

## LOGAN COUNTY BOARD OF EDUCATION

### SERVICE PERSONNEL EVALUATION

Adopted: \_\_\_\_\_

#### **1. PURPOSE.**

The Logan County Board of Education recognizes that service personnel evaluations should be conducted to provide the employee with feedback concerning his/her job performance. Therefore, all service personnel shall be evaluated by their immediate supervisor.

#### **2. TRAINING.**

The person designated to implement the evaluation system for service personnel shall be the immediate supervisor and/or his designee who must have training in the evaluation of school personnel from the West Virginia Center for Professional Development.

#### **3. ORIENTATION.**

It is the responsibility of the immediate supervisor to properly implement employee service evaluations. At the beginning of the employment period, the supervisor will provide all service employees with copies of the purpose, instruments, and procedures to be used in evaluating their performance.

#### **4. OBSERVATIONS/EVALUATIONS.**

**4.1** Each service employee will be observed and evaluated by his/her immediate supervisor or his/her designee every year. Service employees with 0 – 3 years experience shall have 2 observations per evaluation. One (1) observation shall be conducted prior to January 1 and one (1) observation prior to May 1. Service employees with more than three (3) years experience shall be observed one (1) time prior to May 1. All evaluations shall be completed by June 30. However, evaluations may be completed at any time if deemed necessary by the supervisor, or requested by the employee

4.2. Upon an employee's transfer to a different school or a different classification, the employee shall be observed and evaluated by his/her immediate supervisor or his/her designee. Each evaluation will be based on a minimum of two observations.

4.3. Observations may be of a formal or informal nature. Formal observations represent monitoring to specifically observe the employee's work. Daily informal observations include the monitoring of all circumstances that are reflective of the employee's work including data collected from receivers of the employee's service.

4.4. Within five (5) working days of the observation/evaluation, the immediate supervisor or his/her designee shall have a conference with the employee and will identify strengths and areas of need and will make any suggestion for necessary improvement.

4.5. If any area on the evaluation is marked "needs attention", then a plan of improvement must be initiated within ten (10) working days.

4.6. The immediate supervisor and the employee shall develop a written "Plan of Improvement" for each area that, in the opinion of the immediate supervisor, the employee is "needs attention". However, the immediate supervisor or the employee may request from the superintendent or his/her designee that an improvement team be established to assist in the plan of improvement.

4.7. The purpose of the plan is to assist the employee in his/her job performance and provide him/her an opportunity to improve.

4.8. The timeline for an improvement plan should be no more than one semester.

## **5. IMPROVEMENT TEAM.**

5.1. The composition of the improvement plan will be based upon the type of deficiency and the assignment of the employee in need of assistance. Should an improvement team be established, each team will, at a minimum, consist of one central office administrator, one building level administrator, and one employee who has successfully met the same performance standards as the employee receiving the assistance.

5.2. The improvement team may develop a written plan with the employee utilizing the appropriate form and may provide assistance to the employee in meeting the performance requirements of the plan.

**5.3.** The improvement team serves as resource persons to the immediate supervisor and the employee. The team will report the results of its efforts to the supervisor who retains decision making authority.

**5.4.** If the employee cannot or chooses not to remediate the deficiency, dismissal proceedings may be initiated if the deficiency substantially impairs the employee's ability to fulfill his/her job responsibilities.

## **6. USE OF EVALUATION RESULTS.**

**6.1.** The results of the evaluation (1) may be used to improve the quality of education and services for students, (2) may be used to provide information for employees to improve their performance, and (3) shall be used to make decisions affecting promotions and the filling of any service personnel positions of employment or job occurring throughout the school year that are to be performed by service personnel.

## **7. SEVERABILITY.**

If any provision of this policy or application thereof to any person or circumstance is held invalid, such invalidity shall not affect other provisions or applications of this policy.

**LOGAN COUNTY SCHOOLS  
OBSERVATION FORM  
FOR SERVICE PERSONNEL**

NAME \_\_\_\_\_

JOB TITLE \_\_\_\_\_ SCHOOL/DEPARTMENT \_\_\_\_\_

DATE \_\_\_\_\_ OBSERVER \_\_\_\_\_

*(CODE TO BE USED FOR EACH INDICATOR)*

O - OUTSTANDING

S - SATISFACTORY

N - NEEDS ATTENTION

**WORK HABITS**

- Shows punctuality in arriving to work on time.
- Uses work time wisely and effectively.
- Exhibits pride in himself/herself - Good personal hygiene.

