seven deadly sins

To get the most out of your practice team and make sure they feel valued, there are certain things you must avoid doing at all costs when you’re carrying out staff appraisals. Fiona Stuart-Wilson outlines what they are:

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hat is the point of appraisals? The brief answer is to maximise the performance of each individual in the practice so that the practice’s performance, in clinical, financial and patient care terms is enhanced and improved. Yet so often appraisals fail in their purpose because they are ineffective. The seven deadly sins of appraisal listed below give you an idea of what to avoid.

Sin number 1 – spending the whole appraisal criticising the appraisee

This is not a good idea, particularly if you expect someone to feel motivated at the end of the session. Just as bad though, are the ‘Polyanna’ type appraisals where all the feedback is positive and no negative feedback is given. Appraisals are about feedback – good and bad – the purpose of which is to improve or maintain someone’s performance. However, it is important to remember that the appraisal is not the time or place to raise an issue, which should have been dealt with at the time. What is the point of talking about an individual being late for work for the first time at an appraisal three months after it has happened?

All feedback needs to be honest and constructive. You may need to practise your skills in this area – particularly if you do have to address poor performance or other sensitive issues. Concentrate on performance rather than personality. Rather than say ‘You’re so unreliable’, you could focus on their behaviour and effect it has, by saying something like, ‘When you are late it puts an unfair pressure on the rest of the reception team and patients suffer as they are not seen as soon as they arrive.’ This takes some practice, but preparation and planning can make this a great deal easier.

Sometimes, people find giving praise the hardest. Do make sure that you are providing balanced feedback and let people know what they have done well as well as less well.

Sin number 2 – not setting any targets

Appraisal should be concentrating just as much on the moving on and looking forward as the looking back and reviewing. But how do you expect your appraisee to improve, and to what degree? You need to have a clear idea about this, rather than make vague statements about trying harder or pulling socks up. Most staff will also have thoughts and ideas on their performance and how it can be improved, and they need to be involved in the setting of targets – not have them imposed upon them.

However, it’s almost impossible to determine what level of performance you want from your staff if you haven’t worked out what level of performance you are looking for from your practice – or really clearly defined what you want them to be doing. Much of appraisal is about measurement, and without a clear context or benchmarks such as measurable practice objectives or well-defined job descriptions, meaningful measurement is practically impossible.

Sin number 3 – only appraising the staff and ignoring the rest of the practice team

If you believe that your associates and hygienists make a valuable contribution to practice performance and patient care, then it surely makes sense to review their professional performance with them – and give them some feedback? We all like to know we are doing a good job and are appreciated, and professionals are generally professional enough to discuss constructive feedback for improvement.

Sin number 4 – spending too little time on the appraisal

If you think you can ‘knock off’ an appraisal in 15 minutes, think again. If you are really reviewing in depth someone’s performance, allowing time to discuss it in a rational and objective way and agreeing achievable targets with them, it is unlikely you will be able to achieve this in less than an hour. If that seems a long time, consider how many hours your staff give you over a year. In the light of that, isn’t one hour a year or even every six months a good investment to make sure that they remain motivated and on track?

Sin number 5 – spending too much time talking

The floor is not yours; yes, you must give feedback but you must also discuss with the reviewer their thoughts, ideas and viewpoint. It is an exchange of views and not a monologue. It is not the opportunity for the appraiser to tell the appraisee what they think of them. It is a time for a review and a discussion of previous performance and an opportunity to work out how together you can improve an individual’s contribution to the practice. Proactive listening and probing questioning are two under-rated appraisal skills. Being afraid to probe and not asking questions may mean that your appraisal turns into a highly superficial affair, with all of the boxes on your form ticked and completed, but nothing really discussed or evaluated – and more to the point, no real idea of where the appraisee goes from here.

Sin number 6 – linking appraisals with the pay review

In a word – don’t. It is not considered good practice and steps into areas of performance or competence-related pay – and if you have not thought this through properly it is best avoided.

Sin number 7 – allowing process to become more important than outcome

Sometimes the point of appraisals can get lost in all of the activity associated with them, and the act of the annual or six-monthly appraisals can become an end in itself rather than what it should be, which is a means to an end. There must be a good reason for investing the time and effort in appraisals, and the return on that investment should be sufficient to warrant that investment. If appraisals are not delivering the goods for your practice, perhaps it’s time to rethink the way that you do them.

About the author

Fiona Stuart-Wilson is a director of UMD Professional Ltd and an expert on appraisals and Investors in People in dental practice; her ‘Hands-on Management’ course includes a practical workshop on effective appraisals and successful performance review.

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