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Performance Evaluation: perception of health professionals in a public hospital institution

Avaliação de desempenho: percepção de profissionais da saúde em uma instituição hospitalar pública

Evaluación del desempeño: percepción de los profesionales de la salud en un hospital público

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Abstract: Aim: to comprehend the perception of health professionals about the process of performance evaluation. Method: qualitative exploratory-descriptive research developed in a Brazilian public hospital with 65 professionals that are member of a health multiprofessional team of the institution. Data were collected through semi-structured questionaire and submitted to thematic content analysis. Interpretation was based on the Freirean theroretical framework and on another related research. Results: we highlighted confidentiality, privacy, the instrument used and periodicity of the evaluation. Still, participants listed the need to prepare for the interview and the enphasys on the potentialities of workers. Concluding the evaluation, issues referred to the motivation of the professionals and feelings they experienced throughout the evaluation. Final considerations: results reinforce the comprehension of complexity inherent to the act of evaluate and the need of continuous exercise, amplifying evaluators and those evaluated, in order to evoke a participative and critically reflexive process.

Descriptors: Professional performance evaluation; Health management; Hospital administration; Researc in Nursing administration; Qualitative research

Resumo: Objetivo: compreender a percepção de profissionais da saúde sobre o processo de avaliação de desempenho. Método: pesquisa qualitativa exploratório-descritiva, realizada em um hospital público brasileiro com 65 profissionais membros da equipe multiprofissional de saúde da instituição. Os dados foram coletados por meio de questionário semiestruturado e submetidos à análise de conteúdo temática. A interpretação embasou-se no quadro teórico do referencial Freireano e em outras pesquisas relacionadas. Resultados: destacou-se a confidencialidade, privacidade, instrumento utilizado e periodicidade da avaliação. Ainda, os participantes

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elencaram a necessidade de preparação para a entrevista e a ênfase nas potencialidades dos trabalhadores. Tendo concluído a avaliação, emergiram questões referentes à motivação dos profissionais e aos sentimentos vivenciados ao longo da avaliação. **Considerações finais:** os resultados reforçam o entendimento da complexidade inerente ao ato de avaliar e a necessidade de exercício contínuo, ampliado a avaliadores e avaliados, no intuito de suscitar um processo participativo e de reflexão crítica.

Descritores: Avaliação de desempenho profissional; Gestão em saúde; Administração hospitalar; Pesquisa em administração de enfermagem; Pesquisa qualitativa

Resumen: Objetivo: comprender la percepción de los profesionales de la salud sobre el proceso de evaluación del desempeño. Método: investigación cualitativa exploratoria descriptiva, realizada en un hospital público brasileño con 65 miembros profesionales del equipo de salud multiprofesional de la institución. Los datos fueron recolectados a través de un cuestionario semiestructurado y sometidos a análisis de contenido temático. La interpretación se basó en el marco teórico del marco freireano y otras investigaciones relacionadas. **Resultados:** se destacaron la confidencialidad, la privacidad, el instrumento utilizado y la periodicidad de la evaluación. Aun así, los participantes mencionaron la necesidad de preparación para la entrevista y el énfasis en el potencial de los trabajadores. Una vez completada la evaluación, surgieron preguntas sobre la motivación de los profesionales y los sentimientos experimentados durante la evaluación. **Consideraciones finales:** los resultados refuerzan la comprensión de la complejidad inherente al acto de evaluar y la necesidad de ejercicio continuo, extendido a los evaluadores y evaluados, con el fin de alentar un proceso de reflexión participativa y crítica.

Descriptores: Evaluación del desempeño profesional; Gestión de la salud; Administración del hospital; Investigación en administración de enfermería; Investigación cualitativa

Introduction

In the last decades, to improve human and organizational performance has been a public management issue. However, reflexive article¹ in the área of people management indicated that, in Brazil, teaching and research on this theme still suffer a 10 year undoing in the area when compared to developed countries. Even though the tonic of studies are allied with what happens, for example, in the USA and Europe, the level of socioeconomical development in the country influences the capacity of dissemination of produced knowledge.

