

Factor definitions and factor levels (chapter five)

Factor 1. Communications and relationships skills

Communications and relationships skills

This factor measures the skills required to communicate, establish and maintain relationships and gain the cooperation of others. It takes account of the skills required to motivate, negotiate, persuade, make presentations, train others, empathise, communicate unpleasant news sensitively and provide counselling and reassurance. It also takes account of difficulties involved in exercising these skills.

Skills required for:

Level 1:	Providing and receiving routine information orally to assist in undertaking own job. Communication is mainly with work colleagues.
Level 2:	Providing and receiving routine information orally, in writing or electronically to inform work colleagues, patients, clients, carers, the public or other external contacts.
Level 3:	(a) Providing and receiving routine information which requires tact or persuasive skills or where there are barriers to understanding, or (b) providing and receiving complex or sensitive information, or (c) providing advice, instruction or training to groups, where the subject matter is straightforward.
Level 4:	(a) Providing and receiving complex, sensitive or contentious information, where persuasive, motivational, negotiating, training, empathic or re-assurance skills are required. This may be because agreement or cooperation is required or because there are barriers to understanding, or (b) providing and receiving highly complex information.
Level 5:	(a) Providing and receiving highly complex, highly sensitive or highly contentious information, where developed persuasive, motivational, negotiating, training, empathic or re-assurance skills are required. This may be because agreement or co-operation is required or because there are barriers to understanding, or (b) presenting complex, sensitive or contentious information to a large group of staff or members of the public, or (c) providing and receiving complex, sensitive or contentious information,

	where there are significant barriers to acceptance which need to be overcome using developed interpersonal and communication skills such as would be required when communicating in a hostile, antagonistic or highly emotive atmosphere.
Level 6:	Providing and receiving highly complex, highly sensitive or highly contentious information where there are significant barriers to acceptance which need to be overcome using the highest level of interpersonal and communication skills, such as would be required when communicating in a hostile, antagonistic or highly emotive atmosphere.

Definitions and notes:

From Level 2 upwards communication may be oral or other than oral (e.g. in writing) to work colleagues, staff, patients, clients, carers, public or other contacts external to the department, including other NHS organisations or suppliers.

Requirement to communicate in a language other than English. Jobs with a specific requirement to communicate in a language other than English, which would otherwise score at Level 2 will score at Level 3. Any score higher than Level 3 will be dependent on the nature of the communication, the skills required and the extent to which they meet the factor level definitions and not the language of delivery.

Barriers to understanding (Levels 3 to 5a) refers to situations where the audience may not easily understand because of cultural or language differences, or physical or mental special needs, or due to age (e.g. young children, elderly or frail patients/clients)

From Level 3 upwards communication may be oral, in writing, electronic, or using sign language, or other verbal or non-verbal forms.

Tact or persuasive skills (Level 3a). Tact may be required for situations where it is necessary to communicate in a manner that will neither offend nor antagonise. This may occur where there is a job requirement to communicate with people who may be upset or angry, be perceptive to concerns and moods and anticipate how others may feel about anything which is said. Persuasive skills refer to the skills required to encourage

listeners to follow a specific course of action.

Complex (Levels 3b, 4a, 5b, 5c) means complicated and made up of several components, eg financial information for accountancy jobs, employment law for HR jobs, condition related information for qualified clinical jobs. Most professional jobs normally involve providing or receiving complex information.

Sensitive information (Levels 3b, 4a, 5b, 5c) includes delicate or personal information where there are issues of how and what to convey.

Training where the subject matter is straightforward (Level 3c) refers to training in practical topics such as manual handling; new equipment familiarisation; hygiene, health and safety.

Empathy (Level 4a, 5a) means appreciation of, or being able to put oneself in a position to sympathise with, another person's situation or point of view.

Highly complex (Levels 4b, 5a, 6) refers to situations where the jobholder has to communicate extremely complicated strands of information which may be conflicting eg communicating particularly complicated clinical matters that are difficult to explain and multi-stranded business cases.

Highly sensitive (Levels 5a and 6) refers to situations where the communication topic is extremely delicate or sensitive e.g. communicating with patients/clients about foetal abnormalities or life-threatening defects, or where it is likely to cause offence e.g. a health or social services practitioner communicating with patients/clients about suspected child abuse or sexually transmitted diseases.

Highly contentious (Levels 5a and 6) refers to situations where the communication topic is extremely controversial and is likely to be challenged e.g. a major organisational change or closure of a hospital unit.

