager and employee.

To be GDPR compliant managers/reviewers should discard Quarterly TALKS paperwork after 2 calendar years (i.e. 2019/2020 paperwork should be discarded in April 2022)

3.3 Reviewer (Appraiser)

A meaningful conversation from a reviewer using the Trust’s approach to supporting staff demonstrates our commitment to developing staff. To support the assurance in the reviewer/appraiser’s ability to consistently deliver high quality reviews the criteria below should be applied to each review during their quarterly TALKS (compulsory assessment).

<table>
<thead>
<tr>
<th>Reviewer criteria for practice:</th>
<th>Has read current policy (this policy) and guidance</th>
<th>Has attended any relevant Trust training in last 3 years</th>
<th>Is up to date on Trust priorities and Care Group/Team objectives</th>
</tr>
</thead>
<tbody>
<tr>
<td>As assurance of quality standards all reviewers will meet all of the above criteria.</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Details of training that the trust recognises as giving compliance please refer to guidance notes.

It is usual for the line manager to hold the Quarterly TALKS however this can be delegated to an appropriate level senior employee within the team providing they meet the assessment criteria.

(To enable reviewers to fulfil this requirement where they are non-compliant with this policy, there will be a grace period of 12 months from the policy approval date in which to undertake one of the approved training offers. This is to allow those who currently undertake appraisal to continue. Those new to appraising or reviewing employee performance should access training prior to commencing quarterly TALKS in a timely manner to be able to meet the policy requirements).
3.4 Values Based Review

A meaningful conversation delivered in a coaching style will be the basis of the Quarterly TALKS. As part of the Talent section staff will review their own behaviours using the Trust(s) framework.

3.4.1 Preparation and discussion

A review of the employee’s performance and contribution should be undertaken by both parties. An appreciative view should be taken and any issues that require addressing with regard to performance or demonstrating expected values and behaviours should be done so prior, to this process and at the time observed. Although such issues that have been discussed can be referred to in order to capture development needs or expected standards.

Please see addition guidance notes available

3.5 Setting Objectives

It is a Trust requirement that all employees, as part of their TALKS will agree a number of objectives. Minimum of 3 objectives must be set or working towards (including a wellbeing one). It is not expected that employees will have more than 6 objectives (including a wellbeing one). Both individual and reviewer will agree the appropriate number of objectives using their judgment based on role, responsibilities, business priorities and the amount of work required to deliver on each objective.

For a rough guide, it would be usual for roles that are band 4 and above to have at least 4 objectives (including a wellbeing objective).

Please see addition guidance notes which includes advice on SMART objectives available (Staff pages)

3.6 New Starters

New starters are required to complete a review within the first 3 months of employment and in line with any probation guidance. The objectives set at this review would then formally be reviewed as part of this approach.

3.7 Staff with more than one assignment / role

Managers of staff with more than one role should liaise with each other and share information re: support and development where appropriate to compliment skills development and ensure efficient use of resources. It is for local managers to determine whether the roles require a different set of objectives and therefore separate TALKS. Refer to ESR guidance for the recording for appraisal purposes in this instance.
3.8 Appraisal and pay structure for Agenda for Change

Please refer to framework guidance for up to date information available on the staffweb

3.8.1 Pay structure and pay-step points

To deliver good patient care whether staff work directly with patients or not, there is an expectation that standards must be met. The mandatory annual appraisal process for AFC employees should involve regular conversations between staff and their line manager to ensure the required standards are understood and additional support identified in good time. Quarterly TALKS is the approach the Trust(s) will take to meet this requirement. The expectation is that all staff will meet the required standards and therefore be able to progress.

Annex 23 – Pay Progression of the NHS Terms and Conditions of Service sets out the agreed pay progression framework which is underpinned by local appraisal policies. These provisions apply to all staff commencing NHS employment or promoted to a higher band on or after April 2019. For all other staff current arrangements.

The current arrangements for staff employed at NCUH and CPFT differ, the different arrangements will continue until new joint arrangements are agreed and implemented.

CPFT Staff Only:

There are no current requirements in place relating to pay step progression for existing staff.

