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# Staff Evaluations: Responding to the Challenge

by Patricia Scallan

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Staff evaluation is often viewed as one of the most difficult, time consuming, and emotionally draining tasks child care directors face. But when carefully and consistently pursued, it can also become a springboard to professional growth, program improvement, and staff motivation. Routine staff evaluations can be an effective tool for maintaining and enhancing staff performance. Through the evaluation process directors assume the responsibilities of identifying problems, providing opportunities for addressing and correcting problems, and developing the unique potential of each staff member.

Although conducting staff evaluations is an important responsibility, few directors have had the benefit of formal training in the evaluation process. At best, most directors develop a personal style of conducting performance evaluations in response to their mistakes on the job or reactions to their own evaluations.

Confounding the process further is the frustration of knowing that no individual can effectively change the attitude, learning style, or psychological nature of another. It is up to

each individual to make the decision to change her behavior. An effective staff evaluation program can, however, go a long way toward influencing and increasing professional skills and self-esteem of caregivers. In a supportive climate, the evaluation process builds motivation, competence, and commitment to the organization.

Demands on the director's time will also impact on both the frequency and thoroughness of staff evaluations. With the myriad of tasks facing directors daily, it is easy for staff evaluations to be rushed through or shifted to the bottom of the to-do list. What often results is a once a year conference in which the director attempts to touch base with the teacher before proceeding with another year.

A comprehensive look at the evaluation process is provided in the book, **Teacher Evaluation: Six Prescriptions for Success**. Authors Stanley and Popham cite five dimensions of evaluation. They include:

- providing a process for supervisors and teachers to work together to improve and enhance their teaching skills;

- bringing structured and guided assistance to marginal teachers;
- identifying the basis for making rational decisions about the retention, transfer, or dismissal of teachers;
- developing more informed judgments about differing performance levels for use in compensation programs such as merit systems;
- gathering information for determining the extent of staff improvement and knowledge following staff development opportunities.

Additionally, evaluation systems can reward superior performance, validate the selection process, and provide a basis for career planning and professional development.

Research on effective supervision indicates that evaluation systems which are built around attitudes directed toward improvement of skills, procedures, and processes, and which use instruments complementary to that attitude, are shown to significantly promote positive changes in staff performance (Zeleanak, 1973). Some centers evolve their own list of performance criteria for staff evaluations and encourage staff input into the process.

Especially helpful to beginning teachers, performance based criteria help to clarify the expectations of the center. The limitation of performance based criteria is that it is less likely to identify the individual needs and goals of caregivers and has less transferability to a framework for staff development activities.

All evaluation systems, while critical to the ongoing improvement of organizations, can be fraught with problems. Among the barriers to effective supervision and evaluation are:

- poor caregiver and supervisory attitudes toward evaluation;
- difficulty in separating formative and summative evaluations;
- inadequate measurement scales;
- lack of reliable and consistent performance criteria;
- lack of reliable data collection techniques;
- fallibility of standard feedback mechanisms such as classroom observation, self-administered checklists, and peer review;
- general lack of training of caregivers and supervisors in the evaluation process. (McGreal, 1983)

There are two main categories of evaluation systems — **Summative**, which occur once a year, and **Formative**, which happen over the course of the year.

Summative evaluations are less time consuming and serve as a standard to insure that certain minimal expectations are being met. They are the primary mechanism for making personnel decisions to “weed out the bad teachers.” Summative evaluations can help to protect the center from gross negligence and incompetence. Ultimately, the outcome of summative evaluation is that a decision can be made to dismiss a teacher. (Stanley and Popham, 1988)

Summative evaluations are most easily administered through a checklist format, accompanied by a rating scale. Some centers also include the use of more open-ended processes such as narrative reports and classroom observation.

Formative evaluations, in contrast, are conducted periodically throughout the year. They are more comple-

mentary to longer term staff training goals. Formative evaluations take many forms, including classroom observation, consultative conferences, videotape analysis, self-administered checklists, peer and mentor coaching, and open-ended narrative evaluations.

More time consuming and focused than summative evaluations, formative evaluations place the director in both a supervisory and evaluative role. As an evaluation system, formative assessments are more conducive to building trust and willingness on the part of the teacher to take risks and improve skills. Formative evaluations are less likely to result in the immediate dismissal of a teacher and, consequently, are viewed as a less threatening process by teachers. From the results of a formative evaluation, staff can infer that certain aspects of their performance will be the focus of future supervisory attention and staff development activities. Over time, there is a commitment to progress facilitated through supervisory assistance and encouragement.