Developed skills (Levels 5a and 6) refers to a high level of skill in the relevant area which may have been acquired through specific training or equivalent relevant experience. It includes formal counselling skills where

the jobholder is required to handle one-to-one and/or group counselling sessions.

Presenting complex, sensitive or contentious information to a large group of staff or members of the public (Level 5b) means

communicating this type of information to groups of around 20 people or more in a formal setting, e.g. classroom teaching, presentation to boards or other meetings with participants not previously known to the jobholder. This type of communication may involve the use of presentational aids and typically gains and holds the attention of, and imparts knowledge to, groups of people who may have mixed or conflicting interests.

Communicating in a hostile, antagonistic or highly emotive

atmosphere (Level 5c) includes situations where communications are complex, sensitive or contentious (see above) and the degree of hostility and antagonism towards the message requires the use of a high level of interpersonal and communication skills on an ongoing basis, such as would be required for communications which provide therapy or have an impact on the behaviour/views of patients/clients with severely challenging behaviour. It also includes communications with people with strong opposing views and objectives where the message needs to be understood and accepted, e.g. communicating policy changes which have an impact on service delivery or employment.

Communicating highly complex information in a hostile, antagonistic or highly emotive atmosphere (Level 6). This level is only applicable where there is an exceptionally high level of demand for communication skills. It applies to situations where communications are highly complex, highly sensitive or highly contentious (see above) and there is a significant degree of hostility and antagonism towards the message which requires the use of the highest level of interpersonal and communication skills such as is required for communications which are designed to provide therapy or impact on the behaviour/views of patients with severely challenging behaviour in the mental health field. It also includes communications with people with extremely strong opposing views and objectives eg communicating a hospital closure to staff or the community where the message needs to be understood and accepted.

Factor 2. Knowledge training and experience

Knowledge training and experience

This factor measures all the forms of knowledge, training and experience required to fulfil the job activities and responsibilities satisfactorily.

The levels in this factor escalate as follows -

Level 1:	Understanding of a small number of routine work procedures which could be gained through a short induction period or on the job instruction.
Level 2:	Understanding of a range of routine work procedures possibly outside immediate work area, which would require a combination of on-the-job training and a period of induction.
Level 3:	Understanding of a range of work procedures and practices, some of which are non-routine, which require a base level of theoretical knowledge. This is normally acquired through formal training or equivalent experience.
Level 4:	Understanding of a range of work procedures and practices, the majority of which are non-routine, which require intermediate level theoretical knowledge. This knowledge is normally acquired through formal training or equivalent experience.
Level 5:	Understanding of a range of work procedures and practices, which require expertise within a specialism or discipline, underpinned by theoretical knowledge or relevant practical experience.
Level 6:	Specialist knowledge across the range of work procedures and practices, underpinned by theoretical knowledge or relevant practical experience.
Level 7:	Highly developed specialist knowledge across the range of work procedures and practices, underpinned by theoretical knowledge and relevant practical experience.
Level 8:	(a) Advanced theoretical and practical knowledge of a range of work procedures and practices, or (b) specialist knowledge over more than one discipline/function acquired over a significant period.

Panels should consider all other factors before this factor so that they ensure the full range of knowledge, training and experience required is

understood.

On no account should matching or evaluating prioritise this factor above any other. Panels must NOT limit themselves to this factor and/or factor 12 e.g. when choosing national profiles for matching. Outcomes derived from looking at factors 2 and 12 in isolation as a first step in the evaluation or matching process may result in an outcome that is not valid.

The level of knowledge, training and experience required for the job should be determined by considering how this is applied in the role rather than how the knowledge was acquired e.g. academic qualification.

Panels should consider all of the following when determining this factor:

- theoretical knowledge
- practical knowledge;
- professional, specialist or technical knowledge; and
- knowledge of the policies, practices and procedures associated with the job.

Not all such knowledge can be acquired through formal qualifications, so knowledge gained through training, experience and other means must also be taken into account.

It is important that panels clarify what training, qualifications and/or experience are actually needed for the work carried out and ensure they understand what the qualification or experience is. This may involve asking questions of the job advisors to ensure that the level expected of someone is the level at which the job will be carried out competently, rather than that relating to recruitment level. As mentioned earlier, it is useful to match or evaluate the other job factors first prior to the KTE factor in cases where there is doubt about the level for factor 2, because a better idea of the job demands will emerge from this process.

The NHS Staff Council has published [guidance for panels](#) on applying this factor.

