## Instructions & Overview of Steps

The following information is intended to provide an overview of the performance planning, coaching and feedback check-ins, and evaluation process for the 2022-2023 classified staff performance management cycle.

Performance evaluations shall be used to coach Employees in their individual skill

development and career advancement opportunities

## Step 1: Performance Planning

The basic premise in performance management is that an employee must know what is expected of them to be a highly effective performer. This is done by the supervisor and the employee collaborating to develop individual performance goals and objectives. To be most effective, individual performance plans directly stem from the position’s duties, team and Department’s goals and objectives. Ideal goals and objectives are considered to be [SMART](https://www.youtube.com/watch?v=VZXcKyevXKM): Specific, Measurable, Attainable, Relevant, and Time-bound.

The process for the performance planning phase requires a meeting between the supervisor and the employee early in the performance cycle in which the following occur:

* The overall vision, values and goals of the Department are discussed.
* The individual and team goals, objectives and projects for the upcoming year are discussed.
* The Core Competency areas the employee will be evaluated on are reviewed.

**Step 2: 90-day New Employee Check-in Discussion (If applicable)**

Probationary service applies to appointments to permanent positions of Employees.

The probationary period shall not exceed 12 working months unless extended by the number of days an Employee is on unpaid leave, Short-term Disability or Workers’ Compensation leave.

\*Probationary Employees shall have a conversation about their job performance with their supervisor after completion of 90 days of their probationary period.

 It is recommended that the supervisor review the expectations and competencies with the employee, inquire if they are acclimating to the position, if they have any questions or require any assistance or additional resources or training. Address areas of improvement or development as needed.

## Process Overview



\* If employee within probationary period, be sure to complete 90- day check-in discussion regarding Job Performance

**Performance Management Standardization**

Descriptions of

5-Point Rating Scale

**Level 5: Exceptional** Employees at this level consistently make extraordinary contributions through superior performance on key goals, serve as a role model of organizational values, and contribute significantly to the mission of the Department. Peers, immediate supervisors, higher-level management, and others recognize and depend upon the employee’s level of performance. An extraordinary level of achievement and commitment in terms of quality and time, technical skills and knowledge, ingenuity, creativity, and initiative is exhibited at this level. The employee demonstrates exceptional job mastery in all major areas of responsibility and their contributions to the organization are of marked excellence.

**Level 4: Highly Effective** Employees at this level demonstrate highly effective performance by making significant contributions and impact on the goals of the Department. The employee consistently models organizational values to others and performance at this level exceeds the expectations of their position. Colleagues rely on these employees for advice on process or subject matter expertise. All goals, objectives, and targets are consistently achieved above the established standards.

**Level 3: Effective** Employees at this level reliably and consistently meet all the expectations, standards, requirements, and objectives of the employee’s position. They demonstrate organizational values, along with a willingness and ability to grow for the benefit of the Department. At this level, performance meets expectations in terms of quality of work, efficiency, and timeliness with the most critical goals being met.

**Level 2: Needs Improvement** At this level, employee performance and/or behavior do not consistently meet minimum expectations of what is expected of the employee’s position. While the employee shows capability and willingness to progress, they may require development in a key skill area(s) to be fully effective in the role. Employee’s failure to exhibit marked improvement may result in performance management.

**Level 1: Unacceptable** At this level, employee performance and/or behavior do not meet minimum job expectations of the position. The employee does not meet key goals and/or does not demonstrate competence in critical job skills. Immediate and sustained performance improvement is needed. Employee’s failure to exhibit immediate marked improvement will result in corrective and/or disciplinary action.

