#### **Policies and Procedures**

Title: City of Gustavus Policy and Procedure for a Regular Position Employee Performance Evaluation

#### **Authority**

City of Gustavus, 3.04.07 Performance Evaluation of Regular Position Employees. End of probationary period; annual; special.

#### **Policy**

It is the policy of the City of Gustavus to utilize an employee performance evaluation program to assist the City in maintaining the highest quality employees and highest quality performance. Performance evaluations share the following common objectives:

- 1. To optimize the application of human resources toward the achievement of City service goals.
- 2. To provide an opportunity for the supervisor and employee to review, evaluate and align the working relationship between the employee and the City.
- 3. To provide an opportunity for the supervisor to manage performance on a scheduled basis.
- 4. To make effective use of employee skills.
- 5. To facilitate skill development and performance improvements.
- 6. To provide acknowledgement of work done.
- 7. To gain new information and ideas from employees.
- 8. To clarify job expectations and discuss opportunities for improvements, development and goals for the next period.
- 9. To provide an opportunity for employees to create an individual development plan.

#### **Procedure**

- 1. Supervisor schedules date for evaluation discussion at least ten working days in advance of a performance evaluation and asks the City Clerk to provide employee with an Employee Self-Evaluation and Development Plan form.
- 2. Employee submits self-evaluation form at least three working days prior to evaluation discussion.
- 3. Supervisor fills out Regular Position Employee Performance Evaluation form informed by guidance from Title 3, position description, personnel memos, employee self-evaluation, previous performance evaluations, observations during the review period, and interactions with supervisor, colleagues, the public, etc. The supervisor will provide specific examples for ratings in the comments section.
- 4. Supervisor discusses evaluation with employee in a private city location.
  - a. Employee signs evaluation and receives a copy
  - b. Supervisor's evaluation and employee self-evaluation are placed in personnel file
- 5. Employee is given the opportunity to respond in writing to supervisor comments or to indicate that he/she has no comments and submit signed response form to City Clerk within five working days of the evaluation meeting. Response will be placed in personnel file. Performance evaluations shall not be subject to the grievance procedure [3.04.07(f)].
- 6. In the cases of the City Clerk, and City Treasurer, and City Administrator, the evaluation forms will be filled out in an Executive Session discussion of the Council and approved by motion in an open meeting.

<u>Following</u> the executive session will take place with an evaluation discussion will be scheduled with the employee, the mayor and two council members.

7. Forms to be used in the evaluation process are adopted as Appendices to this Policy and Procedure document. Spacing within each category may be expanded or decreased as appropriate.

**Appendices** 

Appendix A: Employee Self-Evaluation and Development Plan

Appendix B: Regular Position Employee Performance Evaluation

Appendix C: Notice of Work-Performance Deficiencies and Performance Action Plan

Note: This form may be used by a supervisor after any meeting with an employee in

which work-performance deficiencies and remedies are discussed.

Signed: Sally A. McLaughlin, Mayor of the City of Gustavus

Date

# **Employee Self-Evaluation and Development Plan**

# To be filled out by City Clerk and submitted to employee

Check one: Probationary	_ Annual	Special
Review period:	through	
Discussion date with supervisor	r scheduled for	
Self-evaluation due back in City	Hall by 4 pm on	
Supervisor name and title		

# To be filled out by employee

Please take <u>one hour</u> of your work time to address the following in the context of your Position Description and performance during the review period. Return this form to the City Clerk by the date and time indicated above.

#### **Employee Name**

**Department** 

**Position Title** 

**Date of Hire** 

#### 1. Achievements

Please list three examples of your work in this review period that you find most noteworthy. How have these achievements contributed to your department and to the community?