Where the training, qualifications and/or experience requirements for a job have changed over time, the current requirements should be taken as the necessary standard to be achieved, as it is the work carried out which is evaluated. Existing jobholders with the previously required qualifications should be deemed to have achieved the current qualification level through on-the-job learning and experience.

Explanatory notes and definitions

The following list is not exhaustive.

Level 1	<p>Small number of routine work procedures</p> <p>Routine means a series or sequence of short cycle repetitive activities that require little or no variation according to the circumstances/ environment.</p> <p>Most of the required activities will be repeated frequently, probably at least daily, and therefore initial training will normally be over a period of days. The tasks could normally be learned on the job without prior knowledge or experience but panels should consider what prior knowledge or experience is required before deciding on the level.</p> <p>Short induction period</p> <p>Is generally for days rather than weeks.</p>
Level 2	<p>Range of routine work procedures</p> <p>Routine still refers to a series or sequence of short cycle repetitive activities that require little or no variation according to the circumstances, however, given the range of routines applied in the work, not all the routines will be performed daily and they could not be learnt within a matter of days.</p> <p>As a consequence, initial training is likely to last over a number of weeks before full competence is achieved.</p>
	Job training

	<p>This refers to training that is typically provided on the job through a combination of formal and informal instruction and practice or by attending or completing training sessions. This includes training or learning activities in a range of settings including online.</p> <p>At this level the required knowledge generally takes weeks, but not months, in the job to learn and may include some elements of learning principles to be applied in the job.</p> <p>It also refers to the knowledge required for Large Goods Vehicle or Passenger Carrying Vehicle licences.</p>
Levels 3 and 4	<p>Non – routine</p> <p>Describes a requirement for knowledge to carry out activities that are varied and therefore entail some problem solving tasks within clear policies or practices. For example, dealing with queries that are not straightforward and that require sufficient knowledge of options and alternatives to make assessments or judgements because there are different circumstances to be taken into account in carrying out the activity.</p> <p>Rather than relying simply on past experiences or the practices of others the jobholder has sufficient knowledge to judge in limited circumstances how to implement the procedures/policies practices etc.</p>
Levels 3 and above	<p>Formal training</p> <p>This generally means organised teaching or learning and can be delivered through classroom-based teaching, online learning, a study programme, structured on the job learning or equivalent. Some kind of assessment will generally be required.</p>
	<p>Base level of theoretical knowledge</p> <p>For this level, theoretical knowledge does not necessarily mean formal, academic learning is required. It may instead be knowledge of the principles and practices that impact the job by understanding</p>

	<p>relevant policies and procedures. Jobholders may also need to know about relationships between different aspects/influences and understand their causes, connections, and possible outcomes.</p> <p>This level of knowledge can be assumed in Level 3 Qualifications, such as A level, Advanced Baccalaureate or BTech in England, Wales and Northern Ireland, or SCQF Level 6 e.g. Highers in Scotland.</p> <p>Qualification frameworks can be found here (E, W and NI) and here (S)</p> <p>However, panels must ensure that they take into account equivalent non-formal learning and experience as well.</p>
Level 4	<p>Intermediate level theoretical knowledge</p> <p>At this level the jobholder requires a sound knowledge and understanding of the principles and practices in their field of work and can apply them widely to enable them to undertake their role competently. “Procedures and practices, the majority of which are non-routine” means having sufficient knowledge of all the relevant operational procedures, plus knowledge of how to deal with a range of non-routine activities, such as work allocation, problem solving for a team or area of work, as well as answering queries and progress chasing, developing alternative or additional procedures.</p> <p>At this level jobholders will require sufficient knowledge to inform any analytical and judgment skills (factor 3) needed to interpret procedures and procedures/policies practices for problem solving and options assessment to carry out a number of tasks such as, answering new queries, assessing relationships, differing situations or advising others. For example, level 4 for this factor would normally be seen with a score of level 2 or 3 in factor 3.</p>
Level 5	<p>Expertise within a specialism</p> <p>At this level jobholders are required to have a coherent and detailed conceptual/ theoretical knowledge of their area of work, at least some of which is at, or informed by current evidenced based practice or published research in their discipline. They should also have an</p>