**OBSERVATION**


**ATTENDANCE**

- Attends necessary meetings or conferences when required.
- Informs supervisor when unable to be at work.
- Complies with County Personal Leave Policy.


**COMPLIANCE WITH RULES**

- Performs duties as assigned.
- Works with/without close supervision.
- Complies with State and County Policies.


**OBSERVATION**

- Observes appropriate safety procedures.
- Demonstrates awareness of Fire Marshal's regulations.
- Maintains safe and operable equipment and shows adequate care.


**ATTITUDE**

- Has good rapport with supervisors and fellow workers.
- Communicates freely within the chain of command.
- Takes pride performing work well.


**PERFORMANCE**

- Demonstrates the ability to establish a work schedule for job.
- Demonstrates knowledge of work to be done.
- Is familiar with equipment.
- Orders materials needed for job.


**ACCEPTING RESPONSIBILITY**

- Demonstrates willingness to work in emergencies.
- Demonstrates willingness to work outside job description in time of emergencies.


**PUBLIC RELATIONS**

- Greets visitors courteously/and in professional manner.
- Retains confidentiality.


**PROFESSIONAL DEVELOPMENT**

- Meets guidelines on job description as classification in Law Book indicates.
- Maintains and upgrades job skills.


For overall rating of "Outstanding" (2 out of 2), (2 out of 3), (3 out of 4), indicators must be "Outstanding".  
For "Needs Attention" (1 out of 2), (2 out of 3), (2 out of 4).  
Otherwise overall rating should be "Satisfactory".

NOTE: All Service Personnel shall be evaluated yearly.

0-3 YEARS EXPERIENCE: A minimum of 2 Observations per Evaluation - 1 prior to Jan. 1; 1 prior to May 1.

3-MORE YEARS EXPERIENCE-a minimum of 1 Observation prior to May 1.  
Administrator may Observe/Evaluate more often as deemed necessary.

# LOGAN COUNTY BOARD OF EDUCATION SERVICE EMPLOYEE EVALUATION

Each area marked "unsatisfactory" requires a written improvement plan

EMPLOYEE \_\_\_\_\_ LOCATION \_\_\_\_\_  
ASSIGNMENT \_\_\_\_\_ Date \_\_\_\_\_

Evaluate each factor by checking the appropriate column

SATISFACTORY                      UNSATISFACTORY\*

**WORK HABITS**

1. Observation of work hours
2. Attendance
3. Compliance with rules
4. Safety practices
5. Meets time schedules
6. Courtesy
7. Appearance of work area
8. Initiative
9. Attitude
10. Personal appearance


**PERFORMANCE**

11. Work judgments
12. Planning and organizing
13. Quality of work
14. Accepts responsibility
15. Follows instructions
16. Efficiency under stress
17. Operation and care of equipment
18. Work coordination
19. Public relations
20. Employee relationships
21. Physically able to perform duties


**PROFESSIONAL DEVELOPMENT**

22. Knowledge of work
23. Job-related training
24. Accepts change
25. Skilled in use of equipment


SERVICE PERSONNEL  
OVER-ALL EVALUATION

CHECK ONE:  
\_\_\_\_\_ SATISFACTORY  
\_\_\_\_\_ UNSATISFACTORY

EMPLOYEE \_\_\_\_\_

I CERTIFY THAT THIS REPORT HAS BEEN DISCUSSED WITH ME. I UNDERSTAND THAT MY SIGNATURE DOES NOT NECESSARILY INDICATE AGREEMENT.

EMPLOYEE'S COMMENTS: \_\_\_\_\_

DATE \_\_\_\_\_ EMPLOYEE'S SIGNATURE \_\_\_\_\_  
EVALUATOR'S SIGNATURE \_\_\_\_\_

COPIES - ONE TO EMPLOYEE  
          ONE TO EVALUATOR  
          ONE TO DIRECTOR OF PERSONNEL

\*ATTACH COPIES OF "OBSERVATION REPORT FORMS" IF APPLICABLE, ATTACH "PLAN(S) OF IMPROVEMENT."