**Board Member Appraisal Preparation**

This form is optional and editable and should be adapted dependent on the role. Alternatively, organisations may wish to develop their own appraisal forms, incorporating the principles of the Board Member Appraisal Framework. Please refer to the Board Member Appraisal Guidance for further details on how to use this form.

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|  | Appraisee name |  |  |
|  |  |  |  |
|  | Role |  |  |
|  |  |  |  |
|  | Organisation |  |  |
|  |  |  |  |
|  | Appraisal reference period |  |  |
|  |  |  |  |
|  | Date |  |  |
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| **Part 1: Reflection review utilising the** [**Leadership Competency Framework**](https://www.england.nhs.uk/long-read/nhs-leadership-competency-framework-for-board-members/#5-detailed-leadership-competency-domains)**:** |
| **Domain 1: Driving high quality, sustainable outcomes**  What good looks like:  The Board Member personally seeks out and acts on performance feedback and review, and continually build their own skills and capability.  The Board Member is committed to ensuring excellence in the delivery (and / or the commissioning) of high quality and safe care, including our workforce.  The Board Member seeks to ensure that their organisation demonstrates continual improvement, increases productivity and brings about better health and care outcomes with lasting change and improvement. |
| Summary: |
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| Highlighted areas of strength: |
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| Identified opportunities to increase impact and effectiveness: |
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| **Domain 2: Setting strategy and delivering long-term transformation**  What good looks like:  The Board Member personally seeks out and uses new insights on current and future trends and use evidence, research and innovation to help inform strategies.  The Board Member leads the development of strategies which deliver against the needs of people using our services, as well as statutory duties and national and local system priorities. |
| Summary: |
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| Highlighted areas of strength: |
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| Identified opportunities to increase impact and effectiveness: |
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| **Domain 3: Promoting equality and inclusion, and reducing health and workforce inequalities**  What good looks like:  As a leader, the Board Member:   * improves population health outcomes and reduce health inequalities by improving access, experience and the quality of care * ensures that resource deployment takes account of the need to improve equity of health outcomes with measurable impact and identifiable outcomes * reduces workforce inequalities and promote inclusive and compassionate leadership across all staff groups |
| Summary: |
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| Highlighted areas of strength: |
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| Identified opportunities to increase impact and effectiveness: |
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| **Domain 4: Providing robust governance and assurance**  What good looks like:  The Board Member understands their responsibilities as a board member and how the Board works together as a unitary board to reach collective agreement on their approach and decisions.  The Board Member uses a variety of information sources and data to assure the organisation’s financial performance, quality and safety frameworks, workforce arrangements and operational delivery.  The Board Member, together with the rest of the board, is visible throughout the organisation and their leadership is underpinned by the organisation’s behaviours, values and standards. They are seen as a Well Led organisation and they understand the vital importance of working collaboratively. |
| Summary: |
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| Highlighted areas of strength: |
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| Identified opportunities to increase impact and effectiveness: |
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| **Domain 5: Creating and compassionate, just and positive culture**  What good looks like:  The Board Member personally:   * speaks up against any form of racism, discrimination, bullying, aggression, sexual misconduct or violence, even when they might be the only voice * challenges constructively, speaking up when they see actions and behaviours which are inappropriate and lead to staff or people using services feeling unsafe, or staff or people being excluded in any way or treated unfairly * promotes flexible working where possible and uses data at board level to monitor impact on staff wellbeing and retention   The Board Member contributes as a leader:   * to develop a supportive, just and positive culture across the organisation (and system) to enable all staff to work effectively for the benefit of patients, communities and colleagues * to ensure that all staff can take ownership of their work and contribute to meaningful decision making and improvement * to improve staff engagement, experience and wellbeing in line with our NHS People Promise (for example, with reference to equality, diversity and inclusion; freedom to speak up; personal and professional development; holding difficult conversations respectfully and addressing conflict) * to ensure there is a safe culture of speaking up for our workforce |
| Summary: |
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| Highlighted areas of strength: |
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| Identified opportunities to increase impact and effectiveness: |
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| **Domain 6: Building trusted relationships with partners and communities**  What good looks like:  The Board Member is part of a board that recognises the need to collaborate, consult and co-produce with colleagues in neighbouring teams, providers and systems, people using services, our communities and our workforce.  The Board Member identifies and communicates the priorities for financial, access and quality improvement, working with system partners to align our efforts where the need for improvement is greatest.  The Board Member recognises and champions open and constructive communication with all system partners to share a common purpose, vision and strategy. |
| Summary: |
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| Highlighted areas of strength: |
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| Identified opportunities to increase impact and effectiveness: |
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| **Summary Review utilising the** [**Leadership Competency Framework**](https://www.england.nhs.uk/long-read/nhs-leadership-competency-framework-for-board-members/#5-detailed-leadership-competency-domains)**:** |
| Summary: |
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| Highlighted areas of strength: |
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| Identified opportunities to increase impact and effectiveness: |
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| **Part 2: Objectives** | | |
| **Review of previous year** | | |
| Objective (SMART format) | Summary discussion about objective | Objective outcome |
|  |  | Choose an item. |
|  |  | Choose an item. |
|  |  | Choose an item. |
| **Draft Objectives for the forthcoming year:**  The appraisee to draft objectives for the forthcoming year in preparation for discussion and agreement with the appraiser. Please draft objectives that clearly link personal objectives to organisational priorities and are SMART. | | |
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| **Part 3: Development Plan**  The appraisee will:   * review the highlighted areas of strength and identified opportunities to increase impact and effectiveness * consider organisation objectives and demands * reflect on their own growth, development and career aspirations and bring these elements together to inform their development plan.   Your plan for development could incorporate a blend of learning methods, for example; board development workshops, conferences/webinars, coaching/mentoring or self-directed learning. | | | |
| What | How | Why | By When |
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