

# NHS job evaluationSelf-assessment checklist for NHS organisations

This checklist will help you assess your organisation’s performance on job evaluation, ensuring local processes and procedures are fit for practice. Job evaluation (JE) leads will be able to work through the checklist in partnership and use their findings to create an action plan to report back to your partnership forum/joint consultative meeting.

## **Governance issues**

It is vital to ensure that all JE practices are undertaken in partnership as this is fundamental to the job evaluation scheme.

1. Is there both a management side and a staff side lead for JE?

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| --- | --- | --- | --- |
| Yes | No | Action needed | Progress |
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1. Does the partnership forum/joint consultative committee receive regular reports from JE leads about JE processes, outcomes etc?

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| --- | --- | --- | --- |
| Yes | No | Action needed | Progress |
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1. Is there a JE policy that has been agreed in partnership that outlines all processes and practices in line with the national JE handbook? When will the policy be reviewed/need to be reviewed?

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| --- | --- | --- | --- |
| Yes | No | Action needed | Progress |
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1. Are systems in place that allow JE leads to monitor the interaction between panels – for example if there are frequent misunderstandings over the same issue/factor or regular over/under-evaluation by panels, so that remedial action made or further training arranged.

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| --- | --- | --- | --- |
| Yes | No | Action needed | Progress |
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1. Are JE leads involved in service reconfiguration/redesign at any /which stage?

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| --- | --- | --- | --- |
| Yes | No | Action needed | Progress |
|  |  |  |  |

1. Are JE Leads and JE practitioners kept up to date with relevant matters? If so how, and is this sufficient?

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| --- | --- | --- | --- |
| Yes | No | Action needed | Progress |
|  |  |  |  |

1. Are there agreed criteria (possibly contained within the JE policy) to determine how the organisation will deal with any temporary capacity issues or backlogs?

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| --- | --- | --- | --- |
| Yes | No | Action needed | Progress |
|  |  |  |  |

**Note:** JEG advises that the use of external third parties by an organisation should only be a short-term measure to deal with temporary capacity problems, when other options have been exhausted. It should not be a substitute for developing sound and comprehensive internal processes, and internal JE resources and knowledge.

1. If JE processes are outsourced to an external, third party (including a neighbouring trust / health board) please answer the following-
2. Is the audit trail of JE panels and decisions kept internally and to a robust standard that would stand up in legal proceedings?

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| --- | --- | --- | --- |
| Yes | No | Action needed | Progress |
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1. Are records made available to the external party to enable them to undertake full consistency checking of decisions? Or (preferably) is consistency-checking carried out by your own organisation?

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| --- | --- | --- | --- |
| Yes | No | Action needed | Progress |
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1. Does the external party adhere to the requirement to undertake JE in partnership between management and staff side? Does this include reviews?

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| --- | --- | --- | --- |
| Yes | No | Action needed | Progress |
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1. Does the external party provide full reports on JE for consideration at partnership forum/joint consultative committee?

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| --- | --- | --- | --- | --- |
| Yes | No |  | Action needed | Progress |
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## **JE capacity**

It stands to reason that organisations need to ensure they have sufficient JE practitioners to undertake the necessary work. Some have allowed this to slip post-implementation thinking that there would no longer be much JE work to be done. However, the creation of new roles, service and organisational change and mergers ensures this is rarely the case.

1. Are systems in place to try to forecast the demand for job evaluation panels? (For example, by considering planned restructures against previous year’s activity.)

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| --- | --- | --- | --- |
| Yes | No | Action needed | Progress |
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1. Are you satisfied that there are sufficient trained JE practitioners (staff side and management side) available to undertake the volume of JE work required?

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| --- | --- | --- | --- |
| Yes | No | Action needed | Progress |
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1. Is the list of trained practitioners kept up to date and does it show the training practitioners have had?

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| --- | --- | --- | --- |
| Yes | No | Action needed | Progress |
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1. Does the organisation have a plan for JE training courses to keep the supply of trained JE practitioners replenished?

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| --- | --- | --- | --- |
| Yes | No | Action needed | Progress |
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1. Do trained practitioners get sufficient paid time off to undertake JE work?

