

# Alton Fire & Rescue Department Standard Operating Guidelines (SOG)

**SOG 1.1.7 Personnel Performance Evaluation (Reference SOP 1.1.7)**

**PURPOSE:** To assess Department Member's performance relative to the discharge of their duties.

**SCOPE:** All Fire Department Members

**SPECIFICS:** Department members will be evaluated annually relative to their performance within the context of their job description.

Probationary members will be evaluated at their 6 month and at their 12 month anniversary.

The frequency of the personnel performance evaluation may be more often or as necessary as determined by the Chief of the Department.

Members attaining a poor performance review may be placed on probation, may be counseled in regards to improving their performance; and may be dismissed with repeated unsatisfactory performance evaluations.

**DATE:** Approved November 3, 2008

# Alton Fire & Rescue Department

## Standard Operating Procedures (SOP)

### SOP 1.1.7 Personnel Performance Evaluation

**PURPOSE:** Describes the method of assessing Department Member's performance relative to the discharge of their duties.

**SCOPE:** All Fire Department Members

#### **SPECIFICS:**

- Fire Department member will be evaluated within the parameters of their job description and within the specific items outlined in the Performance Evaluation attached to this SOP.
- Members will be notified by the Lieutenant managing Human Resources of their impending personnel evaluation. The member's squad Lieutenant will be simultaneously notified.
- The member will have the opportunity, if desired, to provide information for their personnel review with their Squad Lieutenant.
- The member will be notified of his/her evaluation meeting with the Personnel Review Board (PRB)
- Any recommendations made by the PRB will be forwarded to the Fire Chief.

**DATE:** Approved November 3, 2008; Revised September 29, 2009

# Alton Fire Department Employee Performance Evaluation

Name:		Position:
Officer/Supervisor:		Company:
Chief or others to be present:		
Date of this Evaluation / /	Date of last Evaluation / /	Next scheduled Evaluation / /

**Reason for Evaluation:**

<input type="checkbox"/> Annual	<input type="checkbox"/> Probation	<input type="checkbox"/> Policy Infraction	<input type="checkbox"/> Missed critical participation requirement
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Instructions: Evaluate the employee's work performance as it pertains to the job requirements. Circle the letter that best describes the employee's performance since the last evaluation. Add comments to support the evaluation. Critical job participation requirements must be met to receive a satisfactory evaluation unless the supervisor agrees that the employee's explanation is acceptable.

**CRITICAL JOB PARTICIPATION REQUIREMENTS:**

S - Satisfactory

U - Unsatisfactory

Factors	Evaluation	Comments
<b>EMERGENCY CALLS</b> Attends 6 or more emergency calls per quarter.  (reviewed quarterly)	<b>S</b>	_____
	<b>U</b>	_____
<b>DRILLS &amp; TRAINING</b> Attends 6 hours of training or drills per quarter, including all mandatory drills.  (reviewed quarterly)	<b>S</b>	_____
	<b>U</b>	_____

**JOB PERFORMANCE:**

S - Satisfactory

U - Unsatisfactory

Factors	Evaluation	Comments
<b>PUBLIC RELATIONS</b> Attends community service events, does station tours or other public service.	S    U	_____ _____ _____ _____
<b>TASK ASSIGNMENTS</b> Can be relied upon to complete tasks correctly and on time. (equipment checks, special projects etc.)	S    U	_____ _____ _____ _____
<b>TASK PERFORMANCE</b> Able and willing to perform job functions at the appropriate level.	S    U	_____ _____ _____ _____
<b>ATTENTION TO POLICY</b> Follows SOGs, SOPs, safety regulations etc.	S    U	_____ _____ _____ _____
<b>INTERPERSONAL SKILLS</b> Willingness and ability to communicate, cooperate, and work with co-workers and supervisors.	S    U	_____ _____ _____ _____

**Accomplishments**


**Future Plan For Areas That Need Improvement**


**Recommendations for Development - Schooling, Seminars, Training etc....**


**Employee's overall performance:**

<input type="checkbox"/> Satisfactory	<input type="checkbox"/> Probation for next 12 months.
<input type="checkbox"/> Unsatisfactory.	<input type="checkbox"/> A second unsatisfactory within 12 months is cause for dismissal.
	<input type="checkbox"/> Follow up necessary every 3 months.

**Comments**


<b>Follow Up Required:</b> YES                      NO	<b>Follow Up Date:</b> /                      /
<b>Employee Signature:</b> _____	<b>Officer/Supervisor Signature:</b> _____
<b>Fire Chief:</b> _____	<b>Assistant Chief:</b> _____