Annual Review 2020 (to replace normal P&DR)

**Please complete this first page prior to meeting your reviewer**

Name................................................................. Research Group ………………………………

Please indicate your job family/track:

 Research Only Research & Teaching Learning, Teaching & Scholarship

 Management, Professional & Administrative Technical & Specialist Operational

|  |  |
| --- | --- |
| **Training** Have you completed these mandatory courses? E&D Essentials \*Date ………………….. Understanding Unconscious Bias Date ………………….. Introduction to GDPR Date ………………….. Information Security Awareness Date …………………..  COVID-19 Recovery Return to Campus Induction Date ………………….. *(\*Dates can be found on HRCore Employee Dashboard: Learning & Development tab)* | Yes/NoYes/NoYes/NoYes/NoYes/No |
| *RO / R&T / LT&S line managers only* Have you completed this online training module?Academic Appointment and Promotion Date…………………..  | Yes/No/NA |
| Is your staff web profile up to date?  | Yes/No/NA |
| Are you a member of the ECR forum? | Yes/No/NA |
| **Athena Swan**Are you a *member* of an Athena SWAN workgroup? (Workload allocation = 10 hours) | Yes/No |
| Are you a *chair* of an Athena SWAN workgroup? (Workload allocation = 50 hours) Name of workgroup*……………………………………………………………….*How many meetings have you attended in the last year? ……………………………. | Yes/No |
| MentoringDo you have a mentor?  If no, would you like a mentor?  | Yes/NoYes/No |
| Are you a mentor?  If yes, how many mentees do you have?....................... | Yes/No |
| **Research Themes (RO / R&T / LT&S staff only)***Number in priority order (1, 2 and/or 3) which of the research themes you belong to*  ………Determinants of Health and Health Inequalities ………Data Science  ………Solutions Focused Research  |  |
| Are you a member of a Research Theme Management/Executive group?Are you a member of a Research Theme working group? If yes, name of working group*………………………………………………………….* If yes, how many meetings have you attended in the last year? ………………… | Yes/NoYes/No |

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**Please complete jointly recognising that this discussion is happening in the context of COVID-19 disruption to normal working practices**

|  |  |
| --- | --- |
| In the context of COVID-19 disruption: |  |
| Have you discussed your workload?* Any significant change due to COVID-19?
* If yes, how to mitigate problems that have arisen/may arise.
 | Yes/No |
| Have you discussed your return to campus following COVID-19 with your line manager? (as per University Return to Campus Process <https://www.gla.ac.uk/media/Media_725312_smxx.pdf>) | Yes/No |
| If no, when will this be discussed?Date:………………..……………………………………………………………………… |  |
| Have you discussed objectives for next year? *(Please note that apart from those on the ECDP, this is not formally part of this year’s review, but many will find it helpful to set new objectives, particularly in light of COVID-19, and this should be offered to all reviewees)*  | Yes/No |
| If no, please can you say why not ……………………………………………………………………………………………………………………………………………………………………………………………… |  |
| Have you discussed career progression/promotion/rezoning?* New/adapted objectives in light of COVID-19
 | Yes/No |
| Have you discussed training/support needs in relation to objectives and career development?* For research-active staff (especially ECRs), please refer to recent information about the University’s implementation of the Concordat for the Career Development of Researchers: <https://moodle.gla.ac.uk/course/view.php?id=21943#section-1>
 | Yes/No |
| Has at least one personal development action been agreed? | Yes/No |
| Do you have a funding end date?  If yes, date ..................................................... | Yes/No |
| **N.B.** **If yes, have subsequent career plans been discussed?**  | Yes/No |

Reviewer Name (Print) ....................................................................

Reviewer Signature ........................................................................ Date ……………………..

Reviewee Signature........................................................................ Date………………………

**Please return completed form to IHW Admin, 1 Lilybank Gardens**

**Email to** **ihwadmin@glasgow.ac.uk**