

**PERSONAL DEVELOPMENT PLANNING  
AND REVIEW**  
 Including Guidance for Staff

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<b>Governance or Assurance Committee</b>	<b>Learning Strategy Group</b>
<b>Implementation Date:</b>	<b>December 2022</b>
<b>Version Number:</b>	<b>6</b>
<b>Review Date</b>	<b>December 2025</b>
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CONSULTATION AND DISTRIBUTION RECORD	
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<b>Distribution:</b>	<ul style="list-style-type: none"> <li>All NHSL staff through staff Brief</li> <li>NHS Lanarkshire Corporate Policies open Access Web</li> </ul>

CHANGE RECORD			
Date	Author	Change	Version No.
October 2019	Organisational Development	Governance committee name changed from Staff & Organisational Development Group to Learning Strategy Group and remit updated	4
October 2019	Organisational Development	Appendix A updated to incorporate all Staff groups	4
October 2019	Organisational Development	Include link to external NHSL website to view policies	4
October 2019	Organisational Development	List of references updated	4
November 2022	Organisational Development	Policy template revised to reflect NHS Lanarkshire Policy Template 'Developing Organisation Policies' Version 3.0, 2022 – Policy Template Document	6
November 2022	Organisational Development	Link added to Data Protection Notice on Firstport	6
November 2022	Organisational Development	5.1 – addition of point explaining responsibilities when on secondment within board	6
November 2022	Organisational Development	5.2 - additional point under Manager responsibilities - allocating protected time to	6

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		meet with the individual to ensure a robust, meaningful conversation takes place`	
November 2022	Organisational Development	List of references updated to reflect introduction of Once for Scotland policies: NHS Scotland Workforce Grievance Policy NHS Scotland Workforce Capability Policy	6

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## **Personal Development Planning & Review Policy**

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### **INTRODUCTION**

NHS Lanarkshire recognises the importance of a Personal development planning & Review (PDP/R) policy that is clear, concise and free from all forms of discrimination.

Personal Development Planning and Review (PDP & R) is part of a continual process of planning, monitoring, assessment and support to help staff develop their capabilities and potential to fulfil their job role and purpose. This increases the effectiveness of the organisation's performance through ongoing, constructive dialogue.

Through personal development planning and review everyone can expect:

- The opportunity to meet their manager/reviewer at regular intervals to discuss their development needs and associated learning opportunities;
- Support to participate in personal development planning and review;
- Knows what is expected of them
- Support to help keep up to date, and acquire new skills as relevant to job role and purpose;
- Get feedback on performance
- Transparent decision-making about NHS Lanarkshire's investment in learning activities that will be based on a reasoned assessment of staff learning needs and the development objectives of NHS Lanarkshire

This is an important element of the organisation's commitment to equal opportunities and the following procedures will ensure fairness and equity in relation to all staff groups.

The basis of this policy is NHS Lanarkshire's commitment to the 'Personal Development Planning and Review' guideline issued by the Partnership Information Network (3<sup>rd</sup> edition 2011).

## **2 AIM, PURPOSE AND OUTCOMES**

- PDP/R aims to be realistic, achievable and reflective of NHS Lanarkshire's commitment to the Staff Governance Standard.
- PDP/R is relevant to support job performance, career development and provide evidence of commitment to lifelong learning.
- PDP/R provides an opportunity for staff and manager or delegated reviewer to meet on a one to one basis, share ideas and talk openly about the job, agreeing work objectives whilst raising any concerns or issues.
- PDP/R mainstreams the equality and diversity agenda at every level within the NHS in Lanarkshire

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- Annual review/appraisal is also an important component of NHS Lanarkshire's efforts to deliver against the Healthcare Quality Strategy and support continuous quality.

### **3. SCOPE**

#### **3.1 Who is the policy intended to benefit**

NHS Lanarkshire views personal development planning and review as part of a continuous process. This process helps everyone develop capabilities and potential to fulfil job role and purpose contributing to the effectiveness of organisational performance.

