

# IMPROVING THE PERFORMANCE APPRAISAL SYSTEM FOR NURSES

■ This is a summary: the full paper can be accessed at [nursingtimes.net](http://nursingtimes.net)

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**ABSTRACT** Redshaw, G. (2008)

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This article describes a project in one organisation that aimed to improve the appraisal system for nurses. Evidence suggests that appraisals have been poorly implemented in some organisations. Questionnaires were completed by eight nurses, who expressed mostly negative attitudes towards appraisals. The article outlines improvements put in place as a result of the analysis.

Appraisals are a contentious issue. The aim of this project was to explore appraisal systems in my place of work. Questionnaires and summaries were completed by nurses in the organisation to gather views on the current process. It was intended to highlight staff perceptions of the appraisal system and help develop an updated system.

Healthcare professionals need to acknowledge the difficulties of implementing an appraisal system, including the lack of guidelines on skills and knowledge required

or the processes that can lead to helpful outcomes. Research by Walker and Jones (2004) constructed a support tool to highlight the main points of a successful appraisal.

## EVALUATING APPRAISALS

A small study was carried out to assess the process within the organisation, involving staff whom I am directly responsible for as line manager. The questionnaire's aim was to identify staff perceptions and experiences of appraisals. This method was chosen because staff might feel uncomfortable in an interview should they want to make negative comments about an already accepted procedure.

The nurses were randomly selected with a mixture of age, nursing experience and supervisory experience. Ten staff nurses received the questionnaire. Names were not disclosed to ensure confidentiality. Eight staff returned the questionnaires.

## FINDINGS

### Feelings before the appraisal

Seven staff nurses were nervous and some said they dreaded the appraisal appointment because of fear of criticism. One looked forward to the process of appraisal.

Previous experience of appraisals will have a great bearing on preparation and approach.

The seven nurses who expressed nervousness had all previously thought their appraisals were poorly delivered or had negative outcomes. Four had been appraised by the same manager and emphasis was placed on the manager's performance. The nurse who was positive had an excellent previous review with reward benefits.

### Self-assessment

All eight nurses were uncomfortable writing about themselves in the pre-appraisal questionnaire. Traditionally, employees have been encouraged to reflect on their performance for 2–3 weeks before the appraisal and this self-assessment has formed a basis for discussion.

A review of the literature on previous organisational surveys has shown that employees invariably consider themselves to be better than average. This then poses a problem for the appraiser who has to inform staff that the self-assessment is too positive.

### Feedback

All eight nurses agreed with feedback and were satisfied with the outcomes at the appraisal. However, they felt disillusioned that feedback and action plans were never revisited and completed, and the result carried forward to the next appraisal.

This suggests feedback is one of the most vital parts of the appraisal system, since any person who receives positive feedback can be motivated to continue or improve performance to meet organisational requirements. Negative feedback must be accompanied by advice on improvement.

Setting aside time for the appraisal and then planning time for reviews and further feedback is paramount in maintaining motivation and enhanced performance.

### Cancelling appointments

Four of the eight nurses had experienced at least one cancelled appointment due to either their own or their manager's other work commitments. This led to feelings that both the appraisal system and the appraisee

## IMPLICATIONS FOR PRACTICE

Organisations should consider the following points in order to improve the appraisal system:

- Existing practice and systems should be reviewed to ensure up-to-date practice and awareness of government guidelines;
- The appraisal process should be carried out in a non-judgemental, unbiased manner in order to ensure positive delivery and increase staff motivation;

- Consistent appraising and feedback is required to allow staff to prepare and accept appraisals as a support tool;
- The timing of appraisals and their content must be conducive to development and not used as an opportunity to discipline a staff member;
- To complete a satisfactory appraisal, a structured system must be used. The result should leave the appraiser and appraisee clear about the aims, plans and future development objectives.



THIS ARTICLE HAS BEEN DOUBLE-BLIND PEER-REVIEWED

## BACKGROUND

- Duffin (2006) suggested that in healthcare, appraisal systems are inadequately implemented, with only six out of ten NHS staff in England ever receiving an appraisal or personal development review.
- Government guidelines advocate that all nurses have the right to management

support in care delivery (Department of Health, 1993). This guidance suggests that regular staff appraisal can benefit both nurses and managers.

