



EP11 – Accountability, Competence, and Autonomy

EP11: Choose three of the following:

EP11a: Provide one example, with supporting evidence, of the use of periodic formal performance review for the CNO that includes a self-appraisal and peer feedback process, demonstrating a plan for professional development.

Example EP11a: Periodic Formal Performance Review for Executive Director, Nursing Affairs, King Faisal Specialist Hospital and Research Centre-Jeddah

The Employee Performance Management Process at KFSHRC-J

KFSHRC General Organization has an established process for employee performance review as outlined in chapter IV-2 of the Employee Relations Manual (ERM). This is a mandatory annual process in which qualifying staff at all levels of the organization are expected to participate. The process, known as Employee Performance Management (EPM), covers the period from January 01 to December 31. It comprises a *planning phase* in which goals are set; a *mid-year phase* in which progress against the goals agreed upon and set in the planning phase is assessed; and an *end of year* or *final phase* when the employee's performance over the entire year is reviewed.

The components of the EPM process consist of an **employee self-appraisal** and the feedback from the **peer-review process**. Professional and personal goals are set, and a **development plan** designed and implemented based on the employee self-appraisal and peer review feedback.

Planning Phase – Peer Review and Goal Setting (January 01 to March 31)

The planning phase consists of peer review and goal setting. Goal setting in the KFSHRC General Organization EPM system consists of prescribed goals to align individual performance with organization requirements and personal and professional goals. Nursing Affairs sets annual goals at the organization level and cascades goals to all levels to ensure alignment of performance with Nursing Affairs' strategy and goals. Employees and line managers meet during the planning phase to agree on the employee goals, and these are documented in the EPM system.

Peer Review of Senior Executives (This process was implemented on February 01, 2022)

As a senior executive of KFSHRC, the CNO participates in the peer review process for senior executives, undertaken using a 360-degree review process. Between the manager and the employee, a maximum of eight multidisciplinary reviewers are identified in discrete roles of peer, customer, or subordinate. These should be individuals who have worked closely with the employee being reviewed. The review components are in the form of competencies related to Achievement Orientation; Employee Focus; Collaboration; Driving Change; Process/Quality Focus; Innovation; Patient/Customer Service Orientation.

The review format includes a self-assessment against the competencies and the assessment by the selected peers. Both appraisee and peers are requested to support their ratings with evidence. Peers are also asked to provide detail of areas of strength and areas for development. The latter are used to inform the appraisee's professional development plan.

Mid-Year Phase – Acknowledgement (May 01 to August 31)

The EPM cycle consists of a mid-year phase, where an acknowledgment is done between the appraisee and the main appraiser to review the progress of the set goals, and this is documented in the EPM system.

Final Phase – Assessment of Goal Achievement and Performance Appraisal (December 01 to January 31)

Employees are notified of this final phase by a system-generated email. The employee completes a self-assessment of performance against the goals for that year and against an identified set of technical and behavioral competencies. Goals are scored on a 1-5 scale, with one being the lowest and five being the highest score for an assessment item. The self-assessment is completed in the EPM system.

The appraisee forwards the document to the line manager in the EPM system. The line manager conducts their own review. An interview is held to discuss the self-appraisal and the line manager assessment, compare both assessments and arrive at the final performance rating.

Case Example: Executive Director, Nursing Affairs (ED, NA), O.B.E., BSN (Hon) RN, MSc, FInstLM

Planning Phase – Peer Review and Goal Setting (January 01 to March 31, 2021)

In January, the ED, NA was notified of the planning phase in the EPM system. As part of the planning phase, on April 27, 2021, the ED, NA met with her line manager, Nasser Mahdi M.D., General Manager KFSHRC-J, to finalize her goals for 2021, and documented these goals in the EPM system. Dr. Mahdi initiated the peer review process by requesting feedback from a number of peers to inform his assessment of ED, NA's performance. The 360-degree peer review process that is currently being used had not yet been formalized by January 2021.

Based on their discussion, the ED, NA and her line manager agreed that it was important for her to focus on leading Nursing Affairs to achieve the hospital's key performance indicators (KPIs) in relation to Falls and Hospital Acquired Pressure Injury (HAPI) stage 2 and above. As well as being a key safety goal, there would also need to be a targeted focus on process and quality. The ED, NA set a goal related to Falls and HAPI and ensured that these were reflected in the goals of Nurse Leaders. **Evidence EP11a.1 Performance Review Form with Goals Highlighted and Appraisee/ Appraiser Feedback**

Mid-Year Phase – Acknowledgement (May 01 to August 31, 2021)

The ED, NA met with her line manager, Dr. Mahdi, on June 22, 2021, to review progress of the goals set in the planning phase. At this meeting, it was agreed that while the goal for meeting the target as regards HAPI and FALLS was partially on track, the ED, NA was concerned about a recent increase in HAPI, and a series of actions were identified, including securing multidisciplinary buy-in to focus on HAPI and reviewing the clinical and operational processes that impact HAPI.

Final Phase – Assessment of Goal Achievement and Performance Appraisal (December 01, 2021, to January 31, 2022)

The ED, NA was notified to initiate the final phase of the EPM by a system-generated email. She completed her self-assessment of performance against the goals and assessed her level of technical and behavioral competencies. Goals are scored on a 1-5 scale, with one being the lowest and five being the highest score for an assessment item. **Evidence EP11a.2 Performance Review Form with self-appraisal scoring highlighted**

The ED, NA forwarded the self-assessment document to her line manager, Dr. Mahdi, who conducted his review and organized a review discussion with her on March 29, 2022, to compare their assessments and arrive at the final performance rating. **Evidence EP11a.3 Performance Review Form with appraiser scoring highlighted**

As part of the review, the ED, NA confirmed that while the goal for Falls had been met, the goal for HAPI had not been achieved. She agreed with Dr. Mahdi to continue

strengthening her focus on process and quality and establishing a multidisciplinary task force related to eliminating HAPI.

Peer Review Process- February 01 to March 31, 2022

On February 01, 2022, the ED, NA was notified of the commencement of the 360-degree review process for leaders and was invited to nominate a group of peers to provide feedback on her performance. The ED, NA and her line manager identified a group of peers, and the review tool was sent to them in the system. **Evidence EP11a.4 Peer Review Feedback for ED, NA**

Based on the feedback received to date, it has been identified that there is a difference between the ED, NA's self-rating in relation to Process and Quality Focus and the average ratings of her peers. This was identified as an area for development. Consequently, the ED, NA agreed with the General Manager to include in her 2022 goal set a number of goals focused on collaborating with others in process and quality improvement. In addition, Dr. Mahdi also agreed to support the ED, NA to attend the American Organization of Nurse Leadership (AONL) Conference, which would enable her to network and develop her knowledge in relation to best-in-class process and quality approaches in Nurse Leadership. **Evidence EP11a.5 Agreement to Attend the AONL Conference in April 2022**