

Instructions: For a review type of Annual, employees complete self-rating form electronically and emails to supervisor. Supervisor prepares the annual review and meets with employee to review, discuss, and finalize the review. Upon completion sign and send to Human Resources via email to UNMMGHR@unmmg.org for retention in the official personnel file. In order to ensure proper handling, please make sure you email to the aforementioned Human Resources mail box.

If this is a Self-Rating, this form is to be retained by the supervisor in the employee’s departmental file. For more information see UNMMG Performance Review Policy/Procedure #3430 or call 272-3201.

Employee Name:

Supervisor Name:

Job Title:

Review Type: Annual 6 Mon. Intro Self-Rating

Department:

Review Period: From: To:

Evaluation of Previous Year Performance

Evaluation of Job Responsibilities	Successful	Not Successful
Job Knowledge: Demonstrates proficiency in knowledge and skills required of the job; contributes to the goals and mission of the department.	<input type="checkbox"/>	<input type="checkbox"/>
Productivity: Successfully completes regular assignments in a timely and efficient manner.	<input type="checkbox"/>	<input type="checkbox"/>
Quality of Work: Ensures work is of proper quality; checks for accuracy.	<input type="checkbox"/>	<input type="checkbox"/>
Initiative: Takes it upon oneself to complete regular tasks; seeks additional skills, information, and available resources to ensure high quality.	<input type="checkbox"/>	<input type="checkbox"/>
Continuous Improvement: Participates in initiatives to improve work processes. Demonstrates flexibility in response to new or improved work processes.	<input type="checkbox"/>	<input type="checkbox"/>
Customer Service/Focus: Actively seeks opportunities to provide quality service. Identifies service needs and responds appropriately.	<input type="checkbox"/>	<input type="checkbox"/>
Problem Solving: Uses sound judgment and effective use of resources in resolving problems; Demonstrates good understanding of the larger issues related to the problem or concern.	<input type="checkbox"/>	<input type="checkbox"/>
Interpersonal Relationships: Exercises emotional intelligence. Communicates and works with others in a professional, pleasant, and cooperative manner. Demonstrates understanding of the value of diversity and effective teamwork, even under periods of increased pressure or heavy workloads.	<input type="checkbox"/>	<input type="checkbox"/>
Core Values: Employee demonstrates the UNMMG Core Values. <ul style="list-style-type: none"> • Attitude (positive attitude, involved, flexible, courteous, creative, be supportive of others). • Service (hospitable, responsive, accountable, honest communications and follow through, meeting the needs of our customers, good listening and communication skills). • Patient-Centric (mindful of patient’s feelings and emotions, continuously strive to improve the patient experience, show our patients how much we care about them). • Integrity (open, transparent, committed, honest with no hidden agendas). • Respect (teamwork, empowerment, unity, collaboration, fairness, value our differences and diversity). • Excellence (quality, financial stewardship, creativity, innovation, best practices, consistency, raising the bar, positive clinical outcomes). 	<input type="checkbox"/>	<input type="checkbox"/>
Required Training: Has the employee completed all required and job-specific training obligations? Make sure a copy of the completed learning transcripts from Learning Central are attached to the completed review. <input type="checkbox"/> YES <input type="checkbox"/> NO		

Supervisor Training Responsibility: If the employee is in a supervisory role, has the employee's staff completed all required and job-specific training obligations? <input type="checkbox"/> YES <input type="checkbox"/> NO
If employee was exceptionally successful in any area(s) above, you may provide additional feedback here:
If 'Not Successful' was selected for any of the above areas, enter comments addressing each area identified:
Overall, for job responsibilities, was the employee: <input type="checkbox"/> Successful <input type="checkbox"/> Not Successful

Evaluation of Goals

List SMART goals (Specific, Measureable, Achievable, Results-focused, and Time-bound) established for the past evaluation period. Describe how the employee accomplished those goals and assign a rating. New goals established during the review period should be evaluated and attached separately.	
Goal 1 - include objectives and measures:	<input type="checkbox"/> Exceptional <input type="checkbox"/> Successful <input type="checkbox"/> Not successful <input type="checkbox"/> Deferred or in progress
Goal 2 - include objectives and measures:	<input type="checkbox"/> Exceptional <input type="checkbox"/> Successful <input type="checkbox"/> Not successful <input type="checkbox"/> Deferred or in progress
Goal 3 - include objectives and measures:	<input type="checkbox"/> Exceptional <input type="checkbox"/> Successful <input type="checkbox"/> Not successful <input type="checkbox"/> Deferred or in progress
Goal 4 - include objectives and measures:	<input type="checkbox"/> Exceptional <input type="checkbox"/> Successful <input type="checkbox"/> Not successful <input type="checkbox"/> Deferred or in progress
Overall, with regard to accomplishing goals, was the employee: <input type="checkbox"/> Successful <input type="checkbox"/> Not Successful	

Future Goal Planning

Goal 1 - include objectives and measures:
Goal 2 - include objectives and measures:
Goal 3 - include objectives and measures:

Goal 4 - include objectives and measures:

Next step: Supervisor schedules evaluation discussion meeting with employee.

Acknowledgements

Once the evaluation discussion has occurred, the employee and supervisor may enter any final comments below and must sign the Performance Review and Planning form, acknowledging the evaluation occurred.

Employee Comments:

Supervisor Comments:

Signature denotes that you have discussed, read, and understand all comments in this form. It does not necessarily indicate agreement.

Employee Signature

Print Name

Date

Supervisor Signature

Print Name

Date