

PERFORMANCE MANAGEMENT IMPLEMENTATION GUIDELINES

PERFORMANCE MANAGEMENT SYSTEM FOR THE CIVIL SERVICE OF LESOTHO

29(a)

PERFORMANCE REVIEW FORM *(For officers at Grades E to H)*

MINISTRY	DEPARTMENT	SECTION

Period of Review From:.....To.....

GENERAL GUIDANCE

1. This Form is part of the Performance Management System for the Civil Service of Lesotho. The basic purpose is to assess, as objectively as possible the employee's performance in the present job. The assessment will facilitate an objective and consistent basis for management decisions affecting advancements and employee development programmes.
2. For the appraisal to be objective, it is essential that the reporting officer:
(a) clearly understands the contents of the appraisees job description and job specifications; (b) properly knows the officer being appraised through work supervision of at least three months.
3. Before working on this Form, supervisors, or appraiser and appraisees should be familiar with the document Performance Management System for the Civil Service of Lesotho Guidelines.

PERSONAL INFORMATION

NAME OF OFFICER		EMPLOYEE NO.	
POSITION			
	<u>DAY</u>	<u>MONTH</u>	<u>YEAR</u>
FIRST APPOINTMENT			
APPOINTMENT TO PRESENT POST			
TERMS OF APPOINTMENT (Tick <input type="checkbox"/>)	Permanent <input type="checkbox"/>	Contract <input type="checkbox"/>	Probationary <input type="checkbox"/>
<u>COURSES ATTENDED DURING THE PERIOD OF REVIEW:</u>			
1.			
2.			
3.			
4.			
5.			
NAME OF APPRAISER			
POSITION OF APPRAISER			
PERIOD WORKING WITH THE PRESENT APPRAISER (I.e. YEARS / MONTHS).			
	<u>DAY</u>	<u>MONTH</u>	<u>YEAR</u>
FIRST APPOINTMENT OF APPRAISER			
APPOINTMENT TO PRESENT POST (APPRAISER)			

This Form is confidential and is held by the Supervisor during the review year. The appraisee should hold a copy. When completed the Form is held in the appraisees confidential file. It is available to Senior Management and Appraisee only. Three to four (3-4) copies should be completed and distributed as follows: -

1. One copy to remain at Headquarters
2. The Other one goes to the Department
3. The third and fourth to be held by the MPS and the Employee respectively.

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FIRST SEMESTER WORKPLAN AND RATINGS

GRADES E - H

Period from: _____ to _____

FIRST SEMESTER [April-September]								
Planning /Goal Setting <small>[BEGINNING OF THE FINANCIAL YEAR]</small>				First Semester Evaluation <small>[END OF SEPTEMBER]</small>				
Departmental Key Activities	Sub Activities	Key Performance Indicator (KPI)	Performance Standards / Targets	Actual Performance	Level of Achievement Rating			Comments on review (If any)
Key activities based on the job and agreed objectives	Sub activities for achieving key activities	State performance indicators which verify performance	An agreed minimum level of performance	Progress or actual work done.	How has the employee performed in the Key Tasks/objectives			
					Self	Sup	Joint	
AVERAGE WORK PLAN JOINT SCORE								

LEVEL OF ACHIEVEMENT RATINGS SCALE: 4= Exceeded 3= Fully Met 2 = Partly Met 1 = Did Not Meet

NB: AVERAGE WORKPLAN JOINT SCORE: (Total Joint Score / Total Number of Key Activities) NB: Round number to the nearest whole Number)

WORKPLAN AND EVALUATION APPROVALS					
Goal Setting <small>[Beginning of Financial Year / 1st Semester]</small>			Evaluation <small>[End of 1st Semester]</small>		
Appraisee Signature	Sign:	Date:	Appraisee signature	Sign:	Date:
Appraiser's Signature	Sign:	Date:	Appraiser's Signature	Sign:	Date:

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SECOND SEMESTER <i>[October-March]</i>								
Planning /Goal Setting <i>[BEGINNING OF THE 2nd Semester]</i>				First Semester Evaluation <i>[END OF 2nd Semester]</i>				
Departmental Key Activities	Sub Activities	Key Performance Indicator (KPI)	Performance Standards / Targets	Actual Performance	Level of Achievement Rating			Comments on review (If any)
Key activities based on the job and agreed objectives	Sub activities for achieving key activities	State performance indicators which verify performance	An agreed minimum level of performance	Progress or actual work done.	How has the employee performed in the Key Tasks/objectives			
					Self	Sup	Joint	
AVERAGE WORK PLAN JOINT SCORE								

LEVEL OF ACHIEVEMENT RATINGS SCALE: 4= Exceeded 3= Fully Met 2 = Partly Met 1 = Did Not Meet

NB: AVERAGE WORKPLAN JOINT SCORE: (Total Joint Score / Total Number of Key Activities) NB: Round number to the nearest whole Number)

WORKPLAN AND EVALUATION APPROVALS					
Goal Setting <i>[Beginning of the Financial Year / 2nd Semester]</i>			Evaluation <i>[End of Financial Year / 2nd Semester]</i>		
Appraisee Signature	Sign:	Date:	Appraisee signature	Sign:	Date:
Appraiser's Signature	Sign:	Date:	Appraiser's Signature	Sign:	Date:

