

**CITY OF GUSTAVUS, ALASKA
RESOLUTION CY14-25**

**A RESOLUTION OF THE GUSTAVUS CITY COUNCIL ESTABLISHING POLICY AND
PROCEDURE FOR A REGULAR POSITION EMPLOYEE PERFORMANCE EVALUATION**

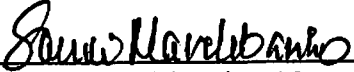
WHEREAS, the Gustavus City Council adopted a major revision of Title 3, Personnel, by Ordinance FY12-13 on April 12, 2012, more specifically Title 3.04.07, Performance Evaluation of Regular Position Employees, and

WHEREAS, this Policy includes Appendix A: Employee Self-Evaluation and Development Plan, Appendix B: Regular Position Employee Performance Evaluation and Appendix C; Notice of Work-Performance Deficiencies and Performance Action Plan, and


WHEREAS, the Council recognizes the need to establish a consistent and impartial procedure for the evaluation of city staff with regard to employee performance, and now therefore be it

RESOLVED, the Gustavus City Council adopts this current Policy and Procedure for A Regular Position Employee Performance Evaluation.

PASSED and **APPROVED** by the Gustavus City Council this 11th day of August, 2014.



Sandi Marchbanks, Mayor



Attest: Lora Ewing, City Clerk

CITY OF GUSTAVUS

Policies and Procedures

Title: City of Gustavus Policy and Procedure for a Regular Position Employee Performance Evaluation

Authority

City of Gustavus, 3.04.07 Performance Evaluation of Regular Position Employees. End of probationary period; annual; special.

Policy

It is the policy of the City of Gustavus to utilize an employee performance evaluation program to assist the City in maintaining the highest quality employees and highest quality performance. Performance evaluations share the following common objectives:

1. To optimize the application of human resources toward the achievement of City service goals.
2. To provide an opportunity for the supervisor and employee to review, evaluate and align the working relationship between the employee and the City.
3. To provide an opportunity for the supervisor to manage performance on a scheduled basis.
4. To make effective use of employee skills.
5. To facilitate skill development and performance improvements.
6. To provide acknowledgement of work done.
7. To gain new information and ideas from employees.
8. To clarify job expectations and discuss opportunities for improvements, development and goals for the next period.
9. To provide an opportunity for employees to create an individual development plan.

Procedure

1. Supervisor schedules date for evaluation discussion at least ten working days in advance of a performance evaluation and asks the City Clerk to provide employee with an Employee Self-Evaluation and Development Plan form.
2. Employee submits self-evaluation form at least three working days prior to evaluation discussion.
3. Supervisor fills out Regular Position Employee Performance Evaluation form informed by guidance from Title 3, position description, personnel memos, employee self-evaluation, previous performance evaluations, observations during the review period, and interactions with supervisor, colleagues, the public, etc. The supervisor will provide specific examples for ratings in the comments section.
4. Supervisor discusses evaluation with employee in a private city location.
 - a. Employee signs evaluation and receives a copy
 - b. Supervisor's evaluation and employee self-evaluation are placed in personnel file
5. Employee is given the opportunity to respond in writing to supervisor comments or to indicate that he/she has no comments and submit signed response form to City Clerk within five working days of the evaluation meeting. Response will be placed in personnel file. Performance evaluations shall not be subject to the grievance procedure [3.04.07(f)].
6. In the cases of the City Clerk and City Treasurer, the evaluation forms will be filled out in an Executive Session discussion of the Council and approved by motion in an open meeting. The evaluation discussion will take place with the Mayor and two council members.

CITY OF GUSTAVUS

Employee Self-Evaluation and Development Plan

To be filled out by City Clerk and submitted to employee

Check one: Probationary _____ Annual _____ Special _____.

Review period: _____ through _____.

Discussion date with supervisor scheduled for _____.

Self-evaluation due back in City Hall by 4 pm on _____.

Supervisor name and title _____.

To be filled out by employee

Please take one hour of your work time to address the following in the context of your Position Description and performance during the review period. Return this form to the City Clerk by the date and time indicated above.

Employee Name

Department

Position Title

Date of Hire

1. Achievements

Please list three examples of your work in this review period that you find most noteworthy. How have these achievements contributed to your department and to the community?

2. Training during Review Period

A. What training did you receive during this review period?

B. How have you applied this training to your job?

3. Position-Related Personal Development Goals

In what areas of job performance and productivity would you like to improve your skills? Are you working toward a job-related certification?