However, due to internationalization of knowledge and the estabilishing of partnerships between academias, this déficit have been gradually reduced throughout the years. Many areas of study have gained visibility, among them, the evaluation of professional performance.¹

In addition to providing information for the diagnosis of educational processes necessary for professional development, a performance evaluation that involves a managerial instrument that supports administrative decisions related to the movement of personnel in career plans, a validation of personnel selection selection, as well as how it allows to follow the work of each team member, a relationship between the expected and achieved results, and to monitor comprehensively and continuously or to walk the team as a whole.² In this sense, there are opportunities to recognize the positive reinforcement and the improvement in the work environment.³ However, it is important to consider the possibility of performance evaluation to condition work to a standard mode of operation aiming at increasing productivity or, still, exercising control over the worker, restricting the space for reflection and exercise of autonomy.⁴

However, despite the numerous contributions that can derive from the evaluation process, several obstacles remain, some explicit, others less so. The establishment of a continuous upward and downward dynamic between managers and workers is essential to negotiate goals, consolidate and reconcile agreed objectives and expected results, in addition to building evaluation indicators in the light of participatory management.⁴ Since the performance evaluation is performed in a continuous movement process, its classification is applied and applied by the members of the work teams, as well as the distance between them, represents an important obstacle to the achievement of a reflective evaluation process, democratic and dialogical.

In order to fill gaps in relation to performance evaluation in public institutions, the federal government published Decree No. 7,133 of March 19, 2010, which regulates the procedures to be adopted, as well as the criteria and general rules for carrying out the performance evaluations, bringing as main innovation the possibility of the server being evaluated not only by its hierarchical leadership, but also by the work team in which it is inserted.⁵

In this context, the introduction of colleagues in the server performance evaluation scenario allows the consideration of different perspectives on the evaluation process. The team meeting around this shared objective can even favor a constructive process of collective reflection.

The proposal for an evaluation with a reflective and emancipatory focus is based on Paulo Freire's ideals in favor of democratic evaluation practices in a way that allows the "appreciation of what to do of critical subjects at the service, for that very reason, of liberation and not of domestication".^{6:114} The option for a democratic evaluative practice implies the acceptance of a model that stimulates dialogue and provides opportunities for listening. Therefore, there is a research question: how the performance evaluation is perceived by the health professionals involved in this process?

Among the potential contributions of the study, the opportunity to trigger reflective mobilization about performance evaluation stands out, emphasizing the need for it to be supported in a dynamics built in a participatory way, through dialogue between all involved. Thus, understanding performance evaluation as an activity that generates growth and development in which it is essential to consider the perspective of those who evaluate and who is being evaluated, the objective of this study was to understand the perception of health professionals about the performance evaluation process.

Method

Qualitative research, with an exploratory-descriptive approach, was developed in a public hospital in the southern region of Brazil linked to the Unified Health System (SUS) with members of the institution's multidisciplinary health team. The team consists of administrator, social worker, nurse, pharmacist, biochemist, physiotherapist, doctor, nutritionist and psychologist. In this institution, the evaluation takes place annually, for all professionals, close to the anniversary of the admission date of each one, according to the traditional evaluation model, in which the professional has his performance evaluated by the immediate supervisor. The evaluative interview is carried out by means of a meeting between the professional and immediate manager, and the instrument is unique for all positions and areas of expertise. Although the concepts attributed in the evaluation do not imply immediate financial results, they provide subsidies for the internal reallocations and selections promoted in the institution.

As a possibility to permanently stimulate the debate, the hospital group of which this hospital is a part has developed the Evaluation and Development Policy, which, implemented as an institutional policy since 2006, aims to qualify health actions and enable a continuous process of reflection and construction of new work management practices. This policy is periodically reassessed by representatives from all sectors and is currently in its 4th edition.⁷ The choice of this scenario is justified, considering that a movement has already been developed in order to foster criticality, participation and collective construction in relation to performance evaluation.

This obstetric hospital provides health assistance in prenatal, childbirth and puerperium, performing about 400 deliveries a month. It currently has 165 beds, which serve mother and baby, being a reference in high-risk pregnancies. The hospital has, in its totality, 796 employees in its staff, who entered via public tender, 277 of which are tertiary, 345 of medium level and 174 of fundamental level, distributed in 31 professional categories.

Inclusion criteria included having at least one year of employment and having participated in at least one performance evaluation cycle, adding professionals who had both the experience of evaluating and being evaluated at the institution. Participants were approached individually by the researcher and invited to participate in the study.

Disclosure to participate in this research was carried out with higher education professionals from the institution qualified to carry out the performance evaluation and who, at the time of data collection, corresponded to 72 workers. Except for six collaborators who were away for different reasons and one who did not accept to participate in the study. In this way, 65 questionnaires were distributed with 100% feedback, consolidating the sample in 65 participants (both evaluators and evaluated).