# 2. Training during Review Period

A. What training did you receive during this review period?

B. How have you applied this training to your job?
3. Position-Related Personal Development Goals In what areas of job performance and productivity would you like to improve your skills? Are you working toward a job-related certification?
4. Training Goals  What training would you like to receive in the next twelve months? How will this training enhance your job performance and productivity? Will this training help you attain a job-related certification?
5. Departmental Project Goals

experienced during the review period that impede the performance of your responsibilities or that adversely impact your working environment.				
experienced during the review period that impede the performance of your responsibilities or	Please describe any current or recurring obstacles you are experiencing or that you have experienced during the review period that impede the performance of your responsibilities of			
experienced during the review period that impede the performance of your responsibilities or	Please describe any current or recurring obstacles you are experiencing or that you have experienced during the review period that impede the performance of your responsibilities of			
experienced during the review period that impede the performance of your responsibilities or	Please describe any current or recurring obstacles you are experiencing or that you have experienced during the review period that impede the performance of your responsibilities of			
	6. Problems or Concerns	Please describe any current or recurri experienced during the review period to	that impede the performance of your responsibilities o	r

# REGULAR POSITION EMPLOYEE PERFORMANCE EVALUATION

Check one: Probationary	Annual Special
Review Period	to
Employee Name	Department
Date of Hire	Position Title
Date of Last Review	Date of This Review
Name of Reviewing Supervisor	r
and City standards.  Needs Improvement (NI)  The employee's performar standards. Provide speci improvement will follow i section.	nce meets basic job expectations  nce fails to meet job expectations and/or City ific examples. Recommendations for in the final "Summary and Recommendations"  jor job achievements of the past year or since
the last evaluation, based evaluation.)	d on observation and with reference to the employee self-
responsibilities and tasks	s s/he must perform; keeps up with developments in the field; from time and training within the position.)

3.	<b>Job Performance</b> (QUALITATIVE—Complies with City policies and procedures, such as procurement, time sheets; oral and written communication skills; neatness, thoroughness, accuracy; professional manners and comportment; customer service; overall quality of employee's work.)
	Rating:
	Comments:
4.	Job Productivity (QUANTITATIVE—employee demonstrates a commitment toward achieving results beneficial to the City; tasks are completed efficiently and effectively in terms of time and cost. Ability to plan, prioritize, organize. Deadlines are met. Handles pressure. Employee eliminates unnecessary work and activities that do not add value.)  Rating:
	Comments:
5.	<b>Dependability</b> (Employee can be relied upon to complete tasks and is conscientious about his/her attendance and timeliness. Performs tasks delegated or assigned by supervisor and communicates results.)
	Rating:
	Comments:

Comments:

6.	<b>Cooperation</b> (Employee demonstrates a willingness to work with associates, subordinates, supervisors, volunteers, agency representatives and the general public; flexibility and adaptability.)
	Rating:
	Comments:
7.	<b>Initiative</b> (Employee demonstrates an ability to think and act independently. Originates innovative ideas and methods to improve job performance and productivity.)
	Rating:
	Comments:
8.	<b>Work Environment/Safety</b> ( Follows safety regulations and actively contributes to a safe and pleasant workplace.)
	Rating:
	Comments:
9.	<b>Integrity</b> (Deals with others in a fair, honest, straightforward manner; is trustworthy; takes responsibility for failures and shares credit for successes; uses appropriate discretion and is sensitive to confidentiality.)
	Rating:
	Comments:
SII	IMMARY AND RECOMMENDATIONS

(Deficiencies will be addressed in "Work Performance Deficiencies and Performance Improvement Plan")

Supervisor Signature	Date	_
Supervisor Position Title		
Signature of Mayor (if Mayor is not direct supervisor)	Date	_
Has this report been discussed with the E	mployee? Yes	No
Date of discussion		
If "no," provide reason:		
Employee signature, acknowledging receip optional Response form (due in City Hall in respond).		
Employee signature		Date

# Notice of Work-Performance Deficiencies and Performance Action Plan

Date:
To Employee Name:
Position:
At our recent meeting on
As stated in the meeting you have been given an unsatisfactory performance rating, based on the above factors. In order to retain employment with the City of Gustavus, your performance must improve, and you must adopt the following performance action plan:
Please accept this notice as constructive advice. We expect to see continuing improvement in your job performance.
Sincerely,
Supervisor signature
Receipt acknowledged by employee:
Employee Signature Date
Original to be placed in personnel file; one copy to employee.