- This policy therefore applies to all members of staff and includes temporary and agency staff working for longer than six months continuously within NHS Lanarkshire. Appendix A provides more information for staff groups.
- This policy provides the basis for "good practice" in PDP/R

NHS Lanarkshire takes care to ensure your personal information is only accessible to authorised people. Our staff have a legal and contractual duty to keep personal health information secure, and confidential. In order to find out more about current data protection legislation and how we process your information, please visit the Data Protection Notice on our website at [www.nhslanarkshire.scot.nhs.uk](http://www.nhslanarkshire.scot.nhs.uk) or on Firstport at <http://firstport2/staff-support/information-governance-records-management/data-protection-notice/default.aspx>

#### **3.2 Who are the stakeholders**

All staff employed by NHS Lanarkshire

### **4. PRINCIPLE CONTENT**

PDP/R is an approach to ensure that everyone knows what is expected of them, understands their role in the organisation, gets feedback on performance and is able to identify and progress towards satisfying their own and organisational development needs.

- A responsibility to link individual, local and organisational development.
- PDP/R for substantive medical staff occurs within the medical appraisal process and for doctors in training this should be managed by NES through annual reviews of progress. Consistency of electronic systems, proformas or paperwork for PDP/R relevant to the staff group that complies with confidentiality and data protection guidelines
- Use of the KSF post outline (for Agenda for Change staff) to match individual development needs to the requirements of a post)
- A separation of personal development planning and review from disciplinary process. Should any issues related to capability / performance be of concern,

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these must be addressed by Managers / reviewers separately from the PDP/R process. However, if, as a result of any capability / performance issues, a development plan is required this should be incorporated into the PDP/R process / discussion.

- Retention periods apply in line with National guidelines.

## 5. ROLES AND RESPONSIBILITIES

### 5.1 Roles

- PDP/R will take place (**as a minimum**) annually with a manager / reviewer. More frequent reviews (formal or informal) should be carried out where manager / reviewer and reviewee feel this would assist in driving the development plan. Where an individual takes up a new role a Personal Development Plan should be discussed and agreed within the 12-week induction period. For Doctors a job plan and objectives should be agreed within this timeframe
- PDP/R is based on self-assessment, supported and facilitated by a manager / reviewer, formalised through the annual review meeting. The manager / reviewer should ensure that the reviewee has a copy of and fully understands the documentation or electronic system used within the local area
- Where an individual is on secondment from their substantive post to another area within NHS Lanarkshire the appraisal should be carried out by the relevant manager in the area they are seconded to. Where appropriate this manager may wish to liaise with the substantive manager.
- It is the responsibility of the manager / reviewer and reviewee to fully prepare for the review meeting to ensure that meaningful and focused two-way dialogue relating to the reviewee's development ensues. There should be a minimum of two week's notice of a review meeting, the location and timing of which must be mutually convenient for the manager/reviewer and reviewee
- The reviewee and manager / reviewer will document the PDP/R. Copies of the development plan to emerge from the process should be signed by both manager / reviewer and reviewee and each should retain a copy or have access to the electronic system, if used, to view. This document will be required for future review of progress and support local learning plans
- Whilst PDP/R focuses upon identifying individual potential and development needs, a summary document will be completed by the manager / reviewer and reviewee
- The PDP/R process includes support of third part resolution of any issues encountered while carrying out the PDP/R process that cannot be addressed dealt with by the manager / reviewer and reviewee together. (This would normally be a senior within the local area)

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### **5.2 Responsibilities**

All members of staff have a responsibility for their own development and should take an active part in the PDP/R process.

***The member of staff is responsible for:***

- ensuring they understand the principles and practice of PDP/R to be able to participate fully in the process
- discussing and agreeing a Personal Development Plan with their reviewer within 12 weeks of taking up a new role. (Doctors should agree a job plan and objectives within this timeframe)
- Preparing in advance for their meeting on the relevant electronic system (or appropriate paperwork if applicable)
- fulfilling their role within the organisation including the allocation of adequate time for preparation, conduct and follow up of the personal development planning and review process
- taking an active interest in their own learning and development and accepting responsibility to fulfil the agreed resourced learning identified through the process
- ensuring their reviewer is aware of any contributing factors that may impact their contribution to the process