Data collection took place in the months of November and December 2015, through the application of a questionnaire containing 12 semi-structured free-response questions prepared by the researchers from the literature review and their empirical experience in relation to the topic. Questions were about the planning of the evaluative interview, logistical aspects, evaluation process and referrals and there was also a space for notes of observations, if it was of interest to the participants.

Survey participants filled out the instrument individually and returned it in a sealed, unidentified envelope. The classification of the results of semi-structured free-answer questions occurred by similarity of content, being grouped into categories, with the adoption of the thematic analysis framework.⁸

First, in the pre-analysis phase, the transcriptions of the responses from the questionnaires were carried out and the material was organized in spreadsheets in the Word for Windows 2010 program. Afterwards, after the floating and exhaustive reading of the information, the material was explored with in order to establish relationships with the objectives proposed in the research, seeking to determine registration units from fragments of transcriptions that, when grouped, gave rise to pre-categories and categories. Finally, the treatment of results and interpretations were carried out articulating the findings of scientific research related to the theme^{2-4,9-19} e os conceitos de diálogo, conscientização, problematização e transformação, oriundos da vertente freireana (Paulo Freire).^{6,20-23} Codes Q1, Q2, [...] Q65

followed by the evaluated specification or evaluator were used to identify the qualitative responses of the questionnaires.

This study is an excerpt from the research entitled "Performance evaluation of health professionals at a public hospital institution", which gave rise to a doctoral thesis, approved by the Research Ethics Committee of the proposing institution, with a favorable opinion, according to the Certificate of Presentation for Ethical Assessment (CAAE) n^e 47689015.0.0000.5347 and opinion number 1,193,585. Still, since it is a research involving human beings, all ethical considerations recommended by Resolution 466/2012 of the National Health Council were observed.²⁴

Results and discussion

Results were grouped into three categories of analysis: Planning the evaluative interview: important logistical aspects; Signs in the course of the evaluation interview and, Evaluation completed, what now?

The 65 study participants (both evaluators and evaluated) were mostly female (58), the average age was 43 years and 10 years of working time at the institution.

Planning the evaluative interview: important logistical aspects

Regarding the location of the evaluative interviews, it was mentioned that they take place in a place with little privacy, being susceptible to many interruptions, according to the testimonies:

> The issue of privacy is not always respected, as there are always interruptions [...] the walls of the room are "plywood", noise is heard, external noise. (Q2-evaluated)

> Unfortunately, [...] we do not have a specific environment. At the time of the evaluation, we count on the availability of a room by the hospital that

has a PC [computer] for us to use and thus we try to guarantee the privacy that the moment requires. (Q6-evaluated)

Despite the door opening at various times, interrupting the process, privacy and confidentiality are maintained. (Q34-evaluated)

It appears from the results found that, although the evaluative interview may suffer some interruptions due to the countless demands of daily work, there is a consensus among study participants about the effort that is expended to ensure privacy and especially the confidentiality of what is treated at the time of the evaluation.

The opinion on the performance evaluation instrument, although it was considered satisfactory, at least, is a controversial issue. Often, research on the topic points to discontent with the instrument used.²⁻³ However, the performance evaluation process is more related to the establishment of an environment of trust between people than the use of a far-reaching technical tool for evaluation.⁹ In this regard, although the assessment instrument is as complete and comprehensive as possible, the dialogue between appraisers and appraisers is essential in assessing performance, as well as the participation of workers in the definition and development of standards and goals for assessing performance.¹⁰

Still, from this perspective, an exploratory study of health performance assessment models found that there is an understanding of how to achieve objectives and goals. However, in view of the diversity of existing assessment instruments and methods, considering theoretical principles and methodological strategies, there is no consensus on what performance is and how to measure it.¹¹

A study¹² clarifies that performance evaluation is a process that aims to measure the performance of the professional over a period of time, while its management includes activities aimed at improving it, such as evaluations, feedback, improvement activities and professional recognition. This conceptual framework addressed by the authors emphasizes the significant importance of a personalized performance evaluation process in relation to the organizational

context and the characteristics of the position. It also brings the need for performance evaluation to meet the specific duties of each professional and their individual characteristics, paying attention to the constant changes in the organization's structure.

