



NC-F-14A

Performance Evaluation Form

Form Number:	NC-F-14A	Effective Date:	March 1, 2026
Version:	1.0	Related Policy:	NC-14 Staff Supervision & Performance

NobleCare Home Health LLC

Performance Evaluation Form

Form NC-F-14A | Annual Evaluation per Policy NC-14

Employee Information

Employee Name

Position / Title

Hire Date

Evaluation Period

Evaluator Name / Title

Rating Scale

Rating	Description
5 — Outstanding	Consistently exceeds expectations; serves as a role model
4 — Exceeds Expectations	Frequently exceeds expectations; demonstrates advanced proficiency
3 — Meets Expectations	Consistently meets expectations; performs duties competently
2 — Needs Improvement	Occasionally falls below expectations; requires development
1 — Does Not Meet Expectations	Consistently fails to meet expectations; immediate improvement required

Performance Domains

1. Clinical Competency / Job Knowledge

Demonstrates the knowledge, skills, and abilities required to perform job duties effectively and safely.

Rating (1-5)

Comments:

2. Documentation Timeliness and Accuracy

Completes all required documentation accurately, thoroughly, and within established timeframes.

Rating (1-5)

Comments:

3. Patient Satisfaction and Communication

Communicates effectively with patients, families, and interdisciplinary team members; demonstrates empathy and respect.

Rating (1-5)

Comments:

4. Attendance and Reliability

Reports to work and assigned visits on time; provides adequate notice for absences; demonstrates dependability.

Rating (1-5)

Comments:

5. Teamwork and Collaboration

Works cooperatively with colleagues; contributes to a positive work environment; supports team goals.

Rating (1-5)

Comments:

6. Compliance and Policy Adherence

Follows agency policies, procedures, and regulatory requirements; completes required training on time.

Rating (1-5)

Comments:

7. Professional Boundaries and Conduct

Maintains appropriate professional boundaries with patients and families; demonstrates ethical conduct.

Rating (1-5)

Comments:

8. Infection Control Practices

Follows infection control protocols including hand hygiene, PPE use, and standard precautions consistently.

Rating (1-5)

Comments:

9. Safety Awareness

Identifies and reports safety hazards; follows safety protocols; demonstrates awareness of emergency procedures.

Rating (1-5)

Comments:

Overall Rating

Overall Rating (average of 9 domains)

Overall Rating Range	Performance Level
4.5 — 5.0	Outstanding
3.5 — 4.4	Exceeds Expectations
2.5 — 3.4	Meets Expectations
1.5 — 2.4	Needs Improvement
1.0 — 1.4	Does Not Meet Expectations

Strengths

Areas for Improvement

Goals for Next Evaluation Period (SMART Goals)

Goal (Specific, Measurable, Achievable, Relevant, Time-bound) Target Date

- 1
- 2
- 3

Employee Comments

Signatures

Evaluator

Evaluator Signature
Printed Name / Title
Date

Employee

By signing below, I acknowledge that I have received and reviewed this performance evaluation. My signature does not necessarily indicate agreement with the evaluation. I understand that I may submit written comments to be attached to this form.

Employee
Signature
Printed Name
Date

Administrator

Administrator
Signature
Printed Name
Date

Office Use Only

Date Filed in Personnel Record: _____ Next Evaluation Due: _____