	<p>appreciation of the uncertainty, ambiguity and limits of knowledge and an ability to manage their own learning.</p> <p>In qualification terms, this level normally equates to a level 6 qualification (9 and 10 in Scotland) e.g. an Honours degree, or an equivalent level of knowledge. Therefore, jobs requiring a degree qualification or an equivalent level of knowledge, should be scored at this level.</p> <p>This level of knowledge could also be obtained through an in-depth diploma plus significant experience in similar roles and/or in the area of work.</p> <p>An equivalent level of knowledge at this factor level may be demonstrated through proven and demonstrable competence in a recognised external proficiency framework.</p> <p>For areas of work where there are no commonly accepted equivalent qualifications this level may be achieved where jobs require knowledge across an area of practice, e.g. in purchasing, medical records, or finance, allowing the jobholder to operate as an independent (non-healthcare or healthcare) practitioner and to deal with issues such as workload management and problem solving across the work area. It can apply to non-healthcare jobs with a managerial remit across an administrative or other support area, e.g. in hotel services, catering, sterile supplies management where the level criteria are met.</p> <p>There will be a corresponding higher level in other skill/responsibility factors and Factor 12 Freedom to Act for roles that require this level of knowledge.</p>
Level 6	<p>Specialist knowledge</p> <p>In addition to the requirements of level 5, Specialist knowledge refers to a level of knowledge and expertise which can be acquired through either in-depth experience or theoretical study, including study of a broad range of techniques/processes relating to the knowledge area. This equates to post-registration/graduate diploma level or equivalent in a specific field (that is, between first degree/registration and master's level), but there is no requirement to hold such a diploma (see below).</p>

This level also refers to the specialist organisational, procedural or policy knowledge required to work across a range of different areas. In this case, the jobholder will be influential in matters relating to their area of work and will provide detailed advice to other specialists and non-specialists based on their knowledge and application of evidenced based research and publications in the field.

For level 6 the additional knowledge may be acquired by various routes:

- (a) specific training and accreditation, e.g. as for a district nurse, health visitor
- (b) other forms of training/learning e.g. long or combination of short courses or structured self-study
- (c) experience and self-development shown through demonstrable competence in a recognised proficiency framework
- (d) some combination of (b) and (c).

It is important to note that not all experience delivers the required additional knowledge for level 6. Simply doing a job for a number of years may make the jobholder more proficient at doing the job, but does not always result in additional knowledge.

Also, while most additional knowledge, particularly for healthcare professional jobs, is specialist knowledge (that is, focussing on an area of practice and deepening the knowledge of that area acquired during basic training), some is a broadening of basic knowledge to a level which allows the jobholder to undertake all areas of practice without any guidance or direct supervision.

For additional specialist knowledge, possible indicators of level 6 knowledge acquired primarily through experience are, for example, a requirement to have worked in the specialised area with practitioners from their own or another profession who are experienced in this area or with a clear programme of knowledge development, for example, meeting defined professional standards, attending appropriate study days and short courses, undertaking self-study.

	<p>Examples of level 6 in this factor are:</p> <ul style="list-style-type: none"> ● the practitioner who has acquired sufficient additional post-registration knowledge through experience and has undertaken a formal mentoring or preceptorship to achieve a level of knowledge allowing autonomous practice to be undertaken in different or a range of settings ● where the jobholder needs to have acquired sufficient additional post-registration knowledge through experience in a specialist area, developing additional specialist skills and/or to provide advice, education or training to other professionals ● where the jobholder needs additional knowledge acquired through (formal and informal) specialist training and experience in order to be able to manage a caseload of clients with complex needs ● where the jobholder is required to have sufficient additional knowledge gained through experience to be able to be the autonomous adviser for a directorate or equivalent organisational area, or for an equivalent subject area of responsibility ● a job requiring knowledge gained through professional qualifications plus sufficient additional knowledge of health service specific systems or procedures to be responsible for a particular project, service delivery or function of one or more directorates ● managerial roles that require knowledge over a broad range of organisational policies, procedures, systems and practices to be able to provide advice to others.
Level 7	<p>Highly developed specialist knowledge</p> <p>In addition to the requirements of levels 5 and 6, jobholders at this level should also have a systematic understanding of knowledge in their area of expertise that encompasses a critical awareness of current issues and new insights. Much of the knowledge acquired is at, or informed by, the current evidenced based published research in their field of professional practice. At this level jobholders have a comprehensive</p>

understanding of techniques applicable to their own developing practice, research or advanced scholarship.

This level of knowledge and expertise can only be acquired through a combination of significant postgraduate or post-registration study and/or undertaking rigorous research in a relevant field and/or in-depth experience.

As an exception - Jobs requiring a doctorate qualification or equivalent level of knowledge as an entry requirement such as clinical, scientific or specialist management qualifications should be assessed at this level as a minimum. However, these roles will not necessarily have the commensurate higher levels in the responsibility factors that would otherwise be expected.