However, a significant point to be highlighted is that not everything that configures the performance of a professional at work can be objectively measured and an increasing number of organizations constantly use subjective appraisals, in an attempt to provide the best possible measure of performance of the workers.¹⁰ On the other hand, this finding brings up subjectivity in the assessment, pointed out as one of the most recurring complaints by professionals.¹³ However, subjectivity is part of the human being and, because it is the internal world of each subject, with its set of ideas, meanings and emotions,¹⁴ cannot be eliminated. Each individual's subjectivity is respected when evaluators and appraisers are able to exercise their criticality and jointly build reflections on the performance presented, incorporating the dialectical movement of construction and reconstruction of knowledge for the sphere of the evaluation process.

Therefore, it is necessary that workers and managers can problematize in this respect, consider the context of the work and be able to listen and respect each other, without reducing themselves to the deposition of ideas from one subject to another, nor becoming a simple exchange of opinions or the imposition of one truth on the other.⁶ Thus, the evaluation is constructed in a joint and participatory way: the evaluator presents his arguments for the worker's appreciation and reconsider them as the evaluated person contributes with his own considerations and so on.

Understanding that performance evaluation is a process built together, corroborates the concept of formative evaluation. Researchers on the topic suggest that formative assessment plays a regulatory role in the process of learning and training health professionals. Thus, through its performance, it makes it possible to detect gaps and provide solutions to possible

obstacles. In this context, assessment is perceived as part of the entire teaching-learning process, in a continuous and no longer punctual way.¹⁵

Another point addressed concerns the time interval found between the evaluations. The participants indicated that the frequency of the evaluative interviews coincides with that recommended by the institution, which is to evaluate each worker at least once a year, close to the anniversary date of their admission.

The evaluation interview is held once a year, especially because the institution's system signals and keeps notifying when the date is approaching. (Q3-evaluator)

In regard to this aspect, research¹⁶ developed with workers from Indian industries pointed out that the performance evaluation carried out only once a year becomes very punctual and, thus, it would not be able to add value in motivation and engagement. Certainly, with annual interviews there is a risk of dissociating the performance evaluation from the entire professional trajectory of the worker, which may result in a mistaken result by valuing recent events related to the professional's performance, which characterizes the halo effect. However, to the detriment of the number of evaluative interviews carried out by the same professional over the period, possibly a differential factor is the way the interview is conducted.

Signs during the evaluation interview

When inquiring about the preparation for the performance evaluation, it was observed that there is a previous organization to evaluate, with consultation to the evaluations and notes made previously and reflection on the performance presented by the professional, but not for the moment when it is evaluated.

> When I go to evaluate an employee, I try to organize myself first, to think about it. Now, when it's my turn to be evaluated, I just go to the interview, I don't think about it much. (Q23-evaluator)

In addition to these findings, some notes notify about the difficulty in evaluating and the need for preparation and knowledge on the part of the evaluator:

Assessing is more difficult. Necessary preparation and knowledge of the evaluation instrument. (Q8-evaluator) I reflect on the employee, his posture with the team and users, as well as issues related to his specific work. (Q47 – evaluator)

However, despite the participants of the study claiming that they conceive the conduct of

the interview as satisfactory, some notes announce important issues:

Sometimes it just seems like a routine to do. (Q23 – evaluated)

Lack of preparation to carry out an adequate assessment. The instrument is not at all favorable. (Q2-evaluator)

Lack of time to carry out a good evaluation with dialogue from both parties. (Q18-evaluator)

In the results of the questionnaires, it was found that the positive aspects and the points

for improvement are the main topics highlighted during the performance evaluation:

I try to direct to stimulate the employee's best and point out some aspects that can be improved. (Q24-evaluator)

It is important to point out the positive points and encourage improvements if necessary.. (Q30-evaluated)

I always highlight positive aspects of the employee, but I also make room for points that can be improved. A reflection is made. (Q47-evaluator)

Complexity is presented in the act of evaluating registered in the space for observations of the questionnaires resonates in the literature on the subject. Similar results are found in a study that points out the difficulty in evaluating the other associated with both the lack of information and the unpreparedness of the evaluators.¹⁶ Following this perspective, in addition to being an intricate assignment, the act of evaluating the other and oneself requires preparation and self-knowledge. Otherwise, it becomes difficult to perceive the potentialities and weaknesses inherent to each human being. Thus, there is a constant need for discussion and questioning about intentionality and the way the evaluation process has been conducted. Also, it is important to consider whether the performance evaluation has given the worker the opportunity to critically reflect on their practice and the construction of knowledge that enables them to be instrumental in generating transformations.