- Fletcher (2004) strongly advocated the promotion of manager/employee dialogue as one of the aims of an effective appraisal.

## REFERENCES

**Department of Health** (1993) *The Nursing, Midwifery and Health Visiting Contribution to Health and Healthcare*. London: HMSO.

**Duffin, C.** (2006) Trusts falling behind with staff appraisals, NHS survey. *Nursing Standard*; 20: 29, 8.

**Fletcher, C.** (2004) *Appraisal and Feedback*. London: Chartered Institute of Personnel and Development.

**Walker, H., Jones, H.** (2004) A guide to peer appraisal. *Nursing Management*; 11: 1, 22–24.

personally lacked importance. However, they also expressed relief that the appointment was cancelled.

Managers and employees need to be clear about the purpose of appraisal and how to measure success or failure. For an appraisal to be worth the time and cost, all levels and grades of staff must feel they have a valuable contribution to make in developing their organisation's strategy.

Failure to adhere to the time designated devalues the importance and reduces commitment to the appraisal system.

### Motivation to improve

Due to the negative nature of seven of the eight nurses' previous appraisals, motivation and improved performance were not achieved directly.

The threat of disciplinary procedures due to inadequate standards of practice could have been a possible factor in motivating two to improve, as their performance was being managed. However, each acknowledged the extensive support offered, and felt this was the true factor in their motivation to improve.

Five nurses suggested they continued at the same level. One was extremely motivated and ensured performance standards were maintained because of the rewards gained, recognition and potential for promotion.

### Overall view

All eight staff completed the necessary documentation and had undergone an appraisal review. None had seriously given much thought to the process, accepting it as part of the organisation's system.

However, they all acknowledged some areas could be improved significantly to meet their development needs.

### IMPROVING APPRAISALS

The questionnaire and summary proved extremely informative. Taking into account experience, suggestions and current evidence, an improved appraisal system is clearly required to replace the existing one.

To implement an appraisal system that will be successfully embraced by all users, it must have clear aims and objectives, be able to be implemented fairly and have relatively simple documentation. One of the main issues in my organisation's appraisal system is the lack of guidance for managers and nurses on how to undertake and complete appraisals. Only initial guidance produced in 1986 is available, which has not been updated since then.

Appraisees overestimating their abilities can result in a negative atmosphere when actual abilities or managers' beliefs differ. Consequently, the existing pre-appraisal questionnaire has been altered to lead to open dialogue during the appraisal.

A further significant adjustment is the recognition of structured feedback and action planning with follow-up throughout the year. Some managers in the organisation have not followed up set targets and not ensured that action plans are completed, leading to inconsistencies and a devaluing of the process and aims. We are introducing an additional document to ensure these become integral to the process.

### Training for managers

There is an increasing recognition in the organisation that training and support for appraisers is inadequate. To validate the required training, a recognised external body has been appointed to deliver accredited training for appraisers. All appraisers must undertake at least two days of training before performing appraisals.

The accreditation of this training further acknowledges the value of the appraisal cycle within the organisation. It will become an integral part of an internal degree pathway for all registered nurses.

This training is a significant financial commitment for the organisation. The revised appraisal system, whereby appraisers have received appropriate training, should now be an integral part of the organisation's culture and not simply a tick-box exercise.

### CONCLUSION

In summary the organisation had an open, participative environment in which personal development was viewed as an integral part. However, the appraisal process was an outdated paper exercise with negative connotations for most staff involved.

The external, accredited appraisal training has focused awareness on the importance of regular review and feedback, to ensure motivation and personal development.

The use of appraisal to support personal and organisational development is now becoming established in the company, and the revision of appraisal records will assist with these improvements. ■

● The extended version of this paper, including full reference list is available for four weeks and then to subscribers only. Log on to [nursingtimes.net](http://nursingtimes.net), click NT Clinical and Archive and then Clinical Extra