(This should be separate from any facilities time agreed for TU representatives. Is there an organisation wide agreement about this and how is it monitored and enforced?)

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| --- | --- | --- | --- |
| Yes | No | Action needed | Progress |
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1. Is refresher training offered regularly for trained practitioners?

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| --- | --- | --- | --- |
| Yes | No | Action needed | Progress |
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1. Are all JE panels including consistency checking conducted in partnership?

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| --- | --- | --- | --- |
| Yes | No | Action needed | Progress |
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## **Record keeping**

The importance of having robust processes in place to assure quality and good record keeping cannot be over-stated. Without historical records of all JE decisions and organisation could lose its defence against any equal pay claim.

1. Is there a robust system in place for recording all JE outcomes and does it allow for monitoring and consistency checking across the organisation?

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| Yes | No | Action needed | Progress |
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1. Are JE reports given to partnership/joint consultative meetings regularly and any concerns/actions taken accordingly?

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| --- | --- | --- | --- |
| Yes | No | Action needed | Progress |
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1. Is the final version of the job description used by the panel stored in a way that can be readily accessed if the post becomes vacant?

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| --- | --- | --- | --- |
| Yes | No | Action needed | Progress |
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1. If there is a review is the job description updated with the review information before sending out the banding outcome?

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| --- | --- | --- | --- |
| Yes | No | Action needed | Progress |
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1. When a post is submitted for re-evaluation is there an agreed process for deciding in partnership whether the changes are significant.

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| --- | --- | --- | --- |
| Yes | No | Action needed | Progress |
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## **Ensuring quality**

The NHS JES prides itself on its openness and transparency. It is essential therefore that adequate quality assurance measures are in place to protect both post holders from erroneous outcomes and the organisation from legal challenge.

1. Is there a designated officer responsible for the administration of JE panels?

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| --- | --- | --- | --- |
| Yes | No | Action needed | Progress |
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1. Are all JE administrative processes quality checked to ensure they are effective and that they contribute to the openness and transparency of JES?

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| --- | --- | --- | --- |
| Yes | No | Action needed | Progress |
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1. Is there a quality checking process for JE panels and their records, for example ensuring adequate rationales are given for decisions?

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| --- | --- | --- | --- |
| Yes | No | Action needed | Progress |
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1. Where concerns are identified with quality or consistency is someone clearly identified as responsible for taking action?

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| --- | --- | --- | --- |
| Yes | No | Action needed | Progress |
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## **Common pitfalls**

Some other things to look out for include:

* **Factor shortcutting** – some organisations wrongly think that they can short cut JE matching by looking only at factors 2 (Knowledge, training and experience) and 12 (freedom to act). This is a misapplication of the JES and is likely to result in erroneous banding outcomes, as the recently published band 6 paramedic profile proves.
* **Consistency checking** – in some organisations this continues to be problematic because it is under resourced and misunderstood. Common issues include informal approaches and/or the use of single individuals rather than a partnership panel. Additionally some consistency checking panels incorrectly substitute their own outcomes where they see a problem, rather than remitting a disputed case back to the original panel that considered it. This is outlined, as are all JE processes, in the NHS JE Handbook.
* **Desktopping** – this is the practice of matching jobs without full job information and not through a partnership panel. Desktopping should not be used as a means of matching or evaluating jobs. All jobs, including new posts should be matched through a panel. Where full information is not available because a role is new, the JE outcome should be re-assessed after a period of bedding in using a revised job description and additional job-holder information. Consistency checking should take place at all stages as usual.
* **Reviewing changed jobs** – most jobs change over time and job descriptions ought to be kept under review and updated whenever necessary. Where there have been significant changes postholders need to seek agreement from their line manager to update their job description, request a review of their JE outcome and to agree the date from which any potential change takes effect. Staff are entitled to submit a grievance if they feel that agreement is being deliberately withheld or obstructed.

## Further information

All resources relating to the NHS job evaluation scheme can be found on the [NHS Employers website](http://www.nhsemployers.org/your-workforce/pay-and-reward/pay/job-evaluation). This includes the [job evaluation handbook](http://www.nhsemployers.org/job-evaluation-handbook) and all advice and guidance issued by JEG as well as profiles and details of training.