Considering the moment of the evaluative interview, an investigation developed¹⁷ with about 80 German workers alerts precisely to the dangers of a mechanistic view of performance evaluation. In the study, it was identified that many supervisors considered themselves "slaves" to the interview guidelines. This may be desirable from a management quality perspective, because it implies that the guidelines are strictly adhered to. However, when a supervisor is overly focused on reading the interview guidelines and adheres strictly to the agenda, this can cost employees low participation. An assessment that is conducted in this way is unlikely to allow critical reflection by the subjects involved in the process.

Emphasis on the potential of workers in the assessment as well as the highlighting of the positive aspects could be the starting point to constructively influence the attitudes of employees.¹⁷ However, for the establishment of a dialogical and participatory evaluation process, it is necessary to go beyond the simple emphasis on assertive aspects in order to generate or influence a positive attitude in workers. It becomes essential to seek, through dialogue, the problematization of reality and daily work, aiming that the worker, from a critical look at the context and himself, discover himself capable of identifying potentialities and weaknesses.

Thus, when reflecting together on and from what they know, people can make considerations about reality, perceiving it as a constant coming and going and not as something static in the timeline.²⁰ Proposal to center performance evaluation in a dialogical context is to

intend to problematize it, encouraging the worker to develop a critical awareness of the reality in which he finds himself and, thus, to perceive himself capable of being able to transform it, becoming subject of its evaluation process and not a mere object. Therefore, the aim is to provide that, through the description and critical analysis of the performance presented and, based on the considerations jointly made by the appraiser and the appraiser, the worker feels imbued to seek for himself the "transformation" or improvement.

Therefore, as an initial step, it is important that the interaction between managers and workers is not restricted to formal evaluation activities, nor is the moment of the evaluative interview considered as a compensatory alternative to the absence of interaction or even dialogue between both. Also, other research^{9,18} have pointed out the need to establish a relationship of trust between the subjects involved so that the performance evaluation can adapt to the individual needs of both.

It is also considered that feedback, as a feedback activity, can continuously provide signs of how close or distant the employee is to the desired objectives. Feedback, in this case, refers to the information that is given to the worker, in order to describe and evaluate his performance in a given assignment, always relating the observed result of that which is expected, having as a starting point criteria previously established for a given activity. The practice of feedback makes it possible to rethink evaluators and appraised and can lead to the creation of an environment more susceptible to reflection and exchange of experiences.¹⁵

Evaluation completed, now what?

In this category, results related to the end of the evaluative interview and related to the motivation of the professionals and the feelings experienced during the assessment are grouped. As for professional motivation, it was found that both in the condition of evaluated and as an appraiser, the respondents consider themselves motivated after the performance evaluation:

The important thing is to encourage work, always focusing on the results of the team, which is the sum of individualities. I leave the interview motivated when the worker reaffirms his commitment to the quality of work. (Q39-evaluator)

If there is a monitoring, thus, of the development, of the opportunities for improvement, this keeps us motivated for the next period. (Q25-evaluated)

Regarding the motivation of the evaluators, previous studies^{13,17} signal discontent and apprehension on the part of them, questioning whether they would be really motivated to evaluate. Thus, it is asked not only about the motivation of the evaluator in the evaluation interview, but also the preparation and planning carried out. On the other hand, with regard to the motivation of the evaluated, the relevance of the workers' participation and the possibility of expressing their concerns, as well as the perception that their contribution in the process is considered and valued, stands out. In addition, too much emphasis on "evaluating" at the expense of "developing", could generate demotivation. This approach would bring greater resistance to performance appraisal, while more emphasis on development and learning could arouse workers' interest in performance appraisal and increase their satisfaction with it.⁹ However, not all workers will want improvement or, even more difficult, strive to develop a critical reading of reality; after all, it is much more comfortable to remain resigned and passive to reality as it stands. People can be offered the opportunity to (re) discover themselves through a reflective process, but each individual follows the necessary path for himself.²¹