***The manager / reviewer is responsible for:***

- ensuring they are fully competent in all aspects of PDP/R relating to their staff group
- ensuring that every member of staff has a PDP/R at least annually
- allocating protected time to meet with the individual to ensure a robust, meaningful conversation takes place
- ensuring that the PDP/R process is commenced on completion of the induction phase
- ensuring a Personal Development Plan is discussed and agreed with the member of staff within 12 weeks of taking up a new role (For doctors this will be an agreed job plan and objectives)
- assisting members of staff to understand what is expected of them as part of the personal development planning and review process
- allowing staff appropriate time to complete their prep work in advance of the appraisal meeting
- providing constructive feedback on the individual's work and related development
- providing prompt formal notification of any performance concerns to the member of staff in advance of the PDP/R
- identifying, allocating and accounting for resources, including time, for learning and development to be undertaken effectively
- making reasonable adjustments which take into account any declared or identified issues the member of staff may have in relation with the process in accordance with the Equality act 2010



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### *The Learning Strategy*

#### **Group is responsible for:**

- supporting the PDP/R process within all areas of the organisation
- continued review of policy and process
- supporting the implementation of this policy throughout the organisation

#### **Trade unions /Professional Organisations are responsible for:**

- raising awareness, in partnership with the organisation, of the agreed approach to PDP/R and its benefits
- Agreeing this policy and, in partnership with NHS Lanarkshire, ensure it is implemented throughout the organisation

## **6. RESOURCE IMPLICATIONS**

The PDP/R process is resourced at local level through local budget holders. It is supported by access to learning opportunities available through the organisation and externally.

## **7. COMMUNICATION PLAN**

- This policy will be launched using the weekly staff briefing and will be available via <https://www.nhslanarkshire.scot.nhs.uk/corporate-policies/>
- This policy will also be discussed at the appropriate management team meetings and local partnership fora.
- Staff within Human Resources and Organisational Development will be briefed on the content of the policy.

## **8. QUALITY IMPROVEMENT – Monitoring and Review**

NHS Lanarkshire undertakes to monitor and review the operation of this policy on an ongoing basis to ensure that the aims of the policy are actually being achieved. Monitoring and review will be undertaken in partnership and will focus on both quantitative and qualitative data

This policy will be reviewed every three years via the Joint Policy Forum

## **9. EQUALITY AND DIVERSITY IMPACT ASSESSMENT**

This policy meets NHS Lanarkshire's SIA



## **10. SUMMARY or FREQUENTLY ASKED QUESTIONS (FAQs)**

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See Appendix A

### **11. REFERENCES**

A supplementary guidance document is attached at Appendix A.

This Policy should be read in conjunction with other supporting Policies and documents such as:

- Induction Policy
- NHS Scotland Workforce Grievance Policy
- NHS Scotland Workforce Capability Policy
- Resolution of Disciplinary Matters for Medical & Dental Staff
- Recruitment & Selection Policy
- Secondment Policy
- Knowledge Services Borrowing Policy
- Learning, Education and Training Policy
- Equal Diversity and Human Rights Policy
- Equality Act 2010
- PDP/R PIN Guideline (3<sup>rd</sup> Edition 2011)

Whilst a number of policies have been listed for reference it should be noted that this list is not exhaustive.

### **12. CHECKLIST**

To be sent to Corporate policies:-

Copy of completed policy  
Copy of EDIA  
Copy of assurance process document for all policies  
Copy of fast-track document if applicable

**Appendix A**

**PERSONAL DEVELOPMENT PLANNING  
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**Summary Supplementary Guidance Document for all staff groups**

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### Staff Employed Under Agenda for Change

The NHS Knowledge and Skills Framework (KSF) is based on good human resource management and development – it is about treating all individuals fairly and equitably. In turn, individual members of staff are expected to make a commitment to develop and apply their knowledge and skills to meet the demands of their post and to work flexibly in the interests of the public.

KSF and its personal development planning and review process lie at the heart of the career and pay progression strand of Agenda for Change, by providing a single, consistent, and comprehensive framework for staff review and development.

In common with other systems for PDP & R, the purpose of KSF and the development planning and review process is to

- Facilitate the development of services so that they better meet the needs of users and the public through investing in the development of all staff
- Support the effective learning and development of individuals and teams – with all staff being supported to learn throughout their careers and develop in a variety of ways, and being given the resources to do so
- Support the development of individuals in the post in which they are employed so that they can be effective at work – with managers and staff being clear about what is required within a post and managers enabling staff to develop within their post
- Promote equality for and diversity of all staff with all staff covered by Agenda for Change using the same framework, having the same opportunities for learning and development and having the same structured approach to learning, development and review.