NCUH Staff Only:

The current arrangements are as set out on the previous NCUH Appraisal Policy – Non Medical Staff

Pay progression is linked to:-

- The employee achieving their objectives
- The employee demonstrating Trust values and behaviours
- The employee has undertaken all statutory and mandatory training
- For line managers – ensure has appraisals been conducted all appraisals for their team/workforce.
- For staff in bands 8C, 8D and 9 the last 2 points on the scale are annually earned determined on the employee achieving locally agreed levels of performance.

For further information see the supporting guidance (add link)

4. TRAINING AND SUPPORT

It is important that reviewers have access to training to develop to ensure that they have the skills and confidence so that employees have an experience which is positive, effective and meaningful.
Details of training and development to support this policy can be found on the staff web pages.

5. **PROCESS FOR MONITORING COMPLIANCE**

The process for monitoring compliance with the effectiveness of this policy is as follows:

<table>
<thead>
<tr>
<th>Aspect being monitored</th>
<th>Monitoring Methodology</th>
<th>Reporting Presented by</th>
<th>Committee</th>
<th>Frequency</th>
</tr>
</thead>
<tbody>
<tr>
<td>Annual Appraisal Compliance</td>
<td>ESR report</td>
<td>Workforce and OD</td>
<td>FIP</td>
<td>Monthly</td>
</tr>
<tr>
<td>Employee Engagement</td>
<td>Staff Survey’s</td>
<td>Workforce and OD</td>
<td>Quality and Safety</td>
<td>Annually</td>
</tr>
<tr>
<td>Training attendance</td>
<td>ESR report</td>
<td>Workforce and OD</td>
<td>Quality and Safety</td>
<td>Annually</td>
</tr>
</tbody>
</table>

Wherever the above monitoring has identified deficiencies, the following must be in place:

- Action plan
- Progress of action plan monitored by the FIP minutes
- Risks will be considered for inclusion in the appropriate risk registers

6. **REFERENCES:**

- NICE ph22 (2009) Mental Wellbeing at Work

7. **ASSOCIATED DOCUMENTATION:**

- **NCUHT**
  - Probation Period Policy (non-medical)
  - Bank Booking Policy

- **CPFT**
  - Management Supervision Policy

- **Other**
  - AFC New Pay Framework

8. **DUTIES (ROLES & RESPONSIBILITIES):**

8.1 **Chief Executive / Trust Board Responsibilities:**
The Chief Executive and Trust Board jointly have overall responsibility for the strategic and operational management of the Trust, including ensuring that Trust policies comply with all legal, statutory and good practice requirements.

8.2 Executive Director Responsibilities – Director of Workforce and OD

All policies have a designated Executive Director and it is their responsibility to be involved in the development and sign off of the policies, this should ensure that Trust policies meet statutory legislation and guidance where appropriate. They must ensure the policies are kept up to date by the relevant author and approved at the appropriate committee.

8.3 Managers Responsibilities:

Managers are responsible for ensuring effective and consistent application of this policy. Supporting employees and contributing to effective performance reviews.

8.4 Staff Responsibilities:

Employees must ensure they are familiar with the contents of this policy and fully engage with the Quarterly TALKS process, including discussion, completion of paperwork and meeting objectives and PDP as identified.

8.5 Approving Committee Responsibilities:

The Chair of the approving committee will ensure the policy approval is documented in the final section of the Checklist for Policy Changes. The committee will agree the approval of the final draft of the policy.

9. ABBREVIATIONS / DEFINITION OF TERMS USED

Keep lists in alphabetical order

<table>
<thead>
<tr>
<th>ABBREVIATION</th>
<th>DEFINITION</th>
</tr>
</thead>
<tbody>
<tr>
<td>AFC</td>
<td>Agenda for Change</td>
</tr>
<tr>
<td>KSF</td>
<td>Key Skills Framework</td>
</tr>
<tr>
<td>ESR</td>
<td>ESR Electronic Staff Record</td>
</tr>
<tr>
<td>SMART</td>
<td>Specific, Measurable, Achievable, Realistic, Timed</td>
</tr>
<tr>
<td>NCUH</td>
<td>North Cumbria University Hospitals NHS Trust</td>
</tr>
<tr>
<td>CPFT</td>
<td>Cumbria Partnership NHS Foundation Trust</td>
</tr>
<tr>
<td>GDPR</td>
<td>General Data Protection Regulation</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>TERM USED</th>
<th>DEFINITION</th>
</tr>
</thead>
<tbody>
<tr>
<td>Reviewer</td>
<td>Person holding the TALKS with employee, usually line manager but can be delegated appropriately.</td>
</tr>
</tbody>
</table>
DOCUMENT CONTROL