**PERFORMANCE PLANNING, CHECK IN & FINAL EVALUATION FORM**

**Transition Performance Cycle: April 1, 2022 ‒ July 31, 2023**

|  |  |  |  |
| --- | --- | --- | --- |
| **Employee Name** |  | **Class Title** |  |
| **Position #** |  | **Section/Unit** |  |
| **Rater’s Name** |  | **Reviewer’s Name** |  |

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### Step 1: Performance Planning

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Employee has been provided a copy of this performance plan** | **Yes, and I agree with the plan** |  | **Yes, and I do not agree with the plan** |  |
|  |  |  |  |
| **Rater’s Signature** | **Date** | **Employee’s Signature** | **Date** |
| **PD has been reviewed and is accurate** | **Yes** |  |  |  |
| **No\*** |  | **Employee’s Initials** | **Rater’s Initials**  |
| **\*If No, revisions must be made and submitted to the HR unit** |

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### Step 2: If Applicable: 90-day (From Hire) Check-in Discussion

|  |  |  |
| --- | --- | --- |
| **90-day Check In:**  | **Date Given** |  |
|  |  |  |  |
| **#1 Rater’s Signature** | **Date** | **#1 Employee’s Signature** | **Date** |
|  |  |  |  |
| **#2 Rater’s Notes** | **Date** | **#2 Employee’s Notes** | **Date** |
|  |  |  |  |

### Step 3: Interim / Progress Review

|  |  |  |
| --- | --- | --- |
| **Interim Review #1: August 2022** | **Date Given** |  |
| **Interim Review #2: January 2023** | **Date Given** |  |
|  |  |  |  |
| **#1 Rater’s Signature** | **Date** | **#1 Employee’s Signature** | **Date** |
|  |  |  |  |
| **#2 Rater’s Signature** | **Date** | **#2 Employee’s Signature** | **Date** |
|  |  |  |  |
| **Other Check Ins** | **Date Given** |  | **Employee’s Initials** |  | **Rater’s Initials** |  |

\*\*OPTIONAL: Departmental Discretion

|  |
| --- |
| **DEPARTMENTAL VALUES (\*Optional)****Your Department's values are the set of guiding principles and fundamental beliefs that employees follow as defined by the purpose of the department serving the citizens of Colorado.** |
| **Inclusivity** | * Contributing to and maintaining a consciously unbiased environment where everyone feels welcomed, respected, and valued as individuals while building a Colorado for All.
 |
| **Service** | **Teamwork** | **Integrity** | **Responsiveness** | **Transparency** |
| * Being helpful, useful, timely, and efficient in our actions, results, and communication.
* Collaborating with and empowering each other to achieve success.
* Being honest and fair in our work and relationship.
* Engaging and following through in a way that promotes respect, energy, creativity, and adaptability.
* Operating with accountability, clarity, and ethics in a way that builds and sustains trust.
 |

\*\*Mandatory

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| --- |
| **CORE COMPETENCIES****The Core Competency areas are defined by the State and have associated expectations and specific desired work behaviors. Additional goals or objectives that are competency specific can be added to an employee’s performance plan.** |
| **Performance Management** | (FOR SUPERVISOR’S ONLY) Effectiveness in managing the performance of subordinate employees, including developing plans, conducting reviews and performance evaluations, coaching, providing feedback and resolving disputes. |
| **Communication** | Effectively communicates by actively listening and sharing relevant information with co-workers, supervisor(s) and customers/clients. |
| **Customer Service** | Works effectively with internal and external customers/clients to satisfy service and product expectations and ensure the effectiveness of the department. |
| **Accountability** | Employee’s work behaviors demonstrate responsible personal and professional conduct, which contribute to the overall goals and mission of the department. |
| **Job Knowledge** | The employee is skilled in job-specific knowledge that is necessary to provide the appropriate quantity and quality of work in a timely and efficient manner. |
| **Interpersonal Skills** | Interacts effectively with others to establish and maintain smooth working relations. |

