**Department** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**Service/ Group**: Civil Servant / Institutional / MTI

**Cadre:** Teaching / General

For the Period: 01/01/\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_ To period: 31/12/\_\_\_\_\_\_\_\_\_\_

Starting Ending

**Instructions for Writing the Performance Appraisal Report**

1. This annual performance evaluation aims to promote communication and provide useful feedback about job performance, facilitate better working relationships, provide a historical record of performance, and contribute to professional development. Continuous feedback on employee performance is an important aspect of a job. By providing constructive feedback regularly, the administration is giving the employee information about work performance and, if needed, allowing appropriate time to make corrections in performance and/or behavior.
2. Please fill the forms clearly in legible handwriting.
3. Wherever applicable and necessary, support your performance dimensions with documentary evidence attached as annexures.

**Form- A**

**TO BE FILLED IN BY THE OFFICER REPORTED UPON**

Name (in Block Letters) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Personnel Number \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date of Birth \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date of Entry in Service\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Reporting period (with BPS if applicable)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Academic Qualifications\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Supervisor for your Appraisal\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |
| --- |
| The term “Supervisor” means Chairperson of the Department. For Chairpersons of the Departments, the supervisor means Medical Director on the Clinical Side and Vice Dean on the Basic Sciences side.  Your designated Supervisor Must be in a supervisor Role for at least 03 months. |

**What was your Main Job Description/Tasks for the Reporting Time Period**

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

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**Form- A**

**Self-assessment form and provision of documentary evidence of performance**

**Instruction**: The first part of this form does not carry any marks, while the second form carries 40% marks out of total 100. The information you provide is essential for annual appraisal process. Complete forms need to be returned to the Human Resources Department.

**Form-A1:** Please provide the following details honestly and candidly.

|  |  |
| --- | --- |
| 1 | **Has the past year been good/bad/satisfactory or otherwise for you, and why?** |
| 2 | **What elements of your job do you find most difficult?** |
| 3. | **What elements of your job interest you the most?** |
| 4. | **What do you consider to be your most important aims and tasks in the coming year?** |
| 5. | **What action could you take to improve your performance in your current position?** |
| 6. | **What action could your supervisor take to improve your performance?** |

**Form- A-2:** Please Provide the Following Details for the Reporting Time Period. Attach Documentary Evidence in support of your Activities as annexures. Write NA if not applicable. Don’t write in the column for HR Section. The marks obtained will be verified by the Human Resources department of the MTI KMC/KTH. This section will carry 40% weightage.

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Performance documents with evidence (40%)** | | **No. (attach evidence as annexures)** | **Marking scheme** | | **For supervisor only (Marks attained)** | **For HR department only** |
| 1 | Number of undergraduate/postgraduate Exams Conducted |  | 8 | 4 exams |  |  |
| 6 | 3 exams |
| 4 | 2 exams |
| 2 | 1 exam |
| 0 | None |
| 2 | Number of Published articles in indexed journals |  | Maximum marks: 4 | * One mark for each article * 4 marks for one article in the Impact factor journal |  |  |
| 3 | Posters/Presentations at local/international forums |  | 4 | 2 posters / presentations |  |  |
| 2 | 1 posters / presentations |
| 0 | No poster/ presentation |
| 4 | Ongoing Research Studies/Clinical Trials |  | 1 mark for each (Max. 4 marks) | Accepted proposal for descriptive studies |  |  |
| 2 marks for each (Max. 4 marks) | Accepted proposal for RCTs |
| 5 | CME hours attained |  | 8 | 20 CME hours |  |  |
| 6 | 15 CME hours |
| 4 | 10 CME hours |
| 2 | 5 CME hours |
| 0 | Less than 5 hours |
| 6 | Number of Clinical / educational/teaching Audits conducted / Supervised |  | 4 | 4 audits |  |  |
| 3 | 3 audits |
| 2 | 2 audits |
| 1 | 1 audit |
| 0 | 0 audits |
| 7 | Membership of institutional committees |  | Maximum 4 marks | 2 marks for chairperson |  |  |
| 1 mark for Member |
| 8 | No. of teaching sessions conducted |  | 4 | >100 teaching sessions |  |  |
| 3 | 50-99 teaching sessions |
| 2 | 30-49 teaching sessions |
| 1 | 15-29 teaching sessions |
| 0 | <15 teaching sessions |
| Marks obtained | | |  | |  |  |
| Total marks | | |  | |  | 40 |

**Form- B (i)**

**Students` feedback form for clinical sciences faculty**

**(This form will be filled by a minimum of 20 students (postgraduate students for clinical faculty)**

|  |
| --- |
| **Instructions**: Please rate your assessment of this doctor honestly, being as accurate as you can. Students` evaluation will be given 10% weightage of the annual appraisal aggregate. Completed forms need to be returned to the Human Resource Department.  Use the rating scale given below. |