Detailed information is contained within the NHS Knowledge and Skills Framework and the Development Review Process (October 2004) Handbook<sup>11</sup>. 11

<https://www.msg.scot.nhs.uk/pay/agenda-for-change/knowledge-skills-framework-ksf>

Staff covered by Agenda for Change should use the Turas Appraisal online system to record their PDP/R. <https://turasdashboard.nes.nhs.scot/>

### Medical Appraisal & Revalidation

Since November 2009, all doctors on the Medical Register who practise medicine have been required to have a Licence to Practise.

There is a UK wide requirement for the revalidation of all doctors who wish to practise medicine (including those who wish to retain the right to prescribe medication and certify deaths).

Every licensed doctor who practices medicine must revalidate every 5 years. Revalidation supports Doctors to develop practice, drives improvements in clinical governance and gives patients confidence that Doctors are up to date. The purpose of revalidation is to provide reassurance to patients, the public and employers that a doctor is up-to-date and fit to practice. The decision to 'revalidate' a doctor will be made by the General Medical Council (GMC), based upon information gathered from annual appraisals. Further information can be found at <http://www.gmc-uk.org/doctors/revalidation.asp>

### Doctors in Training Posts

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Newly qualified doctors leave university and compete to enter a 2-year structured foundation programme, with regular review of progress across the 2 years. At the end of the first year (FY1) they become eligible for full registration with the General Medical Council (GMC), and at the end of the second year achieve a certificate (Foundation Achievement of Competence Document) which allows them to apply for specialist training programmes. Thereafter they become subject to highly structured assessment of their progress in training through an Annual Review of Competence Progression (ARCP), coordinated and overseen by the Postgraduate Medical Deaneries.

If satisfactory progress is made, this ultimately leads to the award of a Certificate of Completion of Training which allows 9 entries to the GMC specialist register. The ARCP process will continue to be the main mechanism to assess and ensure that the development needs of a doctor in training are being met and, for those in Core and Specialty training posts, to satisfy the requirements of medical revalidation.

ARCP information will be enhanced with local NHS Board data relevant to an individual doctor's ongoing development, ensuring an accurate and robust methodology that will inform the Postgraduate Medical Dean's recommendation to the GMC on the fitness to practise of each doctor in training.

### **Primary Medical Services**

As specified in the National Health Service (General Medical Services Contracts) (Scotland) Regulations 2018, independent General Practitioners (GPs) are under a contractual requirement to participate in the appraisal system provided by their local NHS Board and, through the GP Appraisal Scheme, there are well-established local arrangements that assist GPs to critically review their practice on an annual basis, and to identify and act upon identified educational and developmental needs.

The GP Appraisal Scheme is supported and quality assured by NHS Education for Scotland, and contributes to individuals' Continuing Professional Development (CPD), and therefore continuous quality improvement in patient care.

### **Dentists Appraisal**

For dentists employed within NHSScotland Dentists appraisals should be in line with the requirements of the General Dental Council. GDC registrants must complete the Annual Renewal (AR) process each year.

Annual Renewal for Dental Care Professionals takes place in the weeks leading up to 31 July and for dentists during the weeks leading up to 31 December. Registrants will receive a letter ahead of the deadline with information about how they can make their Annual Renewal.

This process ensures that all dentists are fit to remain registered and therefore fit to practise. It contains elements of Continuing Professional Development (CPD) and monitoring of educational activity within the defined period.

Further information can be found at <https://www.gdc-uk.org/>

### **Executive & Senior Management Cohort**

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PCS2019 (ESM)01 sets out the requirements of the performance management system and the Personal Development Plan process.

[https://www.sehd.scot.nhs.uk/pcs/PCS2019\(ESM\)01.pdf](https://www.sehd.scot.nhs.uk/pcs/PCS2019(ESM)01.pdf)

The strategic objectives of the revised system are:

- To ensure robust linkages between individuals' pay and performance;
- To ensure robust linkages between individual and organisational performance;
- To demonstrate fairness and equity.

Executive and Senior manager cohort are able to record their appraisal on the Turas Executive system <https://turasdashboard.nes.nhs.scot/>