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| **STATEWIDE RATING CATEGORIES** |
| **Description of the categories can be found on the State of Colorado, Department of Personnel & Administration, Division of Human Resources public website:**[**https://dhr.colorado.gov/state-hr-professionals/performance-management**](https://dhr.colorado.gov/state-hr-professionals/performance-management)[**Standard Definitions - Performance Rating Levels**](https://docs.google.com/document/d/1wwwbBD46IpODj0HDGIp0dYuvye5Xq0h7LnJAjy8rUQ4/edit) |

|  |  |
| --- | --- |
| **INDIVIDUAL GOALS AND/OR COMPETENCY-RELATED OBJECTIVES:** | **RATING** |
| 1. **Goal/Objective:**
 |
| **How do you plan to achieve this goal/objective?**  |
| ***Check In:***  |
| **FINAL EVALUATION NOTES:**  |  |
| 1. **Goal/Objective:**
 |
| **How do you plan to achieve this goal/objective?**  |
| ***Check In:***  |
| **FINAL EVALUATION NOTES:**  |  |

|  |  |
| --- | --- |
| **TEAM/UNIT GOALS AND/OR COMPETENCY-RELATED OBJECTIVES:** | **RATING** |
| 1. **Goal/Objective:**
 |
| **How do you plan to achieve this goal/objective?**  |
| ***Check In:***  |
| **FINAL EVALUATION NOTES:**  |  |
| 1. **Goal/Objective:**
 |
| **How do you plan to achieve this goal/objective?**  |
| ***Check In:***  |
| **FINAL EVALUATION NOTES:**  |  |

|  |  |
| --- | --- |
| **DEPARTMENT GOALS AND/OR COMPETENCY-RELATED OBJECTIVES:** | **RATING** |
| 1. **Goal/Objective:**
 |
| **How do you plan to achieve this goal/objective?**  |
| ***Check In:***  |
| **FINAL EVALUATION NOTES:**  |  |
| 1. **Goal/Objective:**
 |
| **How do you plan to achieve this goal/objective?**  |
| ***Check In:***  |
| **FINAL EVALUATION NOTES:**  |  |

|  |  |
| --- | --- |
| **STRETCH or KEY GOALS AND/OR COMPETENCY-RELATED OBJECTIVES:** | **RATING** |
| 1. **Goal/Objective:**
 |
| **How do you plan to achieve this goal/objective?**  |
| ***Check In:***  |
| **FINAL EVALUATION NOTES:**  |  |

|  |  |
| --- | --- |
| **CORE COMPETENCIES** | **RATING** |
| **COMMUNICATION** |  |
| **INTERPERSONAL SKILLS** |  |
| **CUSTOMER SERVICE** |  |
| **ACCOUNTABILITY** |  |
| **JOB KNOWLEDGE** |  |
| **PERFORMANCE MANAGEMENT (SUPERVISORS ONLY)** |  |
| **FINAL EVALUATION NOTES:** |

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### Step 2: Interim / Progress Review

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## NOTES: August 2022

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| --- |
| ***Check In:***  |

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## NOTES: January 2023

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| --- |
| ***Check In:***  |

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## NOTES: Other Check Ins

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| --- |
| ***Check In:***  |

##

## Final Evaluation/Rating Summary

Completing the final evaluation involves assigning a rating for the goals and each competency. The ratings are then averaged to arrive at the final rating.

|  |  |
| --- | --- |
| **Goal & Competencies** | **Final Rating**  |
| Individual Goals |  |
| Team Goals |  |
| Departmental Goals |  |
| Stretch or Key Goal/Objective (if applicable) |  |
| Communication |  |
| Interpersonal Skills |  |
| Customer Service |  |
| Accountability |  |
| Job Knowledge |  |
| Performance Management (Supervisors Only) |  |
| **Average of Ratings with one place decimal** |  |
| **FINAL RATING - mathematical rounding** |  |

**Mathematical Rounding:**

The following scale must be used to derive an overall performance rating based on the average of the goal and competency ratings:

