

EMPLOYEE PERFORMANCE REVIEW (EPR)

EMPLOYEE INFORMATION		
NAME	PROGRAM	DATE
POSITION TITLE	REVIEW PERIOD	
DEPARTMENT	SUPERVISOR	TYPE OF EPR 120 Day Initial Annual Other:

RATING SCALES

- 4** Outstanding Consistently Exceeds Expectations
- 3** Commendable Frequently Exceeds Expectations
- 2** Satisfactory Usually Meets Expectations
- 1** Needs Improvement Often Has Difficulty Meeting Expectations
- 0** Unsatisfactory Consistently Fails to meet Expectations

SECTION 1	PERFORMANCE FACTORS	4	3	2	1	0
1.	Demonstrates required job knowledge, skills and abilities					
2.	Responds positively to assigned responsibility					
3.	Demonstrates insight, skills and ability to follow treatment /behaviour support plans.					
4.	Adheres to policies, procedures and client safety practices as outlined in individual safety plans.					
5.	Completes assignments on schedule, uses resources wisely and manages time effectively					
6.	Understands medication safety policies and procedures and able to perform related duties with reliability and dependability					
7.	Works in a focused and organized manner, consistently very present and engaged with clients.					
8.	Adheres to established quality standards including completing all shift documentation such as CIR's, data tracking, progress notes					
9.	Completes all training requirements in a timely manner and accepts responsibility for own learning					
10.	Dependable; arrives at work on time, reports on all scheduled days, and adheres to attendance and absenteeism policy and procedures					
11.	Works safely, follows safety plans, reports unsafe working conditions to Supervisor as necessary					
12.	Understands Duty to Report and CFCS Section 70 rights					
Total Points (Add total points for each column)						

COMMENTS (Note: Ratings above or below “Satisfactory” require appropriate support)

SECTION 2 INTERPERSONAL FACTORS	4	3	2	1	0
1. Provides accurate, clear written and verbal information					
2. Demonstrates good listening skills; gives and receives positive and constructive feedback					
3. Works effectively with others and responds positively to situations requiring cooperation, courtesy and tact					
4. Maintains positive working relationships and demonstrates an attitude of respect; does not speak negatively about agency, co-workers, supervisors, and other management					
5. Takes effective action without being told or directed					
6. Treats problems and conflicts as a “normal” process in getting things done; focuses on solving the problem as opposed to blaming others for it					
7. Conducts self in a manner that is professional, courteous and consistent with agency policy					
Total Points (Add total points for each column)					

COMMENTS (Note: Ratings above or below “Satisfactory” require appropriate support)

SECTION 3 DIRECT CARE PERFORMANCE FACTORS	4	3	2	1	0
1. Communication – Engages positively and respectfully with team members and external stakeholders; supports healthy, cohesive team dynamics					
2. Demonstrates good judgement in handling routine problems					
3. Demonstrates setting clear but firm boundaries with clients					
4. Demonstrates the ability to understand & implement BSPs or treatment					
5. Demonstrates the ability to fully engage with clients – meal planning, life skills development, minimum or no use of cell phones					
6. Demonstrates flexibility and has the ability to adapt skills to support clients.					
Total Points (Add total points for each column)					

COMMENTS (Note: Ratings above or below “Satisfactory” require appropriate support)

SCA is particular about the staff he feels comfortable engaging with, and consequently requires a sort of relatability that seems hard for Ali to offer. Ali could evolve his skills in empathy to suit our particular client’s needs.	TOTAL POINTS
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SECTION 4 OVERALL RATING

Outstanding Consistently Exceeds Expectations score
 Commendable Frequently Exceeds Expectations score
 Satisfactory Usually Meets Expectations score
 Needs Improvement Often Has Difficulty Meeting Expectations requires employment decision meeting
 Unsatisfactory Consistently Fails to meet Expectations requires terminations

REQUIRED OVERALL COMMENTS *(Note: Ratings above or below “Satisfactory” require appropriate support)*

EMPLOYEE COMMENTS *(Optional – Use additional sheet if required)*

SECTION 5 GOALS

Goal #.	Description	Review Date	Initials
1)			

SECTION 6 DISCRETIONARY POINTS / COMMITTEE POINTS

SECTION 7 REVIEWS AND ACKNOWLEDGMENTS

I acknowledge that I have reviewed this performance review with my supervisor and have been appraised of my evaluation. I understand that I may make a written statement on this form now or a written statement within three (3) working days. If a statement is submitted, it will be attached to this evaluation report as a permanent part of this evaluation. I understand that my signature is mandatory and that my signature does not mean that I agree nor disagree with this evaluation.

PRINT NAME

SIGNATURE

DATE

SUPERVISOR

SIGNATURE

DATE

PROGRAM MANAGER

SIGNATURE

DATE