

COUNTY OF LOS ANGELES REPORT OF PERFORMANCE EVALUATION

EMPLOYEE NAME _____ EMPLOYEE NUMBER _____ ITEM NUMBER _____ STATUS _____ DATE _____

POSITION _____ DEPT. DIV. SUB. _____ FROM _____ TO _____ PERIOD _____

<p>RATE EACH FACTOR</p>	<p>OUTSTANDING</p> <p>VERY GOOD</p> <p>COMPETENT</p> <p>IMPROVEMENT NEEDED</p> <p>UNSATISFACTORY</p>	<p>↓</p> <p>↓</p> <p>↓</p> <p>↓</p> <p>↓</p>	<p>Use COMMENTS space to describe employee's strengths and weaknesses. Give examples of work well done and plans for improving performance.</p> <p>(Factor ratings of Unsatisfactory, Improvement Needed, Very Good, or Outstanding must be substantiated by comments.)</p>
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<p>Checking items OPTIONAL with department + Strong √ Standard --Weak</p>		
<p>1. QUANTITY</p> <p><input type="checkbox"/> Amount of work performed</p> <p><input type="checkbox"/> Completion of work on schedule</p>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
<p>2. QUALITY</p> <p><input type="checkbox"/> Accuracy</p> <p><input type="checkbox"/> Neatness of work product</p> <p><input type="checkbox"/> Thoroughness</p> <p><input type="checkbox"/> Oral expression</p> <p><input type="checkbox"/> Written expression</p>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
<p>3. WORK HABITS</p> <p><input type="checkbox"/> Observance of working hours</p> <p><input type="checkbox"/> Attendance</p> <p><input type="checkbox"/> Observance of rules and regulations</p> <p><input type="checkbox"/> Observance of Safety Rules</p> <p><input type="checkbox"/> Compliance with work instructions</p> <p><input type="checkbox"/> Orderliness of work</p> <p><input type="checkbox"/> Application to duties</p>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
<p>4. PERSONAL RELATIONS</p> <p><input type="checkbox"/> Getting along with fellow employees</p> <p><input type="checkbox"/> Meeting and handling the public</p> <p><input type="checkbox"/> Personal appearance</p>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
<p>5. ADAPTABILITY</p> <p><input type="checkbox"/> Performance in new situations</p> <p><input type="checkbox"/> Performance in emergencies</p> <p><input type="checkbox"/> Performance with minimal instructions</p>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
<p>6. OTHER</p>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
<p>7. SUPERVISORY ABILITY (ONLY FOR SUPERVISORS)</p> <p><input type="checkbox"/> Planning and assigning</p> <p><input type="checkbox"/> Training and instructing</p> <p><input type="checkbox"/> Disciplinary control</p> <p><input type="checkbox"/> Evaluating performance</p> <p><input type="checkbox"/> Leadership</p> <p><input type="checkbox"/> Making decisions</p> <p><input type="checkbox"/> Fairness and impartiality</p> <p><input type="checkbox"/> Approachability</p> <p><input type="checkbox"/> Maintaining an effective safety program</p> <p><input type="checkbox"/> Affirmative Action</p>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	

(Continue COMMENTS on attached sheet)

OVER - ALL EVALUATION				
UNSATISFACTORY	IMPROVEMENT NEEDED	COMPETENT	VERY GOOD	OUTSTANDING
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

SIGNATURES OF REPORTING OFFICERS	
<p>This report is based on my observation and/or knowledge. It represents my best judgment of the employee's performance.</p>	
<p>RATER _____ DATE _____</p> <p style="text-align: center; font-size: small;">(The use of Reviewer OPTIONAL with department)</p>	
<p>I have reviewed this report.</p>	
<p>REVIEWER _____ DATE _____</p>	
<p>I concur in and approve this report.</p>	
<p>DEPT. HEAD _____ DATE _____</p> <p style="font-size: small;">(or authorized representative)</p>	

<p>Copy of report given to employee _____ DATE _____</p>
<p>Copy of report mailed to employee.</p>
<p>Address _____ DATE _____</p>
<p>Report discussed with employee</p>
<p>BY _____ DATE _____</p>
<p>This report has been discussed with me.</p>
<p>EMPLOYEE'S SIGNATURE _____ DATE _____</p>

JOB DESCRIPTION PERFORMANCE EVALUATION

Employee Name	Employee #	5212 Item #	A Status	Date
Senior Nursing Instructor, SON Position	160-15-82213 Dept. Div. Sub.	From: _____	To: _____ Period	

TYPE OF APPRAISAL

Annual Probation (mark shaded area only) Other _____

POSITION SUMMARY: Serves as the Educational Resource Center (ERC) Director for the Los Angeles County College of Nursing and Allied Health. Under general direction, plans, organizes, directs, controls, and evaluates the Library, Skills Laboratory, and Computer Laboratory student support service functions of the College. Directs and supervises the ERC support staff. Provides liaison with Los Angeles County, DHS, and LAC+USC Medical Center administration, support staff, and accrediting agencies; fosters relationships with DHS librarians; and develops, maintains and updates ERC-related College policies, procedures, and materials.

