

## PDS SUMMARY FORM (Level 1-9 Research & Technical Staff)

### Personal Details:

Employee ID number:

Staff Member Name:

Position Title:

Faculty/Division:

School/Unit:

Supervisor's Name:

Reviewer's Name (if not direct Supervisor):

Review Period:

### Reviewer Confirmation of Completion of PDS Process

Current position description reviewed ☐ Yes ☐ No

Discussion on staff member's self assessment of their contribution and achievements ☐ Yes ☐ No

Review of key goal targets achieved this year ☐ Yes ☐ No

Key behavioural competencies reviewed ☐ Yes ☐ No

Overall assessment of performance ☐ Yes ☐ No

Key goal targets set for next year ☐ Yes ☐ No

Professional & career development plan agreed ☐ Yes ☐ No

### PDS Summary Form - Strictly Confidential

This Form is to be completed and returned to your HR Consultant at the completion of the PDS meeting. The HRC will retain this information in a secure and locked location at the local level. The staff member and Supervisor may keep a copy. All copies must be treated as strictly confidential and securely stored.

### Overall Assessment of Performance (What + How)

The Reviewer is to consider both achievement of key performance targets (what was achieved) and behavioural competency (how it was achieved) to provide an overall assessment of performance.

Exceptional ☐ Exceeds Expectations ☐ Meets Expectations ☐

Partially Meets Expectations ☐ Does Not Meet Expectations ☐

#### Summary Comments

### PDS Procedure - Staff Member & Reviewer (complete where relevant)

#### Staff Member

- I have familiarised myself with the PDS procedure/process ☐ Yes ☐ No
- I am satisfied that the PDS procedure has been followed for this review period ☐ Yes ☐ No
- I have had an opportunity to give my Reviewer feedback about my performance & development ☐ Yes ☐ No
- I have attended a PDS training session for staff ☐ Yes ☐ No

*Comments are required below if you have indicated No in any of the above boxes*

Signature

Date

#### Reviewer/Supervisor

- I have attended a PDS training session ☐ Yes ☐ No
- I am satisfied that the PDS procedure has been followed for this review period ☐ Yes ☐ No
- I am satisfied the staff member has had an opportunity to give feedback about their performance & development ☐ Yes ☐ No

*Comments are required below if you have indicated No in any of the above boxes*

Signature

Date

The staff member or reviewer to include comments if No has been ticked in any of the PDS Procedure boxes

Name of Supervisor/Manager

Signature

Date

**STEP 1: Review of current position description - please attach a copy to this PDS form**

Before your PDS meeting, please review your current position description to determine how accurately it captures the current activities of your role since your last review. Consider the following questions below to assist your self-assessment and discussion:

Identify how well your current position description reflects the work that you do:

- Summarise any proposed changes to your position description that you would like to discuss and outline your reasons why
- Identify any impediments that constrain you from performing your job effectively and propose actions to remove these impediments

If required, please attach an updated position description for discussion with your Supervisor/Reviewer.

**STEP 2: Staff Member’s self reflection on your contribution and achievements during the previous 12 months**

**PLEASE NOTE: If you have commenced employment with UNSW in the last six months you may not need to complete this section. Please discuss this with your supervisor.**

Before your meeting, think about, reflect on and identify what you see as your:

- Major contributions or achievements to your School/Centre/Institute and the Faculty over the past 12 months (if applicable)

### STEP 3: Review achievement of the goals that you set from the previous review

**PLEASE NOTE: If you have commenced employment with UNSW in the last 12 months this section does not need to be completed.**

It is important to note that organisational and work unit priorities can sometimes change unexpectedly and it is important that the agreed goals are regularly reviewed and adjusted if required.

Goal List the agreed goals from your last review (you do not need to complete all the boxes)	Achievement Record what goals were achieved	Self assessment and comments Using the ratings table below indicate how well you believe you met those goals you set 12 months ago. If you wish to complete this with your supervisor at your meeting leave blank	Supervisor/Reviewer assessment and comments Assess achievement on each agreed goal using the rating table below
1.			
2.			
3.			
4.			

**RATING ASSESSMENT TABLE:** The following rating scales are to be used by the staff member in advance of the meeting. The Supervisor/Reviewer and staff member are to then discuss the staff member's self assessment rating and the Supervisor/Reviewer to provide constructive feedback and an assessment rating for each goal during the meeting.

<b>Exceptional</b>	Consistently exceeds target performance levels with some significantly beyond target	<b>Meets Expectation</b>	Meets target performance levels	<b>Does Not Meet Expectations</b>	Performance or major role duties not performed to expectations
<b>Exceeds Expectations</b>	Consistently meets and often exceeds target performance levels	<b>Partially Meets Expectations</b>	Target performance levels are not always met and needs further development to meet role expectations		
<b>Staff member signature</b>		<b>Supervisor/Reviewer signature</b>			

## STEP 4: Key Behavioural Competencies

Please complete the following table by ticking the appropriate box where applicable

### 1. Critical Thinking and Problem Solving

Applicable ☐ Yes ☐ No

	Exceptional	Exceeds Expectations	Meets Expectations	Partially Meets Expectations	Does Not Meet Expectations
Self Rating	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Reviewer Rating	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

### 2. Communication

Applicable ☐ Yes ☐ No

	Exceptional	Exceeds Expectations	Meets Expectations	Partially Meets Expectations	Does Not Meet Expectations
Self Rating	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Reviewer Rating	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