<table>
<thead>
<tr>
<th>Equality Impact Assessment Date</th>
<th>1st December 2018</th>
</tr>
</thead>
</table>
| Sub-Committee & Approval Date   | Joint HR Policy Sub Group 21/03/2019  
                                  | Joint Partnership Forum 03/04/2019 |

History of previous published versions of this document:

<table>
<thead>
<tr>
<th>Trust</th>
<th>Version</th>
<th>Ratified Date</th>
<th>Review Date</th>
<th>Date Published</th>
</tr>
</thead>
<tbody>
<tr>
<td>CPFT POL/004/022</td>
<td>Dec 2015</td>
<td>December 2015</td>
<td>November 2016</td>
<td></td>
</tr>
<tr>
<td>NCUHT</td>
<td>6.0</td>
<td>20/10/2016</td>
<td>31/10/2019</td>
<td>30/11/2016</td>
</tr>
</tbody>
</table>

Statement of changes made from previous versions
CPFT POL/004/022 Dec 15 and NCUHT Appraisal Policy – Non – medical V6.0
<table>
<thead>
<tr>
<th>Version</th>
<th>Date</th>
<th>Section &amp; Description of change</th>
</tr>
</thead>
</table>
| Joint v0.1       | As above   | • Title change to Quarterly TALKS (QT’s)  
• Change from annual conversation/review to every quarter with one being recorded as appraisal  
• Minimum of 2 objectives (plus one wellbeing)  
• Assessment criteria for reviewers including training requirement of skills update every 3 years  
• Conversation/review framework focused on Talent (inc values), Appreciation, Learning and development, Kaizen (continuous service improvement) and Support.  
• Explicit that managers should hold a copy of documentation  
• In line with new AFC Pay framework                                                                 |
| CPFT POL/004/022 | December 2015 | • S7.1 replaces management supervision requirement but more frequent supervision encouraged to continue  
• S7.2 The steps in 5 step approach different to reflect new approach  
• S8.0 ESR recording required for end of the QT’s on the date recording removed  
• S9 Removed  
• Explicit that objectives should be SMART                                                                 |
| NCUHT V6.0       | 20/10/2016 | • S6.2 changed to one months’ notice required  
• S6.24 QT’s happen 4 times a year, one within the window recorded as Appraisal in ESR. New pay step bi-annually  
• S6.26 QT to take place within first 3 months of employment and in line with Probation Policy  
• S6.32 removed – personal objectives set by Trust  
• S6.4 S6.5 guidance to be available to support new Pay Framework  
• S7 Both parties to hold a copy of documentation                                                                 |

List of Stakeholders who have reviewed the document

<table>
<thead>
<tr>
<th>Name</th>
<th>Job Title</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>CPFT Children and Families Care Network Management Teams</td>
<td>Via email during February 2019</td>
<td></td>
</tr>
<tr>
<td>CPFT Mental Health Care Group Senior Management Team</td>
<td>Via email during February 2019</td>
<td></td>
</tr>
<tr>
<td>CPFT Corporate Care Group To all Heads of Services</td>
<td>Via email during</td>
<td></td>
</tr>
<tr>
<td>Name</td>
<td>Job Title</td>
<td>Date</td>
</tr>
<tr>
<td>-----------------------------</td>
<td>------------------------------------------------------------</td>
<td>-------------------------------------------</td>
</tr>
<tr>
<td>CPFT Community North Care Group</td>
<td>Senior Management Team</td>
<td>Via email during February 2019</td>
</tr>
<tr>
<td>CPFT Specialist Care Group</td>
<td>Senior Management Team</td>
<td>Via email during February 2019</td>
</tr>
<tr>
<td>NCUH</td>
<td>Senior Management Teams across Care Groups and Corporate functions</td>
<td>Via email during February 2019</td>
</tr>
</tbody>
</table>