4. Training Goals

What training would you like to receive in the next twelve months? How will this training enhance your job performance and productivity? Will this training help you attain a job-related certification?

5. Departmental Project Goals

Please list two primary goals for the next twelve months. How will these contribute to the department and community? How do you plan to execute them? What are the steps? By what date do you hope to accomplish each goal? How can the City be of assistance?

6. Problems or Concerns
Please describe any current or recurring obstacles you are experiencing or that you have experienced during the review period that impede the performance of your responsibilities or that adversely impact your working environment.

7. Compensation Owed
Please identify any and all compensation which you believe is owed to you but has not been paid.

Employee signature

Date

CITY OF GUSTAVUS

REGULAR POSITION EMPLOYEE PERFORMANCE EVALUATION

Check one: Probationary _____ **Annual** _____ **Special** _____.

Review Period _____ **to** _____.

Employee Name

Department

Date of Hire

Position Title

Date of Last Review

Date of This Review

Name of Reviewing Supervisor

Ratings

Satisfactory (S)

The employee's performance meets basic job expectations and City standards.

Needs Improvement (NI)

The employee's performance fails to meet job expectations and/or City standards. Provide specific examples. Recommendations for improvement will follow in the final "Summary and Recommendations" section.

1. Accomplishments (List major job achievements of the past year or since the last evaluation, based on observation and with reference to the employee self-evaluation.)

2. Job Knowledge (Employee possesses a clear understanding of the

responsibilities and tasks s/he must perform; keeps up with developments in the field; applies knowledge gained from time and training within the position.)

Rating:

Comments:

3. Job Performance (QUALITATIVE—Complies with City policies and procedures, such as procurement, time sheets; oral and written communication skills; neatness, thoroughness, accuracy; professional manners and comportment; customer service; overall quality of employee's work.)

Rating:

Comments:

4. Job Productivity (QUANTITATIVE—employee demonstrates a commitment toward achieving results beneficial to the City; tasks are completed efficiently and effectively in terms of time and cost. Ability to plan, prioritize, organize. Deadlines are met. Handles pressure. Employee eliminates unnecessary work and activities that do not add value.)

Rating:

Comments:

5. Dependability (Employee can be relied upon to complete tasks and is conscientious about his/her attendance and timeliness. Performs tasks delegated or assigned by supervisor and communicates results.)

Rating:

Comments:

Rating:

9. Integrity (Deals with others in a fair, honest, straightforward manner; is trustworthy; takes responsibility for failures and shares credit for successes; uses appropriate discretion and is sensitive to confidentiality.)

Comments:

Rating:

8. Work Environment/Safety (Follows safety regulations and actively contributes to a safe and pleasant workplace.)

Comments:

Rating:

7. Initiative (Employee demonstrates an ability to think and act independently. Originates innovative ideas and methods to improve job performance and productivity.)

Comments:

Rating:

6. Cooperation (Employee demonstrates a willingness to work with associates, subordinates, supervisors, volunteers, agency representatives and the general public; flexibility and adaptability.)

Comments:

SUMMARY AND RECOMMENDATIONS
(Deficiencies will be addressed in "Work Performance Deficiencies and Performance Improvement Plan")

Supervisor Signature

Date

Supervisor Position Title

Signature of Mayor
(if Mayor is not direct supervisor)

Date

Has this report been discussed with the Employee? Yes _____ No _____

Date of discussion

If "no," provide reason:

Employee signature, acknowledging receipt of a copy of the Performance Evaluation and an optional Response form (due in City Hall in five working days, if the employee chooses to respond).

Employee signature

Date

CITY OF GUSTAVUS

**Notice of Work-Performance Deficiencies
and Performance Action Plan**

Date:

**To
Employee Name:**

Position:

At our recent meeting on _____, 20____, we discussed your unsatisfactory job performance. This letter is a written confirmation of that meeting. At that time you were cautioned that your performance was not acceptable in the following respects:

As stated in the meeting you have been given an unsatisfactory performance rating, based on the above factors. In order to retain employment with the City of Gustavus, your performance must improve, and you must adopt the following performance action plan:

Please accept this notice as constructive advice. We expect to see continuing improvement in your job performance.

Sincerely,

Supervisor signature

Receipt acknowledged by employee:

Employee Signature

Date

Original to be placed in personnel file; one copy to employee.