Another aspect concerns the feelings experienced during the evaluation interview. Respondents, in general, feel calm, safe and feel pleasure and satisfaction with the performance evaluation. However, it should be noted that the feelings of pleasure and satisfaction at the end of the evaluation interview are verbalized as less intense when in the role of evaluator, probably indicating greater discomfort when evaluating than when being evaluated. This situation can be seen in the following statement: In employees with poor performance it is always tense, as there is usually no record of their actions. This discourages those who are doing well. (Q27-evaluator)

Perception of tranquility, security and pleasure or satisfaction does not imply that the evaluative interview has led to dialogue and reflection between the evaluator and the evaluated. This supposed stillness may suggest that the controversial and divergent agendas have not been mentioned, remaining hidden by an apparent reality, a comfortable condition that requires less effort from both.¹⁴ On the other hand, the discomfort presented by the evaluator corroborates the previous findings related to the professional's motivation. Perhaps, at first, it is easier to overcome feelings of discomfort and demotivation than to deal with the confrontation that may arise due to the diversity of opinions.

Results reinforce the need to conduct performance assessment based on a dialogical, reflective process that seeks a critical reading of the reality in which professionals are intertwined. The option for a democratic evaluative practice implies the acceptance of a model that stimulates dialogue and provides opportunities for listening.

Still, it is clear that there is a long way to go before breaking with the evaluation paradigm carried out in a vertical and non-participatory way. This model makes it difficult to visualize performance evaluation as a possibility for the effective critical-reflective exercise of evaluators and evaluated, without disregarding the work context in which both are inserted.

Due to the complexity of the context in health care, developing the necessary skills for management is a challenge.¹⁹ The role of health management related to performance evaluation is to influence the effectiveness of employees and organizations. To this end, it is necessary to adopt models of professional performance assessment that accommodate both the demands of services and the protection of professional practice and, especially, protect the user of these services with qualified actions.¹²

It is pointed out that, under the aegis of the capitalist model of production as expressed in the contemporary moment, there is an urgent need to develop critical thinking so as not to lose sight of the purposes that stand in the world of work. It is a continuous exercise of recognizing oneself in this plot so as not to fall into the trap of reiterating unilateral purposes that may fall on the status quo of each other. Thus, it is necessary to be aware of this condition in the evaluation process.

Perhaps, one of the main prerogatives of this proposal is to be able, in addition to awakening critical awareness in appraisers and appraised, to mobilize them towards what Paulo Freire calls "being more".²² By this concept, it is understood that the human being, through a process of self-reflection, finds himself as an unfinished being, in constant search for improvement, a permanent search for himself. When people understand their reality, they are able to make hypotheses about their practice and thus build solutions, and can therefore transform it.²³ For Freire, this is the real objective of the evaluation process.

Final considerations

Despite the unquestionable importance of performance appraisal in the world of work, it is still a challenge for managers and workers. The drawbacks start with the logistics necessary for conducting the assessment interviews. Although there is a consensus regarding the importance of ensuring privacy and confidentiality at the time of the evaluation interview, there is often no adequate place for this to be carried out, which is one of the concerns raised by the research participants. It was also found that there is a preparation to evaluate, however, workers do not usually plan for the moment when they will be evaluated. The performance assessment based on a dialogical context recommends the outline of the objectives to be achieved from the contribution of evaluators and evaluated. Participants emphasized the understanding of the complexity inherent in the act of evaluating, however, being evaluated is also complicated and can cause a series of concerns. To elicit a process of critical reflection, it is necessary that this is a continuous exercise extended to the two agents involved. Both appraised and appraiser need to be mobilized to speak and allow themselves to be heard, making new considerations as the other speaks.

It is pointed out as limitations of the study the fact that it was developed in an institution that has an evaluation system theoretically based on a dialogic and participatory model. The study scenario stands out because it is a fertile and conducive ground for discussion, however it becomes a limiter at a time when its results cannot necessarily be replicated for another, more autocratic and rigid management model.

And, although the data cannot be generalized, they allude to the challenges faced by managers and workers during the process of professional performance assessment, and can be triggers for future research.

As implications for practice, it is believed that the research provided an opportunity to expand spaces for promotion and discussion. In addition, the course of the study contributed to the critical-reflective process involving managers and workers of this hospital complex and provided the (re) thinking of the practice itself, signaling the need for further discussion both in the research field and in other health institutions.

Dialogical evaluation process needs to be fostered by managers and workers, aware of their condition and responsibility as social beings capable of building their own history, managing to overcome barriers and break with performance evaluation models guided by the logic of production, privileging work as part member of man intrinsically motivated to develop and evolver.

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