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COMPETENCIES GRADE E-H								
1. KNOWLEDGE OF WORK <i>How well the officer knows work objectives, procedure and practice of the job</i>	4	3	2	1	RATING			REMARKS
					<i>Appraisee</i>	<i>Appraiser</i>	<i>Joint Rating</i>	
	<i>Fully informed</i>	<i>Satisfactory</i>	<i>Average</i>	<i>Poor</i>				
2. OUTPUT: ACCURACY <i>How accurate and reliable is work output Quality of work</i>	4	3	2	1				
	<i>Very Good</i>	<i>Satisfactory</i>	<i>Improving Slowly</i>	<i>Poor</i>				
3. TIME MANAGEMENT <i>Quality of Time Keeping, completion of assignments and level of absenteeism</i>	4	3	2	1				
	<i>Very Good</i>	<i>Good</i>	<i>Not satisfactory</i>	<i>Poor</i>				
4. INITIATIVE <i>How much initiative resulting in accomplishment is shown Degree of Self application</i>	4	3	2	1				
	<i>High level of initiative</i>	<i>Adequate</i>	<i>Below Average</i>	<i>None</i>				
5. INTERPERSONAL RELATIONS <i>Ability to get along with supervisors, supervisee, co-workers and the public</i>	4	3	2	1				
	<i>Very Good</i>	<i>Good</i>	<i>Somewhat lacking</i>	<i>Poor</i>				

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6. COMMUNICATION <i>Oral or written</i>	4	3	2	1					
	<i>Very Good</i>	<i>Good</i>	<i>Below Average</i>	<i>Poor</i>					
7. ORGANISATION OF WORK <i>Ability to plan, organise work</i>	4	3	2	1					
	<i>Highly Organised</i>	<i>Well Organised</i>	<i>Below Average</i>	<i>Poor</i>					
AVERAGE COMPETENCY JOINT SCORE									

LEVEL OF COMPETENCY RATING: 4 = Excellent 3 = Above average 2 = Average 1 = Below average

OVERALL PERFORMANCE ASSESSMENT SCORE	
OVERALL PERFORMANCE ASSESSMENT SCORE= <u>WORKPLAN SCORE + AVERAGE COMPETENCY SCORE</u>	
4. Exceed Expectations	Consistently exceeding targets than targets and competency above
3. Fully Met Expectations	Consistently meeting targets and competency at average level
2. Partially Met Expectations	Most targets partially met and competency at average
1. Did Not Meet Expectations	Performance less than required and competency below average

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GOAL ADJUSTMENTS FORM

To be completed during the review year (**Mid-year review**) as per the Performance Management Calendar. For Goals / Objectives / key activities / activities / KPI requiring adjustment due to unforeseen circumstances. If additional space required add an extra page.

Proposed Adjustment(s)	Progress to-date	Rationale for Adjustment
<u>Pillar /Goal / Objective:</u> 1. 2. 3.		
<u>Key Activity:</u> 1. 2. 3.		
<u>Activity:</u> 1. 2. 3.	Supervisor's Comment proposed adjustment(s)	Employee's Comment on proposed adjustment (s)
<u>Key Performance Indicator (KPI):</u> 1. 2. 3.	<hr/> <hr/> <hr/> <hr/>	<hr/> <hr/> <hr/> <hr/>
Employee's Signature: _____		Date: _____
Supervisor's Signature: _____		Date: _____
Head of Department/Section Concurrence: _____		Date: _____

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TRAINING AND DEVELOPMENT NEEDS

Period: From To

<i>Development Planning (this portion of the Appraisal Form will be copied and forwarded (by HR) to the Training Section and used as the basis for the following year's training needs analysis).</i>	
Name:	Personal No:
Designation:	Grade:
Ministry:	Department/Section:
DEVELOPMENT NEEDS	DEVELOPMENT SUGGESTIONS
(a) <u>Technical Skills (Specify):</u> 1. 2.	
(b) <u>Leadership Skills (Specify):</u> (Coaching on the job, course, study tour) 1. 2.	
c) <u>Other (Specify)</u>	

Employee's Signature.....

Supervisor's Signature

Date.....

Date.....

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PERFORMANCE REVIEW

To be completed bi-annually at **Mid-Year review and Final Year** review or when an employee leaves a position.

First Semester (End of September)	Second Semester (End of March)
Details of additional contributions made to Ministry and elsewhere: (To be filled-in by the Appraiser) <hr/> <hr/> <hr/> <hr/>	Details of additional contributions made to Ministry and elsewhere: (To be filled-in by the Appraiser) <hr/> <hr/> <hr/> <hr/>

Overall Remarks/Comments

Employee: <hr/> <hr/> <hr/> <hr/>	Employee: <hr/> <hr/> <hr/> <hr/>
Signature:.....Date:.....	Signature:.....Date:.....
Supervisor: <hr/> <hr/> <hr/> <hr/>	Supervisor: <hr/> <hr/> <hr/> <hr/>
Signature:.....Date:.....	Signature:.....Date:.....
Head of Department /Sections	Head of Department /Sections

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<hr/> <hr/> <hr/> <p>Signature:.....Date:.....</p>	<hr/> <hr/> <hr/> <p>Signature:.....Date:.....</p>
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[END]