**Performance Plan and Review**

**Employee**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**Date**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Job Title**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**For Period** *(e.g., Jan – Dec 2015): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*

**Supervisor**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Performance Goals**

|  |  |  |
| --- | --- | --- |
| **Related to Division Strategic Priority/Goal:** e.g., Increase Community Primary Care Capacity & Support Strength of Attachment – Within Practices | | |
| ***Goal:*** *SMART (Specific, Measureable, Achievable, Relevant, Time Bound)*  Lead the implementation of the Practice Survey Assessment Questionnaire by Sept 2014 | | |
| **Activities:** | **Target Date** | **Completed** |
| ***List of activities that you will undertake to achieve the goal***   1. Develop customized Practice Self-Assessment Questionnaire (PSAQ) 2. Pilot test PSAQ with 2-3 Division GPs 3. Roll-out PSAQ through practice meetings 4. Compile and analyse results 5. Develop final PSAQ | March  April  June  Aug  Sept |  |
| **Results/Comments:** | | |
| *Employee and/or supervisor completes this section for goal review meeting (could be at informal quarterly meeting, and ideally formal review bi-annually).* | | |

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| --- | --- | --- |
| **Related to Division Strategic Priority/Goal:** e.g., Increase Community Primary Care Capacity & Support Strength of Attachment – Within Community | | |
| **Goal:**Administer Physician Recruitment Program (on-going) | | |
| **Activities:** | **Target Date** | **Completed** |
| 1. Establish physician recruitment committee, including terms of reference 2. Develop and implement recruitment strategy 3. Develop measurement tools and processes, including post-recruitment interviews | March  June  June |  |
| **Results/Comments:** | | |
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| --- | --- | --- |
| **Related to Division Strategic Priority/Goal:** | | |
| **Goal:** | | |
| **Activities:** | **Target Date** | **Completed** |
|  |  |  |
| **Results/Comments:** | | |
|  | | |

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| --- | --- | --- |
| **Related to Division Strategic Priority/Goal:** | | |
| **Goal:** | | |
| **Activities:** | **Target Date** | **Completed** |
|  |  |  |
| **Results/Comments:** | | |
|  | | |

**Development Goals**

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| --- | --- | --- | --- |
| **Development Goal #1:** e.g., Increase ability to manage complex projects  **I will know I have developed this skill when I (am able to) / (achieve the following business results):** e.g., Projected timelines are achieved, deliverables are on-track… | | | |
| **Activity** | **Activity Type** | **Target Date** | **Completed** |
| 1. Attend project management course 2. Practice using formal project management tools | FT  SD/M/C | March  June |  |
| *Activity Type: SD=Self-directed, PB=Project-based, FT=Formal training, M/C=Mentors & colleagues* | | | |
| **Results/Comments:** | | | |
|  | | | |
| **Development Goal #2:**  **I will know I have developed this skill when I (am able to) / (achieve the following business results):** | | | |
| **Activity** | **Activity Type** | **Target Date** | **Completed** |
|  |  |  |  |
| *Activity Type: SD=Self-directed, PB=Project-based, FT=Formal training, M/C=Mentors & colleagues* | | | |
| **Results/Comments:** | | | |
|  | | | |

Performance Elements

1. Job knowledge: Understands and performs the requirements of the role description

🞏 Does Not Meet Expectations 🞏 Meets Expectations 🞏 Exceeds Expectations

Comments:

1. Technical ability: Demonstrates the technical knowledge required for the role

🞏 Does Not Meet Expectations 🞏 Meets Expectations 🞏 Exceeds Expectations

Comments:

1. Quality of work: Completes all responsibilities to our standards of excellence

🞏 Does Not Meet Expectations 🞏 Meets Expectations 🞏 Exceeds Expectations

Comments:

1. Quantity of work: Completes the expected amount of work

🞏 Does Not Meet Expectations 🞏 Meets Expectations 🞏 Exceeds Expectations

Comments:

1. Values: Demonstrates our organizational values. Seeks opportunities to learn about and practice values alignment.

🞏 Does Not Meet Expectations 🞏 Meets Expectations 🞏 Exceeds Expectations

Comments:

1. Approach: Displays enthusiasm, self-motivation, cooperation, responsiveness and a sincere interest in the role and to our team, members and stakeholders. Maintains high engagement level.

🞏 Does Not Meet Expectations 🞏 Meets Expectations 🞏 Exceeds Expectations

Comments:

Overall Assessment

🞏 Exceeds overall expectations

🞏 Meets overall expectations

🞏 Does not meet overall expectations

Supervisor Comments

Employee Comments

By signing, both parties acknowledge that they have read and discussed the contents of the performance plan and review form.

Employee Name Employee Signature Date

Supervisor Name Supervisor Signature Date