In selecting a good evaluation system, Thomas McGreal, professor of educational administration at the University of Illinois, suggests the following guidelines:

- include clear criteria established with significant teacher involvement;
- reflect the center’s philosophy;
- provide opportunities for multiple sources of data to insure the most accurate picture of teaching;
- involve a variety of feedback systems, including classroom observation, videotape, and self-assessment.

A well documented, objective, and timely evaluation enables caregivers to conceptualize their performance. As mirrors of behavior, staff can use that information to set goals for increasing their own competence.

Regardless of the evaluation system or instrument used, its criteria must be developmentally appropriate to the professional skills, maturity, and experience of the teachers being evaluated. As Madeline Hunter, in her essay "Create Rather Than Await Your Fate in Teacher Evaluation" (1988), remarks, "Clearly, the beginning teacher is not expected to have the proficiency and artistry of an accomplished teacher. A less successful teacher should not be expected to attain exemplary professional competence after only one evaluation conference."

A comprehensive approach to staff evaluation necessarily entails using a variety of formats to meet the needs of individual teachers in each stage of their professional development.

Educational researchers Sikes, Measor, and Woods (1985) identified five stages of teaching which serve as a useful model for determining the appropriate evaluation format to use for individual caregivers:

**Stage 1** teachers are beginning teachers who are just launching their careers. Performance based scales such as the Child Development Associate (CDA) offer clear and specific descriptions of the desired behaviors. They help directors define expectations and appropriate classroom behaviors.

**Stage 2** teachers are stabilizing and are past the survival stage. They exhibit some degree of confidence in their skill level and are eager to learn a better way to approach problems. They benefit from more focused

observations and feedback that identifies challenges, problems, and strategies. With data constructively offered, Stage 2 teachers can begin to interpret what is happening in their classrooms and seek alternate approaches. Learning by observing, modeling, and doing enables them to try new classroom strategies. They thrive in a supportive environment that encourages problem solving and sharing.

**Stage 3** teachers are channeling energy. Having mastered the classroom fundamentals and confident of their skill level, Stage 3 teachers are ready to take on more challenging skills. They require exposure to new ideas to stay motivated and avoid teacher burn out. These teachers are ready for evaluation systems that facilitate introspection and personal goal setting. Teachers in Stage 3 will respond best to self-administered checklists, team evaluations, narrative formats, mentor and peer coaching systems, and video analysis.

**Stage 4** teachers are reaching a professional plateau and need to be recognized for their contributions as well as their shortcomings. They benefit from the stimulation team evaluations, mentor coaching, and self-administered checklists. Stage 4 teachers can help in refining and developing center based performance objectives. Personal goal setting systems encourage them to achieve specific results within a specified time frame.

**Stage 5** teachers are preparing for retirement. These teachers are not likely to modify their existing classroom behaviors and, consequently, are more responsive to softer forms of evaluation, including narratives, naturalistic observation, and coaching programs.

There is no one best approach to staff evaluations. The challenge is to match the evaluation system or instrument to the needs of the organization and to the experience and background of the caregiver. To be successful requires strong involvement on the part of the staff and director in establishing performance criteria and goals. Again, the amount of time a director has available to commit to the evaluation process is an important contributor to its effectiveness. Center staff size, maturity levels, stages of professional development, and frequency of the evaluation cycle will further influence the method and selection of evaluation tools.

While rating scales may appear at first glance to be the most efficient system, their criteria must offer enough specificity to provide clear, meaningful, and reliable discriminations. It can be a *no win* situation for directors when they are asked to define the difference between *superior* and *excellent* or *some of the time* and *most of the time*. Caution should be exercised so that rating scales do not evolve into a set of rules rather than guidelines. Scales that make comparisons between teachers are especially damaging to team building and can negatively affect the interaction between directors and caregivers.

The narrative formats allow more opportunity for clearer explanations of values and a more focused approach to areas that are most relevant to individual caregivers.

A less complex and lighter approach to evaluation, narratives provide the opportunity for descriptive analysis, interpretive judgments, and personal insight — all within the context of identifying problems and remedial recommendations.

Despite the issues surrounding each evaluation methodology, experience shows that a positive and supportive relationship between a knowledgeable director and a committed caregiver is still the most effective way to produce improved performance. The quantity and quality of the director's skills, gained largely through on the job training and personal experience, coupled with the degree of trust shared by the director and the caregiver, determine the success of the evaluation process. Effective directors, through the attitudes and behaviors they display during the evaluation process, increase the opportunity to instill trust, credibility, and motivation to their most valued resource — caregivers.

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