



CITY OF WATAUGA – PERSONNEL, ADMINISTRATION AND FINANCIAL POLICIES AND PROCEDURES MANUAL

POLICY TITLE	Performance Improvement Plan
INITIAL EFFECTIVE DATE	December 7, 2015
LAST REVISION DATE	This is a new policy.
POLICY NUMBER	4.07

OBJECTIVE To establish clear, positive guidelines for correcting and preventing job performance deficiencies.

SCOPE This policy applies to all regular full-time and regular part-time employees of the City of Watauga.

POLICY

A. Use of a Performance Improvement Plan (PIP)

Supervisors have the discretion to utilize the Performance Improvement Plan to motivate employees to achieve the level of performance expected of them. This policy sets forth non-comprehensive guidelines for supervisors to follow if they so choose. **THIS PERFORMANCE IMPROVEMENT POLICY IS DISCRETIONARY AND IS NOT AN EMPLOYMENT CONTRACT. THE CITY RESERVES THE RIGHT TO DEVIATE FROM THIS POLICY AT ANY TIME AS CIRCUMSTANCES MAY WARRANT.**

Performance improvement guidelines may be used by supervisors to assist employees with performance problems, but do NOT apply to employees who have violated the City's Discipline policy, or who have committed other rule violations. When the job performance of any employee falls below an acceptable level, the employee's supervisor has the discretion to utilize this policy in an effort to help the employee improve his/her performance.

B. Placement in a Performance Improvement Program (PIP)

When the job performance of an employee falls below an acceptable standard, their supervisor may place the employee on a Performance Improvement Program (PIP). The PIP shall consist of timely discussions between the supervisor and the employee with the following provided in writing using the **Performance Improvement Plan Form**:

- a. The specific unacceptable deficiency in the employee's performance;
- b. The necessary improvement;
- c. The period of time in which improvement must occur;

- d. A statement that further consequences will result if the employee fails to show and maintain satisfactory improvement.

PIPs may not be appealed. Employees may, however, submit written responses/rebuttals for attachment to the PIP. If the employee refuses to sign, the supervisor should note on the original document that a copy was given to the employee.

Written responses/rebuttals must be submitted within ten (10) business days of receiving the PIP.

The original PIP shall be maintained in Human Resources, with a copy given to the employee and one retained by his/her department.

Supervisors will schedule follow up meetings which will be documented using the **Performance Improvement Plan (PIP) Follow Up Discussion Form**.

C. Failure to Improve

The supervisor may recommend an extension of the performance improvement plan, if such action is warranted in their judgment. However, if an employee's performance remains unacceptable, the employee will be subject to additional disciplinary action, up to and including dismissal.



Performance Improvement Plan (PIP)

Employee Name:

Supervisor Name:

Meeting Date:

Performance Areas Meeting and Exceeding Requirements
1. 2. 3.
Performance Areas Identified for Improvement
1. 2. 3.
Additional Discussion Items (<i>Training, Project Updates, Due Dates</i>)
Summary of Expectations
Next Steps in Employee Development
Employee: Supervisor:

Please sign below indicating we have discussed all of the above items.

Signature: _____

Signature: _____

Employee Name:

Supervisor Name:

Job Title:

Job Title:



Performance Improvement Plan (PIP) Follow Up Discussion

Employee Name: _____

Meeting Date: _____

Supervisor Name: _____

What is working well?		
Objectives, Expectations and Areas of Improvement	Due Date	Progress
		<input type="checkbox"/> In Progress <input type="checkbox"/> Achieved <input type="checkbox"/> Did not Achieve
		<input type="checkbox"/> In Progress <input type="checkbox"/> Achieved <input type="checkbox"/> Did not Achieve
		<input type="checkbox"/> In Progress <input type="checkbox"/> Achieved <input type="checkbox"/> Did not Achieve
Employee's Recommendation/Feedback		
Summary of Performance		

Please sign below indicating we have discussed all of the above items.

Signature: _____ Signature: _____

Employee Name: _____

Job Title: _____

Supervisor Name: _____

Job Title: _____