

## WHEATLAND COUNTY

<b>CORPORATE &amp; FINANCIAL SERVICES POLICY</b> SECTION 2.14	<b>PERFORMANCE MANAGEMENT – CONTRACTED SERVICES</b> Page 1/6
<b>PURPOSE</b>	Ensure that contractors are held accountable.
Effective Date: July 2/14 CM – Res. 14-07-12	Revised: May 5/20 CM – Res. CM-2020-05-27 (Policy Restructure)

All contracted services shall be reviewed using the performance management system for contracted services annually or in the case of shorter duration projects at the conclusion of the project.

# WHEATLAND COUNTY

## PERFORMANCE MANAGEMENT – CONTRACTED SERVICES

COMPANY NAME: \_\_\_\_\_ EVALUATION DATE: \_\_\_\_\_

EVALUATOR: \_\_\_\_\_ PROJECT EVALUATED: \_\_\_\_\_

### Performance Evaluation

#### ***PURPOSE:***

*The Performance Evaluation can serve any or all of the following purposes:*

1. To formally discuss the relationship between Wheatland County and the contractor.
2. To relate performance to roles, responsibilities, authority, duties as defined within the project description and terms of reference.
3. To review contract objectives, accomplishments, so as to identify where performance can be improved for benefit of the County.
4. To determine if the contractor is suitable to undertake future opportunities in Wheatland County.
5. To recognize strengths and weaknesses.
6. Evaluation to determine if corporate objectives were achieved.

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**Always consider the core competencies of accountability, customer focus, teamwork, communication, values, ethics, quality of work, timeliness.**

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1. Definitely below acceptable standards; project performance is consistently deficient, do not contract work to this company in the future.
  2. Some improvement is needed to meet acceptable standards; performance of contract requirements is inconsistent, do not contract to this company in the future.
  3. Meets acceptable standards; performance of contract requirements is consistent.
  4. Above acceptable standards; performance usually exceeds contract requirements.
  5. Outstanding; unquestionably above acceptable standards; performance consistently exceeds contract requirements. This contractor is a preferred contractor.

Section A. Work Performance	1	2	3	4	5
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**Knowledge** Understanding of fundamentals, ☐ ☐ ☐ ☐ ☐  
skills, methods, and procedures required in present contract.

Comments: \_\_\_\_\_

## WHEATLAND COUNTY

**Planning** Development of methods and work organization to efficiently perform overall work. ☐ ☐ ☐ ☐ ☐

Comments: \_\_\_\_\_

**Application** Ensure consistent contract Performance to complete overall work. ☐ ☐ ☐ ☐ ☐

Comments: \_\_\_\_\_

**Accuracy/Quality** Absence of mistakes and errors in contract performance. Thoroughness and attention to detail, and/or completeness. ☐ ☐ ☐ ☐ ☐

Comments: \_\_\_\_\_

**Responsibility** Recognizes duties required as listed in contract description and accepts responsibility for completion and accuracy. ☐ ☐ ☐ ☐ ☐

Comments: \_\_\_\_\_

**Time Management** Meets or exceeds deadlines, efficiently and effectively handles tasks and projects. ☐ ☐ ☐ ☐ ☐

Comments: \_\_\_\_\_

Section B. Personnel Performance	1	2	3	4	5
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**Contractor Personnel** Identification of required contract specific characteristics in contractor employees. ☐ ☐ ☐ ☐ ☐

Comments: \_\_\_\_\_

## WHEATLAND COUNTY

**Follow-Up** Monitoring that instructions, schedules, etc. are being followed.

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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Comments: \_\_\_\_\_

**Delegation** Delegates duties to appropriate contractor personnel and balances workload and priorities.

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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Comments: \_\_\_\_\_

**Safety** Orientation toward safe working practices and health standards.

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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Comments: \_\_\_\_\_

**Leadership** Establishment of contractor team effort toward meeting common objectives.

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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Comments: \_\_\_\_\_

Section C. Factors Affecting Contract Performance	1	2	3	4	5

**Adaptability/Judgment** Alteration of

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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activities, plans, etc. to accommodate new or changed situations. Examination of a problem leading to identification and probable solutions.

Comments: \_\_\_\_\_

## WHEATLAND COUNTY

**Cooperation** Working effectively with other

☐☐☐☐☐

Contractors and County staff to achieve common goals.

Use of knowledge and resources available.

Comments: \_\_\_\_\_

**Communication** Oral and written presentation

☐☐☐☐☐

of ideas. Ability to clearly and effectively communicate

ideas and information, shows tact and respect.

Comments: \_\_\_\_\_

**Attitude/Interaction** Behavior portrayed to

☐☐☐☐☐

contract, staff and public. Positive attitude, loyal,

helpful and cooperative. Set by example. Positive interaction.

Comments: \_\_\_\_\_

**Initiative** Self-confident, enthusiastic

☐☐☐☐☐

Performance tasks with a minimum of instruction.

Comments: \_\_\_\_\_

**Reliability** Dependability; instills full confidence.

☐☐☐☐☐

Completes contracted projects on time and completely.

Accurate billing records and timely invoicing must be considered.

Comments: \_\_\_\_\_

## WHEATLAND COUNTY

Section D. Overall Summary comments	1	2	3	4	5
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**Workers compensation board account in good standing? Yes/No**

**Overall Evaluation Score:**

**Recommend rehire (only if above 3 for rating)**

**Recommend not rehiring (when rating is 3 or below)**

The evaluator should discuss the contractors strong points as well as limitations with a view towards improving the contractors performance. Objectives – concentrating on the fundamentals, skills, methods, and requirements of the present contract – should be presented and accepted as **challenges**, and these challenges should be clearly understood by evaluator and contractor through effective face-to-face discussion.

**Major Strengths:** \_\_\_\_\_

\_\_\_\_\_

**Requiring Improvement:** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

RECOMMENDED BY EVALUATOR: \_\_\_\_\_  
(signature) (print name)

RECOMMENDED BY GM: \_\_\_\_\_  
(signature) (print name)

CAO/COUNTY MANAGER: \_\_\_\_\_