## NHS Job Evaluation Scheme A . C . .

Job evaluation (JE) can be def ned as:

"A systematic process for def ning the relative size of jobs within an organisation in order to establish internal relativities and provide the basis for designing an equitable pay and grading structure."

Between 1988 and 2004 nurses and health care assistants had their posts evaluated and their pay determined under the Whitley Clinical Grading System – a system specific to nursing. During this time there were a number of 'functional Councils' under the General NHS Whitley Council, all of which had different pay systems and differences in some terms and conditions of employment. There was no way of understanding the comparability or relative weight of posts between  $\hat{i}$  in ineal  $\hat{i}$  no  $\hat{j}$  (JE) can  $\hat{j}$  feecbi

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The NHS JES was designed to cover all NHS employees. However, it was later decided that medical doctors and dentists and very senior managers (such as those reporting directly to the Chief Executive) would not be evaluated under this scheme. The scheme is quite different to other of -the-shelf schemes, in that it considers environmental factors and patient care responsibilities rather than just focusing on management remit or budget responsibilities.

The NHS JES is comprised of 16 factors, which are grouped into three sets:

1. Knowledge and skill factors  What skills, training, experience does the job require?	2. Responsibilities factors  How you employ those skills (freedom to act is included in this group although it is not strictly a responsibility).	3. Effort and environment factors What ef ort is needed to carry out the responsibilities?
<ul> <li>Communication and relationship skills</li> <li>Knowledge, training and experience</li> <li>Analytical and judgemental skills</li> <li>Planning and organisational skills</li> <li>Physical skills</li> </ul>	<ul> <li>Patient/client care</li> <li>Policy and service development implementation</li> <li>Financial and physical resources</li> <li>Human resources</li> <li>Information resources</li> <li>Research and development</li> <li>Freedom to act</li> </ul>	<ul> <li>Physical ef ort</li> <li>Mental ef ort</li> <li>Emotional ef ort</li> <li>Working conditions</li> </ul>

The demands of every job covered by the scheme are considered against each of these 16 factors. Each factor comprises between 4 and 8 factor levels, which are defined. Every post scores at least level 1 for every factor. The definitions and levels of each factor can be found in the *NHS Job Evaluation Handbook*.

Jobs can be evaluated under one of two processes:

- Job matching. This is the most commonly used method, where a job is matched to a national prof le (developed by the Job Evaluation Group (JEG) and agreed by NHS Staf Council) by a trained partnership panel using agreed job descriptions (JDs) and additional information.
- Job evaluation. This is where a post holder completes a job analysis
  questionnaire (JAQ), which is then analysed by a partnership pair of trained job
  analysts and evaluated by a trained partnership panel.

Both processes, including reviews and consistency checking of outcomes, must be carried out by trained and up-to-date practitioners.

## **Bias-free**

The NHS JES requires that all procedures be completed and conducted free from bias and discrimination. This is ensured by both partnership working and consistency checking. It is also important that staf with a vested interest in or direct knowledge of posts do not undertake their matching or evaluation.

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## Partnership working

It is generally recognised that the successful development and implementation of the NHS JES was a result of successful partnership working throughout the process. JE processes and outcomes need to be jointly owned by management and staf side to be acceptable. This can only happen where there is active partnership working.

Partnership working between trade union members and management has been

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Job matching involves assessing posts using JDs against national prof les. National prof les have been developed by the JEG from evaluated roles using agreed JAQs. It is therefore an analytical process which breaks a job down into its constituent parts and assesses them. This reduces the number of jobs which need	J
co be locally evaluated.  Similar jobs can be clustered together for matching.	Jo
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There is a def ned process for new jobs that should be undertaken before recruitment.

- 1. The likely job demands of a new post, which should be agreed and documented in the form of a JD, person specification and organisation chart.
- 2. A JE panel will use this material to undertake a match or evaluation of the post, depending on whether there is a suitable national prof le available. The management and staf-side representatives may be able to provide further advice to the panel in the event of any missing information.
- 3. The outcome will need to go through consistency checking as usual and will then form the pay band for recruitment to the post.
- 4. Once the full demands of the post are clear, after an appropriate period of "bedding down"\*, the post holder should work with their manager to review and update the JD and if necessary seek a review of the JE outcome. The standard procedure for this reassessment, either by job matching or evaluation panel, should be followed. This includes checking that the outcome is consistent with other similar jobs on a factor-by-factor basis.
- 5. Outcomes should be consistency checked as outlined above.
- 6. The application of the reassessed JE outcome would normally be backdated to the start date of the new job. Note that the outcome can go up or down from the original provisional banding.

This process is outlined in the new 7th edition of the NHS Job Evaluation Handbook and replaces the previous one, whereby recruitment could only happen with a provisional pay band that had to be confirmed after a bedding down period.

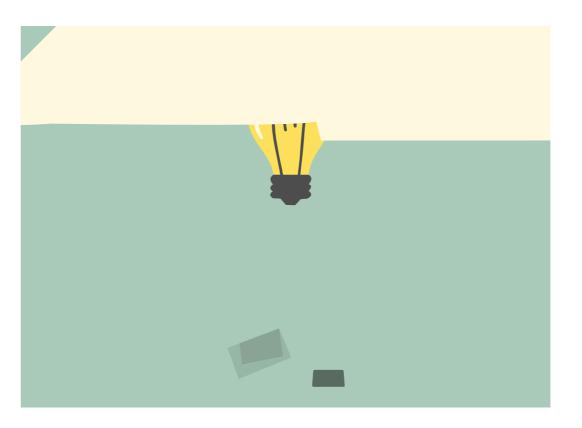
It is necessary to allow a reasonable period of time for the job to bed down, and this may vary according to the nature of the job. Some posts may need a period of a few months, while others may be subject to seasonal variations requiring a full year to determine the full job demands.

Where a job has changed, the post holder should agree the changes with their manager and the date these will apply from and record them in a revised JD. These changes will only be relevant for JE purposes if they require additional skills, knowledge, responsibility or environmental and ef ort demands. Where this is the case, a request for a review of the JE outcome should be made. It will then be matched or evaluated by a trained partnership panel in the usual way, followed by consistency checking.

The NHS Job Evaluation Handbook states:

"A re-match or re-evaluation should assess the whole job, albeit with a reference back to the original match or evaluation. Just dealing with some of the factors could lead to inconsistencies."

NB - remember that JE does not take into account volume of work, so just because a member is asked to do more of a certain task does not mean their banding must be reviewed.



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The RCN has produced a self-assessment checklist regarding good governance of JE at local level. It can be found <a href="here:">here:</a>

The NHS Staf Council JEG has also produced a governance checklist, which can be found  $\underline{\text{here}}$ . In summary:

- 1 The organisation should have an agreed JE policy, agreed in partnership, that outlines all process and practices in line with the national *NHS Job Evaluation Handbook*.
- 2 The organisation should have enough trained JE practitioners and a JE lead from both management and staf sides. Staf -side JE practitioners should be released from their duties to undertake JE work outside of any agreed facilities time agreed.

3 All JE processes should be undertaken in partnership – including consistency checking.

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