### 3. Ethical Behaviour and Values

Applicable ☐ Yes ☐ No

	Exceptional	Exceeds Expectations	Meets Expectations	Partially Meets Expectations	Does Not Meet Expectations
Self Rating	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Reviewer Rating	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

### 4. Initiative and Creativity

Applicable ☐ Yes ☐ No

	Exceptional	Exceeds Expectations	Meets Expectations	Partially Meets Expectations	Does Not Meet Expectations
Self Rating	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Reviewer Rating	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

### 5. Team Work and Collaboration

Applicable ☐ Yes ☐ No

	Exceptional	Exceeds Expectations	Meets Expectations	Partially Meets Expectations	Does Not Meet Expectations
Self Rating	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Reviewer Rating	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

### 6. Client/Stakeholder Relationships

Applicable ☐ Yes ☐ No

	Exceptional	Exceeds Expectations	Meets Expectations	Partially Meets Expectations	Does Not Meet Expectations
Self Rating	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Reviewer Rating	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

### 7. Flexibility/Adaptability

Applicable ☐ Yes ☐ No

	Exceptional	Exceeds Expectations	Meets Expectations	Partially Meets Expectations	Does Not Meet Expectations
Self Rating	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Reviewer Rating	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

### 8. Efficiency/Time Management

Applicable ☐ Yes ☐ No

	Exceptional	Exceeds Expectations	Meets Expectations	Partially Meets Expectations	Does Not Meet Expectations
Self Rating	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Reviewer Rating	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

<b>Exceptional</b>	Consistently exceeds target performance levels with some significantly beyond target	<b>Meets Expectation</b>	Meets target performance levels	<b>Does Not Meet Expectations</b>	Performance or major role duties not performed to expectations
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Staff member signature		Supervisor/Reviewer signature			

STEP 5: Key Behavioural Competencies - to be completed by SUPERVISORS (if you supervise staff and/or students)

1. Leadership

Applicable☐ Yes☐ No

	Exceptional	Exceeds Expectations	Meets Expectations	Partially Meets Expectations	Does Not Meet Expectations
Self Rating	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Reviewer Rating	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

2. Staff Management

Applicable☐ Yes☐ No

	Exceptional	Exceeds Expectations	Meets Expectations	Partially Meets Expectations	Does Not Meet Expectations
Self Rating	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Reviewer Rating	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

3. Client/Stakeholder Management

Applicable☐ Yes☐ No

	Exceptional	Exceeds Expectations	Meets Expectations	Partially Meets Expectations	Does Not Meet Expectations
Self Rating	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Reviewer Rating	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

4. Individual Expertise

Applicable☐ Yes☐ No

	Exceptional	Exceeds Expectations	Meets Expectations	Partially Meets Expectations	Does Not Meet Expectations
Self Rating	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Reviewer Rating	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

5. Change Management

Applicable☐ Yes☐ No

	Exceptional	Exceeds Expectations	Meets Expectations	Partially Meets Expectations	Does Not Meet Expectations
Self Rating	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Reviewer Rating	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

6. Supervision of junior staff and/or research students

Applicable☐ Yes☐ No

	Exceptional	Exceeds Expectations	Meets Expectations	Partially Meets Expectations	Does Not Meet Expectations
Self Rating	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Reviewer Rating	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

If you would like to make any additional comments please add them in the space provided below.

Staff comments	
Supervisor/ Reviewer comments	

Exceptional	Consistently exceeds target performance levels with some significantly beyond target	Meets Expectation	Meets target performance levels	Does Not Meet Expectations	Performance or major role duties not performed to expectations
Exceeds Expectations	Consistently meets and often exceeds target performance levels	Partially Meets Expectations	Target performance levels are not always met and needs further development to meet role expectations		
Staff member signature			Supervisor/Reviewer signature		

## STEP 6: Goal Plan for Next Year

This plan is mutually agreed between the staff member and the Supervisor/Reviewer at the PDS meeting and sets out the staff member's key performance goals for the next 12 month period.

Goal Outline the priorities to be achieved (you do not need to complete all the boxes)	Performance Measure Outline how achievement of the goal will be measured	Timeframe for achievement	Resource Support What resources or support is required to achieve the goal?	Support Approved Yes/No
1.				
2.				
3.				
4.				

Staff member signature		Supervisor/ Reviewer signature	
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\* If you require additional space to list your goals please attach a separate document.

## STEP 7: Professional and Career Development Plan

- Use Steps 1, 2, 3, 4 and 5 of the PDS to clearly identify what skills, knowledge and behaviours that need to be developed
- Decide on an appropriate development activity
- Set a realistic timeframe for achievement
- Regularly evaluate the effectiveness of the development activity

List the identified skills requiring development	Development (eg training and skill development that may be required)	Timeline	
		By when	Outcome

**Note:** Organisational constraints (such as the School/Centre/Institute budget and/or the delegated budget authority of your supervisor) may need to be taken into account when discussing and agreeing to professional and career development options.

\_\_\_\_\_  
Staff member signature

\_\_\_\_\_  
Supervisor/Reviewer signature

\_\_\_\_\_  
Budget Approval Manager signature (if required)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Date

\_\_\_\_\_  
Date

If you would like to make any additional comments please add them in the space provided below.

Staff comments	
Supervisor/ Reviewer comments	