

The Knowledge and Skills Framework and appraisal guidance for members and employers outside of the NHS



Royal College
of Nursing

Contents

Introduction	1
Appraisal objectives	3
Evidence	4
Useful publications and sources of reference	8

Published by the Royal College of Nursing, 20 Cavendish Square,
London, W1G 0RN

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Introduction

This guide will help you prepare for appraisal and personal development reviews (PDRs) carried out in the workplace. It gives pointers on discussing with your reviewer what evidence you should gather so that you can maximise your professional development and competencies, working towards future appraisals and development reviews.

It is important to use this guidance alongside the *NHS Knowledge and Skills Framework (NHS KSF)* and the *Development Review Process* which allow for a thorough approach to the development review process. This guide is not meant as a substitute for the *NHS KSF*. The RCN has produced a series of shorter guides to the *NHS KSF*, which are referenced at the end of this guide and are available from RCN publications. The *NHS KSF* and appraisal guidance is important for its role in meeting planned revalidation requirements for the Nursing and Midwifery Council.

Your employer may use another competency framework: this should not be based on individual behaviour, but on an outcomes based approach.

The RCN Competency Framework and range of competency guides have been mapped against the *NHS KSF* and Skills for Health competencies; these guides can be found on the RCN website, see references.

The KSF process combines both appraisal and personal development so is more than just a process for appraising staff. The development review focuses on the individual's development whereas appraisal focuses on the individual's performance in the job including any specific personal objectives.

Appraisal should be seen as one part of the development review process i.e. can be added to the development review.

If your employer is not using the *NHS KSF* they should still be carrying out appraisals with you and assisting you in your personal development in the workplace. This is essential good practice.

Why are appraisals and personal development important for nursing staff and their employers?

- appraisals evaluate an individual's contribution to the organisation
- appraisals and personal development benefit the individual and the employer
- by undertaking appraisals and focusing on personal development a sense of direction can be achieved when setting objectives. Objectives for employees should be mutually agreed between line manager and the member of staff concerned
- the process encourages a better understanding of the roles played by nursing staff in the organisation
- evidence gathered during this process may be used for the NMC as part of the revalidation process
- outcomes should be evident at the review stage of the appraisal process.

One piece of research has shown that good team working and appraisals are linked to overall patient mortality:

“The evidence reported by Borrill et al. (2002) indicates that the further we use an individual based approach to reviewing staff and their development the more we are going to impact on patient mortality. This research takes us to the heart of why health and social care organisations and structures exist – to provide safe and effective care. If we can see from research how individual review processes can so significantly impact on the outcomes of our patients, we must fully engage with them. A hospital which appraises around 20% more staff, and trains appraisers, is likely to have 1,090 fewer deaths per 100,000 admissions.”*

But – it is not just a matter of doing reviews – it is a matter of making reviews meaningful.

* “Patients” is used to refer to patients, clients and service users.

Appraisal objectives

Even though it does sound clichéd, objectives should be **SMART**:

Smart/stretching/specific

Measurable

Agreed/achievable

Realistic/relevant

Time-related.

The process should require nursing staff to agree learning or development objectives which describe what the individual should be able to demonstrate, within the agreed time frame.

Creating a portfolio

This guide will help you shape a portfolio of evidence. It is always good practice to keep an up-to-date portfolio of evidence about your practice and professional development. Your portfolio will be used in PDRs and will help you and your manager identify learning and development needs. It will also allow you to assess progress against your personal development plan throughout the year, and if you keep it constantly updated, you can save on preparation time for your annual appraisal.

You may find it beneficial to build an online portfolio on the RCN Learning Zone – the RCN Career Service advisors can help you with this, see references for contact details. However always remember that your portfolio is yours alone. In any PDR process you might find it helpful to share some or all of its contents with your employer – however you are not obliged to do so.

Evidence

When collecting evidence it is important to consider **why, what, where** and **how**.

Why do you need to gather evidence?

Evidence provides objective information on the level of knowledge and skills you use to perform different tasks and activities in your job. Your reviewer will not always be aware of all the skills and knowledge you bring to your role, so it is important to have objective evidence so you can demonstrate how you practice, which will in turn help identify your learning and development needs.

Furthermore, within the White Paper: *Trust, assurance and safety: the regulation of health professionals in the 21st Century (2007)*, there are two key passages linking appraisal and professional revalidation, they are as follows:

2.32 Professionals will fall broadly into one of three groups for revalidation in England (the same process will be adapted in the other countries):

For employees of an approved body, for example nurses, dieticians or paramedics working in an NHS organisation or a licensed private or independent sector provider, evidence to support revalidation will be provided as part of the normal staff management and clinical governance systems, with employers providing recommendations to the professional regulators.

For those including self-employed contractors, performing services commissioned by NHS primary care organisations, the revalidation process will be carried out under the supervision of either the NHS commissioning organisation or the regulatory body.

2.33 The Government agrees that the appraisal process within the NHS, which will be a central component of revalidation, should be both formative and summative, to ensure objectively that the required standards are met. Information gathered under the Knowledge and Skills Framework should be used as far as possible as the basis for revalidation, with any additional requirements justified by risk analysis.