**Rating scale: 1 = Poor, 2= Inadequate, 3= Good, 4= Excellent**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| S. No | **Performance Dimensions** | **Poor**  **1** | **Inadequate**  **2** | **Good**  **3** | **Excellent**  **4** |
|  | Marks for each item | 0.25 | 0.5 | 0.75 | 1 |
| 1 | The consultant`s / teacher`s knowledge in the relevant specialty |  |  |  |  |
| 2 | The organizational efficiency of the consultant / teacher |  |  |  |  |
| 3 | The explanation of the basis of the clinical decisions by the consultant/teacher |  |  |  |  |
| 4 | The degree to which the consultant / teacher facilitated my acquisition of technical / learning skills (e.g. Surgical, laboratory, diagnostic, clinical) |  |  |  |  |
| 5 | The degree to which the consultant / teacher encouraged self-learning and independent thinking |  |  |  |  |
| 6 | The degree to which the consultant delegated appropriate patient care in a multidisciplinary manner |  |  |  |  |
| 7 | The category to which the consultant / teacher can be a good role model |  |  |  |  |
| 8 | The degree to which the consultant / teacher displayed a positive attitude towards house-staff, paramedics and support staff |  |  |  |  |
| 9 | The degree to which the consultant/teacher modeled a humane and caring attitude towards patients/students |  |  |  |  |
| 10 | The degree to which the consultant/teacher managed and encouraged cost-effective use of drugs / other resources |  |  |  |  |
| **Total marks obtained** | | | | |  |
| **Maximum score** | | | | | **10** |

**Form- B (ii)**

**Students` feedback form for basic sciences faculty**

**(This form will be filled by a minimum of 20 undergraduate students for basic sciences faculty)**

|  |
| --- |
| **Instructions**: Please rate your assessment of this doctor honestly, being as accurate as you can. Students` evaluation will be given 10% weightage of the annual appraisal aggregate. Completed forms need to be returned to the Human Resource Department  Use the rating scale given below. |

**Rating scale: 1 = Poor, 2= Inadequate, 3= Good, 4= Excellent**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| S. No | **Performance Dimensions** | **Poor**  **1** | **Inadequate**  **2** | **Good**  **3** | **Excellent**  **4** |
|  | Marks for each item | 0.25 | 0.5 | 0.75 | 1 |
| 1 | Facilitates students in times of learning, and examinations preparations |  |  |  |  |
| 2 | Demonstrates personal integrity, discipline and respect for students, seniors and colleagues |  |  |  |  |
| 3 | Has adequate knowledge of the subject |  |  |  |  |
| 4 | Creates handouts, notes, and other teaching materials for students |  |  |  |  |
| 5 | Provides learning objectives, presents contents in logical manner, provides feedback, provides learning guidance and remains interactive during lectures |  |  |  |  |
| 6 | Takes interest in SGDs, practicals and demonstrations, keeping it student centered rather than teacher centered |  |  |  |  |
| 7 | Is always available for students` support and help in times of difficulty |  |  |  |  |
| 8 | Takes keen interest in dealing with students` problems and provides adequate time for student`s mentoring |  |  |  |  |
| 9 | Delivers highest quality of teaching and shows concern regarding students` growth and development |  |  |  |  |
| 10 | The teacher`s quality of teaching is satisfactory |  |  |  |  |
| Total marks obtained | | | | |  |
| Maximum score | | | | | **10** |

**Form C (i) - Supervisor`s feedback form (to be filled 1st reporting officer)**

**(This form will be filled by the chairperson of the respective department for faculty):**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **S. No** | **Performance Dimensions** | **Poor**  **1** | **Inadequate**  **2** | **Good**  **3** | **Excellent**  **4** |
|  | Marks for each item | 0.5 | 1 | 1.5 | 2 |
| 1 | **Administration**: Meets departmental service standards and participate in quality management, committee works, meeting attendance. Work as HOD or Incharge where applicable include contribution to special projects.  *\*Provide evidence of the following as annexures*   * *Numbers of committees joined* * *Evidence of committees’ meetings attended* |  |  |  |  |
| 2 | **Patient care:**   1. Quantum of clinical work 2. Adherence to hospital protocols 3. Quality of clinical work 4. Quality of record keeping 5. Clinical judgment 6. Behavior towards patients and staff   \***For basic sciences:**  **Student teaching:**   1. Quantum of educational work 2. Adherence to college protocols 3. Quality of teaching 4. Behaviors towards students and staff |  |  |  |  |
| 3 | **Team Spirit**: Exhibit team spirit in the performance of duties to achieve overall common objectives |  |  |  |  |
| 4 | **Decision Making:** Takes rational, sound and timely decisions based on relevant information and facts |  |  |  |  |
| 5 | **Developing staff:** Identifies and motivates other to improves their capabilities and standard of performance |  |  |  |  |
| 6 | **Punctuality**: Punctual and rarely absent |  |  |  |  |
| 7 | **Interpersonal skills:** Builds persuasive arguments on logic/merit without hurting others feelings. |  |  |  |  |
| 8 | **Leadership**: Develops in subordinates the will and desire to work towards common objectives |  |  |  |  |
| 9 | **Efficiency and orientation:** Looks for the best use of resources, actively seeks ways to improve current systems, method and structure. Demonstrate deep concern and is judicious with hospital / college funds, property and interest. |  |  |  |  |
| 10 | **Adaptability**: Able to alter behavior and opinions in the light of new information and respond to changing situation |  |  |  |  |
| Total marks obtained | | | | |  |
| Maximum score | | | | | 20 |

