***Brown Bag FAQ’s from May 18th Brown Bag session on Root Cause Analysis and PDP 360’s***

***Root Cause Analysis***

How does L&I interpret hospitalization?

* Actual admittance – overnight stay in a hospital – an ER visit does not count.

What should be reported and is it limited to employees?

* You should report the geographical location, at work/lunch/etc. ALL incidents should be reported – employees, students, general public.

***PDP360 Discussion***

Are we required to use the 360?

* The 360 is an additional tool to provide additional data for the employee’s PDP, The use is voluntary and it is left to each unit director to decide how they want to use it.

Should there be more emphasis on “your” perspective in the survey instructions.

* This was great feedback from the Brown Bag session and it has been changed to be bolded in the catalyst survey.

Are the 10 people optional (5 from the employee, 5 from the Supervisor) – can there be less people asked to participate?

* A minimum of 10 people prevents the results from being too narrow, and also gives a buffer in the event that some people choose not to participate in the evaluation. If the employee has difficulty providing 5 names or their job has limited interaction with others, the supervisor can make the judgment for the number of raters invited to participate.

Is there an option to have a N/A choice for questions that don’t pertain to the working relationship between the reviewer and employer being reviewed?

* Again, good idea. N/A has now been incorporated as a response column in the catalyst survey.

A concern was raised with only having three performance rating categories on the survey. As an example, one time an employee helped on a project and exceeded expectations, but it was not a consistent project – how to rate this employee?

* The three item performance rating was implemented in May 2014. The rater can choose the frequency of the interaction. The rater could choose “infrequently” and they would only need to answer the questions that pertained to the specific capacity that they worked with the person. Supervisors reading the survey results will be able to correlate the rater with the frequency of the interaction. Unanswered questions are scored as N/A.

FAQ’s from May 18, 2015 continued

Does the employee get to see the data from the survey?

* The draft catalyst results are deleted once the supervisor has transferred the data to the report. The catalyst data is considered confidential, the employee only sees the de-identified report.

If someone who fills out the survey has a lot of exceeds expectations or needs improvement that I don’t agree with, what should the supervisor do?

* The Supervisor should see this as an opportunity to follow up with the respondent to gain more information.

What if the employee says they don’t want to participate if they are not able to see the survey/data results?

* Talk to your unit director and follow his/her guidance.

What if the employee doesn’t want to give 5 names for the survey?

* Some employees may not interact with a wide range of individuals. If that is the case, the Supervisor can elect to use a smaller pool of raters or provide additional raters from the Supervisors knowledge and position.

Has this process been approved for classified staff through the union?

* Yes, it was approved by HR Operations in February 2013 for all HSA unit classifications.

Will the units be allowed to customize the survey?

* This is a voluntary tool, the units may customize the survey with their Director’s input.