Therefore there are good reasons for you and your employer to carry out a good appraisal and personal development process in the workplace.

What sort of evidence do you need?

Although evidence gathering is used for other purposes, such as National Vocational Qualifications (NVQs) or formal accreditation, evidence for KSF, for example, is not as formal. In fact, the *NHS KSF* states (page 30):

“The development review should not be a ‘paper chase’ – all of the evidence should be available naturally in the workplace, as the development review is about what an individual does at work.”

Before or during your first PDR, discuss with your reviewer the type of evidence you will need to gather for now and in the future. The requirements for KSF evidence, which apply to any appraisal not just those carried out using KSF, should be:

- **sufficient:** there must be enough of it to match your work against all the dimensions, levels and indicators in your KSF (or other) outline. However, one piece of evidence can be used for more than one indicator across different dimensions
- **relevant:** to your post and the levels within the KSF (or other) outline for your post. Relevant to any training and development needs jointly identified
- **up-to-date:** even if you have achieved the full KSF (or other) outline for your post, you must still provide evidence to your reviewer that your knowledge and skills are being currently and consistently used. If not, further learning and development may be required.

You could consider using information gathered using the competency guidance produced by one of the RCN professional forums. Details of the work of forums can be found on the RCN members website. This would support your professional development according to the clinical area that you work in.

You may also wish to look at the work done by Skills for Health in the area of competencies. Skills for Health is the organisation established under the Learning and Skills Council, to produce competencies for use within health care.

Example of a KSF dimension (competence)

Communication level two – communicate with a range of people on a range of matters.

The level requires that evidence should show what sort of information you have communicated and to whom. This should be a routine occurrence rather than a one-off.

If there were differing levels of understanding, you may have to adjust your communication skills accordingly so that your communication can be understood by all. For example, communicating with people who have a hearing disability, or with people who do not have English as their first language.

For example, developed or uses a communication sheet for a particular client, or evidence of care planning for communication problems for particular clients.

Where should I record the evidence?

Start putting together an organised record of evidence, a portfolio, which contains evidence that you can relate to your post. You may already have a suitable portfolio that you can use – perhaps a training record of continuous professional development (CPD).

In your portfolio, you will need:

- **contents page or index:** to link the evidence with the relevant parts of your job description and or KSF outline if you use the KSF
- **PDR records and personal development plans**
- **relevant personal and professional information:** CV, job description and person specification, certificates of achievement/education, courses or seminars attended, reflective logs
- **your evidence:** how you use your skills and knowledge in your post
- **traceability:** a record of how and when you gathered the evidence, to show that it is up-to-date. The portfolio should also allow for evidence to be updated, superseded and archived as appropriate.

How to gather and record evidence

Evidence can be presented in different ways, as long as it meets the criteria of sufficiency, relevance, and of the appropriate level. If it doesn't conform to these requirements, it could be rejected by the reviewer.

If you are not sure about using a particular type of evidence, check with your reviewer at your first PDR to make sure both parties are happy with what is required in the future.

There are different ways of recording evidence depending on the area of your activity it covers. Evidence could be:

- **oral:** this can be discussed “live” during your PDR, as long as the reviewer has background knowledge of the examples of your practice. Ideally, however, you would use some written record to support verbal evidence. This could be, for example, a witness statement or a summary of feedback received after an event from a patient, client, colleague or supervisor
- **handwritten:** this includes reports (formal and informal) and other records such as minutes from meetings or information leaflets
- **electronic:** databases, emails, presentations, graphs, diagrams, digital photos, that you have produced.

Useful publications and sources of reference

Borrill C, West M, Dawson J, Shapiro D, Rees A, Richards A, Garrod S, Carletta J and Carter A (2002) *Team working and effectiveness in health care*, Aston: Aston Centre for Health Service Organisation Research, University of Aston

Department of Health (2004) *The NHS Knowledge and Skills Framework (NHS KSF) and the Development Review Process*, London: Stationery Office (DH 40440)

Department of Health (2007) *White Paper: Trust, assurance and safety: the regulation of health professionals in the 21st century*, Stationery Office: London (CM 7823)

Royal College of Nursing (2006) *NHS Knowledge and Skills Framework outlines for Nursing Posts: RCN Guidance for nurses and managers in creating KSF outlines in the NHS*, London: RCN (Publication code 002 775)

Royal College of Nursing (2006) *Discussing and preparing evidence at your first personal development review: guidance for RCN members on the NHS Knowledge and Skills Framework*, London: RCN (Publication code 003 061)

- Developing Skills in Health Care www.skillsforhealth.org.uk
- NHS Employers website www.nhsemployers.org.uk
- NHS Knowledge and Skills Framework online toolkit www.e-ksf.org
- RCN Careers Service wrg@rcn.org.uk or 0845 408 4391
- RCN Learning Zone www.rcn.org.uk/learningzone
- RCN forums www.rcn.org.uk/forums
- RCN website www.rcn.org.uk



September 2009

Published by the Royal College of Nursing
20 Cavendish Square
London
W1G 0RN
020 7409 3333
www.rcn.org.uk

**The RCN represents nurses and nursing,
promotes excellence in practice and
shapes health policies**

Publication code 003 550
ISBN code 978-1-906633-25-7