In broad terms the additional knowledge for level 7 should equate to master's level (that is, between post-graduate diploma and doctoral level), but there is no requirement to hold such a formal qualification. For example, some clinical practitioners may require completion of academic modules relating to the specialist areas or research that would be assessed at this higher level, but not a full degree programme. It is the acquisition of the highly specialised knowledge required to undertake the role that is important for this level, not necessarily the achievement of a full qualification.

The additional specialist knowledge required could in part consist of managerial knowledge, where this is genuinely needed for the job and there is a requirement to attend management development courses or have equivalent managerial experience and development. In this instance management development means more than learning practices, procedures etc but should enable the jobholder to select different practices or theoretical positions based on research evidence.

Panels should consider the correlation of KTE levels with other skills and responsibility factors to help assess the appropriate level.

As with the difference between levels 5 and 6, not all experience delivers some of the required additional knowledge for level 7. Simply doing a job for many years may make the jobholder more proficient at doing the job but does not always result in additional knowledge.

	<p>Examples of the in depth experience necessary to supplement formal knowledge acquisition are, for example, having worked:</p> <ul style="list-style-type: none"> ● in the specialist area and working and developing pro-actively with practitioners from own or another profession who are experienced in this, together with relevant short courses and self-study, or ● in the specialist area and to a clear and substantial programme of knowledge development, e.g. actively participating in all aspects of the specialist work, attending appropriate study days and short courses, undertaking extended self-study. <p>For level 7, experience on its own as the means of acquiring sufficient, relevant additional knowledge should be scrutinised carefully. There should normally be evidence of a critical understanding of additional theoretical or conceptual knowledge including the foundations of best practice such as would be acquired through a taught master's course. At this level jobholders will be able to give reasoned arguments based on evidence about different options available in their work.</p>
Level 8	<p>(a) Advanced theoretical and practical knowledge of a range of work procedures and practices,</p> <p>Refers to the highest level of specialist knowledge within the relevant specialist field. It is equivalent to a doctorate plus further specialist training, research or study. It is, therefore, appropriate for posts requiring significant expertise and experience and where the entry level is a doctorate or equivalent e.g. healthcare or scientific consultant posts.</p> <p>At this level the jobholder has created and interpreted new evidence, through original academic research or other advanced scholarship, of a quality to satisfy peer review. It requires a systematic acquisition and understanding of a substantial body of knowledge within a specialist area which is at the forefront of an academic discipline or area of professional practice.</p> <p>For level 8, experience on its own as the means of acquiring sufficient additional knowledge should be scrutinised carefully. There should</p>

	<p>normally be evidence of additional theoretical or conceptual knowledge acquisition developed through independent research.</p> <p>The additional specialist knowledge required could consist in part of managerial knowledge, where this is genuinely needed for the job and there is a requirement to attend management courses or have equivalent managerial experience. As for level 7, such management development means more than learning practices and procedures etc but should enable the jobholder to select different practices or theoretical positions based on research evidence.</p> <p>Panels should always consider the correlation of KTE levels with other skills and responsibility factors to help assess the appropriate level.</p>
	<p>(b) Specialist knowledge over more than one discipline/function acquired over a significant period.</p> <p>This refers to extensive knowledge and expertise, equivalent to level 6 in this factor, across a number of subject areas, i.e. a combination of some (i.e. two or more) disciplines/functions, e.g. clinical, research and development, human resources, finance, estate but should not be confined to the practices in these areas and must meet the criteria for at least level 6 in all areas of practice.</p>

1. How to differentiate between factor levels

There must be a clear step change in knowledge requirements between each level covering the depth and/or breadth of knowledge and the time taken to acquire it.

Panels should use job description information or ask questions, to assess the relationship with skills and responsibilities factor levels to help assess the correct level for this factor. Panels are reminded that, in many cases a higher level for this factor will correspond to a higher level in other skill and/or responsibility factors.

2. Appropriate consideration of qualifications

The factor level definitions are written in terms of the knowledge required to perform the job at each level. This is to ensure that the knowledge is accurately evaluated, and no indirect discrimination occurs through use of qualifications, which may understate or overstate the knowledge required.

Qualifications may be a useful indicator of the level of knowledge required. However, it should be clear why a particular qualification is required for a role and how the knowledge will then be applied.

