EVALUATION OF THE CURRENT APPRAISAL SYSTEM AND TESTING

OF A NEW (BARS) SYSTEM FOR NURSING PERSONNEL

by

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ABSTRACT

Appraisal of individual performance is an essential organizational function. The choice of the particular technology for appraisal depends on a number of factors, chiefly the management style and philosophy, work technology and socio-cultural characteristics of the individuals concerned. An important aspect in the choice of appraisal technology is choice of the appraisal format. Several formats for appraisal of employees exist and each has its own combinations of strengths and weaknesses. Foremost among the criteria for choosing a particular appraisal format is its inherent potential for objectivity. A format that is less subjective and more objective is to be generally preferred.

In an attempt to establish a more objective and less subjective appraisal instrument, Smith and Kendall (1963) for the first time designed the Behaviorally Anchored Rating Scale (BARS). The BARS is perhaps one of the most objective rating formats and it is claimed to have several advantages when compared with conventional and traditional evaluation formats. The BARS, though widely used in the United States of America, remained untried in the Indian setting.

In this study the researcher, through an experiment in an Indian hospital, examined the assumptions, hypothesized advantages and limitations of the BARS in a new cultural milieu. The relative merits and constraints of the BARS were also contrasted against the features of a conventional appraisal format that was in use in that hospital prior to the experimental study.

The study showed that the BARS could be developed in an Indian hospital setting in a fairly similar manner as detailed in the U.S. studies. Review of the psychometric characteristics of the scale showed that the ratings made with the BARS, when compared with those of the Merit Rating Scale, were more reliable, exhibited a higher degree of discriminant validity and evidenced less halo and central tendency error. The raters (the Ward Sisters and their superiors, the Department Sisters) as well as the ratees (the Staff Nurses) indicated a greater degree of satisfaction with the BARS centered appraisal system, their perceptions being recorded through a Likert-type scaled questionnaire administered as in a before-after research design.

Beyond demonstrating that the BARS is a superior appraisal tool, this study also brought out some of the appraisal problems and issues prevalent in a large teaching hospital. Through use of the BARS it was possible to overcome some of these problems, especially those related to the psychometric characteristics of the scale. The major shortcomings of the BARS as observed in this study have not yet found a place in literature and require investigation over a further period and in differing situations before definite conclusions can be drawn.