1.0 to 1.4 = Level 1

1.5 to 2.4 = Level 2

2.5 to 3.4 = Level 3

3.5 to 4.4 = Level 4

4.5 to 5.0 = Level 5

[Average and Weighted Calculation for Performance Ratings](https://docs.google.com/spreadsheets/d/1mp4rTiI6mKTH94I1vowThjqUqGBvheoIJo6335LwC-Q/edit#gid=0) Worksheet

## Employee’s Final Overall Evaluation/Rating: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |
| --- |
| **End of Performance Cycle Narrative:**Rater’s narrative should address performance cycle highlights, including examples that support the final rating, progress toward goals, and any other relevant details regarding the performance and professional development. It should include areas of improvement as well. (Option to continue at the end of the form) |

|  |
| --- |
| Comments from Rater: |

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Rater’s Signature Rater’s Name Date

|  |
| --- |
| **End of Performance Cycle Narrative:** Reviewer’s narrative and comments |

|  |
| --- |
| Comments from Reviewer: |

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Review’s Signature Reviewer’s Name Date

|  |
| --- |
| **End of Performance Cycle Narrative:** Employee’s narrative and comments |

|  |
| --- |
| Comments from Employee: |

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Employee’s Signature Employee’s Name Date

|  |
| --- |
| **End of Performance Cycle Narrative: Continued if needed**Rater’s narrative should address performance cycle highlights, including examples that support the final rating, progress toward goals, and any other relevant details regarding the performance and professional development. It should include areas of improvement as well. Can continue at the end of the form |

|  |
| --- |
| Comments from Rater: |

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Rater’s Signature Rater’s Name Date

|  |
| --- |
| **End of Performance Cycle Narrative: Continued if needed**Rater’s narrative should address performance cycle highlights, including examples that support the final rating, progress toward goals, and any other relevant details regarding the performance and professional development. It should include areas of improvement as well. Can continue at the end of the form |

|  |
| --- |
| Comments from Rater: |

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Rater’s Signature Rater’s Name Date

**PERFORMANCE PLANNING, CHECK IN & FINAL EVALUATION FORM**

**Transition Performance Cycle: April 1, 2022 ‒ July 31, 2023**

### Step 3: Final Written Evaluation

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **OVERALL PERFORMANCE RATING** **FOR PY 2022 -2023** | 5 | 4 | 3 | 2 | 1 |
|  |  |  |  |  |
| I have received and **agree** with the performance evaluation |  |
| I have received and **disagree** with the performance evaluation |  |
|  |  |
| **Employee’s Signature** | **Date** |
|  |  |
| **Rater’s Signature** | **Date** |
|  |  |
| **Reviewer’s Signature** | **Date** |

### DISPUTE RESOLUTION NOTICE:

An employee may dispute their final overall evaluation by following the Department’s Performance Management Dispute Resolution process. The process must be initiated within 5 calendar days from receiving the final evaluation. Additional information regarding the Performance Management Dispute Resolution Process is available from your Department’s HR unit.

If an employee intends to dispute the overall evaluation, a signature is still required, and have the employee check the box above which states “I have received and **disagree** with the performance evaluation.”

### EVALUATION RATINGS WITH LEVEL 1 OR 2:

If any individual rating, or an overall evaluation rating of a *1 - Unacceptable*, or *2 - Needs Improvement* on a final evaluation assessment, a performance improvement plan (PIP) or corrective action should be discussed with the employee. A written copy of the PIP or corrective action should be given with the final evaluation.

Performance management is the formalization of tracking improvement for a common goal:

* **Performance Improvement Plan (PIP)**: is a tool to give an employee with performance deficiencies the opportunity to succeed. It may be used to address failures to meet specific job goals or to improve behavior-related concerns. Outcomes may vary, including improvement in overall performance; the recognition of a skills or training gap.
* **Corrective Action Plan (CAP)**: is a method of documenting a problematic situation, identifying its root cause and clearly laying out a way of correcting the issue.