**Form C - (ii) Supervisor`s feedback form (to be filled by 2nd reporting officer)**

**(This form will be filled by the medical director for clinical sciences faculty and vice dean for basic sciences faculty):**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **S. No** | **Performance Dimensions** | **Poor**  **1** | **Inadequate**  **2** | **Good**  **3** | **Excellent**  **4** |
|  | Marks for each item | 0.5 | 1 | 1.5 | 2 |
| 1 | **Administration**: Meets departmental service standards and participate in quality management, committee works, meeting attendance. Work as HOD or Incharge where applicable include contribution to special projects.  *\*Provide evidence of the following as annexures*   * *Numbers of committees joined* * *Evidence of committees’ meetings attended* |  |  |  |  |
| 2 | **Patient care:**   1. Quantum of clinical work 2. Adherence to hospital protocols 3. Quality of clinical work 4. Quality of record keeping 5. Clinical judgment 6. Behavior towards patients and staff   \***For basic sciences:**  **Student teaching:**   1. Quantum of educational work 2. Adherence to college protocols 3. Quality of teaching 4. Behaviors towards students and staff |  |  |  |  |
| 3 | **Team Spirit**: Exhibit team spirit in the performance of duties to achieve overall common objectives |  |  |  |  |
| 4 | **Decision Making:** Takes rational, sound and timely decisions based on relevant information and facts |  |  |  |  |
| 5 | **Developing staff:** Identifies and motivates other to improves their capabilities and standard of performance |  |  |  |  |
| 6 | **Punctuality**: Punctual and rarely absent |  |  |  |  |
| 7 | **Interpersonal skills:** Builds persuasive arguments on logic/merit without hurting others feelings. |  |  |  |  |
| 8 | **Leadership**: Develops in subordinates the will and desire to work towards common objectives |  |  |  |  |
| 9 | **Efficiency and orientation:** Looks for the best use of resources, actively seeks ways to improve current systems, method and structure. Demonstrate deep concern and is judicious with hospital / college funds, property and interest. |  |  |  |  |
| 10 | **Adaptability**: Able to alter behavior and opinions in the light of new information and respond to changing situation |  |  |  |  |
| Total marks obtained | | | | |  |
| Maximum score | | | | | 20 |

**Form - D**

**Faculty performance appraisal review**

**(To Be Filled By Vice Dean)**

|  |
| --- |
| **Instructions:** Please refer to the self-evaluation section of the employee while filling this section. Ensure that the information supplied by employees is correct in light of the evidence attached and by the HR reports. |

**Aggregate Score**

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Sno** | **Objective Assessment (form-A)** | **Student s` Feedback (form-B)** | **1st reporting officer)** | **2nd reporting officer** | **IBP**  **(for clinical sciences faculty incl. Pathology)** | | **Yearly attendance**  **(for basic sciences faculty excl. Pathology)** | | **Total** |
| 10 | Full time attendance | 10 | >90% |
| 5 | Irregular / part-time | 8 | 80-89% |
| 0 | No IBP | 6 | 70-79% |
| 0 | <70% |
| Weightage | 40 | 10 | 20 | 20 | 10 | | 10 | | 100 |
| Scores obtained |  |  |  |  |  | |  | |  |

**Overall Assessment of the Appraises (Tick Mark the Relevant Box)**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Performance unacceptable- may continue with counselling** | **May continue on post, but performance is below optimum level** | **Satisfactory-achieved required objectives** | **Continued high level of performance in most aspects** | **Performed exceedingly well in nearly all aspects** | **Excellent in all phases of performance- A role model and a leader** |
| Less than 40 | 40-49 | 50-59 | 60-69 | 70-79 | 80 and above |
|  |  |  |  |  |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **Chairperson`s Comments** | | | |
|  | | | |
| Name & Signature |  | Date: |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **Vice Dean/Medical Director Comments** | | | |
|  | | | |
| Name & Signature |  | Date: |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **Dean’s Comments** | | | |
|  | | | |
| Name & Signature |  | Date: |  |