

Staff Supervision & Appraisal Policy.

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Version

Version 1 28/08/18 policy creation

Policy Statement

At '**Southern Ultrasound**', the quality of the service we provide is of prime importance, both to our own reputation and to patient safety.

For this reason, it is of paramount importance that we ensure all staff operate in a consistent and high-quality manner.

Staff Supervision and Appraisal is one aspect of our overall Clinical Governance framework by which we aim to secure such practice.

Supervision

Clinical staff (Sonographers and Ultrasound Assistants) will be routinely monitored by the Clinical Governance Lead and other senior staff. This supervision will be a combination of planned visits and spot-checks, and is designed to ensure that standards remain over time, and are consistent across the company services.

At the same time, they provide an opportunity for staff to raise issues in an informal or formal manner, and for potential, current and historic difficulties to be tackled with in the clinical environment.

We aim for Supervision to be constructive for all parties, with the ultimate aim of improving services.

Staff never work alone, but either as a two-person, Sonographer/Ultrasound Assistant, pairing or as part of a larger team. This allows junior members of staff to be supervised by more senior personnel and for issues of concern to be identified and highlighted to Management as appropriate.

Appraisals

Staff Appraisals are a more formal affair, and are pre-arranged with the individual, so that all parties may take time to consider performance, training needs and relationships prior to the event.

Staff Appraisals are performed at least Annually, and more frequent if the Company considers it necessary. They have a structured format, with total transparency; so that the staff member has a full understanding of strengths and weaknesses as perceived by the Assessor. They will always examine training needs, a review of target achievement and target setting for the following period

An aspect of the appraisal for clinical staff is often one or more Clinical Assessments. These are generally performed during a 'normal' working list, but specific informed consent must be obtained of any patient involved. Taking part in a clinical assessment has no affect on the patient care or the examination report.

Staff Appraisal forms are retained in the Staff records, together with their Training records and Clinical Assessments (if applicable).

Training for Supervisors & Assessors

Those in a supervisory or assessor position will receive adequate training prior to acting in this capacity. They will have a thorough understanding of required quality standards and how to develop staff to the full.

Policy Standards

Distribution and Awareness Plan

All staff are made aware of the policy as part of their induction training. If there are any significant changes to the policies that affect the way in which staff initiate or respond, these are communicated to them via team briefs and staff meetings.

A copy of the policy is available to all staff via the Policy sub-folder of the Company's on-line Governance Framework folder, and can be accessed 24/7 from any location with Web Access. A hard copy version is retained at all sites of operation and is available to view or download on the company's website.

Monitoring processes

The Director(s) monitor service quality and staff performance related issues, via reports from the Service Managers.

Equality Impact Assessment

An Equality Impact Assessment has been performed on this policy and procedure. The EIA demonstrates the policy is robust; there is no potential for discrimination or adverse impact. All opportunities to promote equality have been taken.

		Y/N	Comments
1.	Does the policy/guidance affect one group less or more favourably than another on the basis of:		
	▪ Race	No	
	▪ Ethnic origins (inc. gypsies and travellers)	No	
	▪ Nationality	No	
	▪ Gender	No	
	▪ Culture	No	
	▪ Religion or belief	No	
	▪ Sexual orientation including lesbian, gay and bisexual people	No	
	▪ Age	No	
	▪ Disability - learning disabilities, physical disability, sensory impairment and mental health problems	No	
2.	Is there any evidence that some groups are affected differently?	No	
3.	If you have identified potential discrimination, are any exceptions valid, legal and/or justifiable?	NA	
4.	Is the impact of the policy/guidance likely to be negative?	NA	
5.	If so can the impact be avoided?	NA	
6.	What alternatives are there to achieving the policy/guidance without the impact?	NA	
7.	Can we reduce the impact by taking different action?	NA	

Approval & Review

This policy has been approved by the undersigned and will be reviewed annually and any time there is a change in the Law, Guidance or Best Practice Recommendations.

Policy Created: 24/08/18
Kevin Rendell Director

Policy Reviewed: v1 14/03/19