(Please use other sheets if necessary)

AGE OF PATIENTS SERVED: _____

REPORTS TO (POSITION TITLES): Provost

MINIMUM REQUIREMENTS: _____

LICENSE NUMBER: _____ **EXPIRATION DATE:** _____

OVER-ALL EVALUATION				
Unsatisfactory	Improvement Needed	Competent	Very Good	Outstanding

<input type="checkbox"/> I approve final appointment <input type="checkbox"/> I do not approve final appointment	<input type="checkbox"/> Reduce the probationer to the position of _____ <input type="checkbox"/> Discharge the probationer from service
<p style="text-align: center;">SIGNATURES OF REPORTING OFFICERS</p> <p>This report is based on my observation/or knowledge. It represents my best judgment of the employee's performance</p> <p>RATER: _____ DATE: _____</p>	<p>Copy of report given to employee _____ DATE: _____</p> <p>Copy of report mailed to employee _____</p> <p>Address: _____ DATE: _____</p>
<p>(The use of Reviewer OPTIONAL with department)</p> <p>I have reviewed this report.</p> <p>RATER: _____ DATE: _____</p>	<p>Report discussed with employee.</p> <p>BY: _____ DATE: _____</p>
<p>I concur in and approve this report.</p> <p>DEPT HEAD: _____ DATE: _____ (or authorized representative)</p>	<p>This report has been discussed with me.</p> <p>EMPLOYEE'S SIGNATURE: _____ DATE: _____</p>

OVERALL EVALUATION

PERFORMANCE LEVELS/DEFINITIONS:

OUTSTANDING (Far exceeds standards)	All work performance is consistently above the standards of the position. A substantial part of the work performance exceeds supervisory and management expectations most of the time.
VERY GOOD (Exceeds Standards)	A substantial part of the work performance is well above the standards of the performance required for the position and all other parts of the performance are at least Competent.
COMPETENT (Meets Standards)	The work performance is consistently up to or somewhat above the requirements of the position. This is the performance which is expected of a trained and qualified employee.
IMPROVEMENT NEEDED (Does not Meet Standards)	This rating indicates that (1) a significant part of the work performance is below the standards of performance required for the position and (2) it is reasonable to expect that the employee will bring performance to acceptable standards.
UNSATISFACTORY (Does not Meet Standards)	A substantial part of the work performance is inadequate and definitely inferior to the standards of performance required for the required position.

APPEAL PROCEDURE

If the employee disagrees with the ratings given, and is still in County service, within ten business days of the receipt of the evaluation he may initiate a grievance in accordance with his department's grievance procedure. He may grieve any specified item or items of the report, including the overall rating, except for an over-all rating of "Unsatisfactory".

Upon completion of the grievance process, the department head or his representative must either approve the report and rating as originally prepared or direct that a new report be prepared, and notify the employee of his decision.

Out of Service Employees

If subsequent to his resignation from county service an employee receives an evaluation with an over-all rating of "Improvement Needed" or "Unsatisfactory," he may request reconsideration of this rating by the Director of personnel. The request for reconsideration must be received in the Office of the Director of Personnel within ten business days after delivery of his evaluation. The request must be in writing and must set forth all the facts and details upon which the employee's case is based.

POSITION/DUTIES MAJOR FUNCTIONS	Performance Level				
	Unsatisfactory	Improvement Needed	Competent	Very Good	Outstanding
ORGANIZATIONAL COMPETENCIES: The following section related to the core values, behaviors, and expectations of the LAC+USC Healthcare Network and contains standards for which all employees, regardless of their classification within the organization, are accountable					
(name) is the Director of the College of Nursing and Allied Health, Educational Resource Center (ERC), which encompasses the Library and the Skills and Computer Laboratories. He/she is a member of the College and divisional governing committees including the Planning, Administrative, Operations, and Institutional Effectiveness Committees, the Nursing Program Coordinators' Council, and the School of Nursing (SON) Faculty Organization.					
Plans, implements, evaluates, and revises ERC programs to support and enhance student learning					
Collaborates with faculty, staff and students to assess student learning needs and to plan, and implement program improvements					
Monitors, evaluates, and reports effectiveness of the ERC in meeting student learning needs					
Researches and identifies support service trends and establishes program directions based on findings					
Requests and allocates resources to support student success					
Develops and implements systems to track maintenance and replacement of ERC equipment, supplies, and other resources					
Develops, implements, evaluates, and updates ERC related policies, procedures, guidelines, and forms					
Directs and supervises ERC support staff					
Educates faculty and students regarding ERC processes and resources					
Maintains current knowledge of regulatory agency standards and communicates requirements to appropriate persons. Prepares objective, accurate, and timely reports for regulatory agencies, DHS, and the College. Presents findings as requested					
Represents the College and the ERC on DHS, Medical Center, and College committees					

Employee name:

Rating Period:

POSITION/DUTIES MAJOR FUNCTIONS	Performance Level				
	Unsatisfactory	Improvement Needed	Competent	Very Good	Outstanding
Participates in College governance including strategic and fiscal planning and the development and update of College policies and procedures					
Reports activities and findings at College governing and divisional committee meetings					
Serves as an educational resource to College administration, faculty, and students and provides access, training, and guidance to the ERC collections and equipment					
Develops constructive and cooperative working relationships with others, and maintains them over time					
Uses clear and concise written and oral communication skills					
Establishes and maintains an effective communication network and working relationships					
Promotes self-growth through educational and professional activities					
Evaluates own needs for professional growth and seeks opportunities to meet the needs. Attends classes, workshops, lectures, conventions, and meetings as indicated					

PERFORMANCE GOALS FOR THE UPCOMING YEAR

- 1.
- 2.