The knowledge and understanding to be assessed is the minimum needed to carry out the full duties of the job to the required standards. In some cases, this will be the level required at entry and set out in the person specification, for example:

- An accountancy job for which the person specification sets out the need for an accountancy qualification plus experience of financial systems.
- A healthcare professional job, for which the person specification sets out the requirement for the relevant professional qualification plus knowledge and/or experience in a specified specialist area.

In other cases, however, the person specification may understate the knowledge actually needed to carry out the job because it is set at a recruitment level on the expectation that the rest of the required knowledge will be acquired in-house through for example, on the job training and experience or continuing study. Examples may include-

- Job descriptions containing statements such as “no formal qualifications or experience are required. In-house training will be provided for successful applicants; completion of a competency workbook is required; candidates will be provided with a mentor and undergo a full training programme when appointed”.
- Administrative posts for which the recruitment level of knowledge is a number of GCSEs whereas the actual knowledge required includes a range of non-routine clerical and administrative procedures.
- Managerial posts for which the recruitment level of knowledge is a number of GCSEs plus health service experience, when the actual

knowledge required includes the range of administrative procedures used by the team managed plus supervisory/managerial knowledge or experience.

- Healthcare jobs where a form of specialist knowledge is stated on the person specification as desirable, rather than essential, because the organisation is willing to provide training in the particular specialist field.

In some cases, person specifications overstate the level of formal qualifications required when compared to the actual demands of the job. Panellists MUST challenge this with the recruiting line managers or job advisors to assure themselves that the requirement is warranted for the job and not included for recruitment/shortlisting purposes or to influence the banding outcome.

Likewise, postholders may hold qualifications that are not required for the role yet seek to get them acknowledged in reviews or when being assessed as a Changed Job. In this case it is also essential that panels seek confirmation with job advisors about the level of knowledge required to undertake the role.

Some job descriptions or person specifications may include phrases such as “working towards” a qualification. Panels should confirm whether the job does genuinely require the knowledge acquired through a specified formal qualification and if so, this should be taken into account when matching or evaluating the job. NB This can be indicative of the difference between knowledge needed at recruitment rather than that needed to perform the job competently. It may also be suggestive of the person’s ability to progress to the next job rather than what is required in the present job.

Where particular qualifications are specified in a job description these should be in a relevant subject or topic area related to the role being carried out.

3. Registration and assessing Knowledge, Training and Experience

Registration with a professional body is not directly related to either knowledge generally, or to any particular level of knowledge, e.g. level 5.

Whilst registration is important and required for many roles because it provides guarantees of quality of practice it is not relevant in job evaluation. Only the qualification necessary for registration will be taken into account.

Many healthcare professional jobs require knowledge at level 5 and also require state registration for professional practice. However, it is perfectly possible for other groups to achieve a level 5 without a requirement for registration. Likewise, some registered roles, depending on the tasks they actually perform, will evaluate at lower than level 5.

4. How to consider what experience is equivalent to a qualification?

This is an extremely difficult task to undertake, and panels must ensure they scrutinise all job information and ask questions of the job advisors where necessary to fully understand that knowledge as it needs to be applied and used to undertake the job.

The Job Evaluation Group has produced supplementary guidance based on the current qualification frameworks to support panels in their considerations.

Factor 3. Analytical and judgemental skills

Analytical and judgemental skills

This factor measures the analytical and judgemental skills required to fulfil the job responsibilities satisfactorily. It takes account of requirements for analytical skills to diagnose a problem or illness and understand complex situations or information; and judgemental skills to formulate solutions and recommend/decide on the best course of action/treatment.

Skills required for:

Level 1:	Judgements involving straightforward job-related facts or situations.
Level 2:	Judgements involving facts or situations, some of which require analysis.
Level 3:	Judgements involving a range of facts or situations, which require analysis or comparison of a range of options.
Level 4:	Judgements involving complex facts or situations, which require the analysis, interpretation and comparison of a range of options.
Level 5:	Judgements involving highly complex facts or situations, which require the analysis, interpretation and comparison of a range of options.

Definitions and notes:

Facts or situations, some of which require analysis (level 2) includes both clinical and non-clinical facts/situations where there is more than a straightforward choice of options and there is a requirement in some cases to assess events, problems or patient conditions in detail to determine the best course of action, such as selection of staff, resolving staffing issues, problem solving, fault finding on non-complex equipment.

Range of facts or situations which require analysis or comparison (level 3) includes both clinical and non-clinical facts/situations where there is more than a straightforward choice of options and there is a requirement in a range of different cases to assess events, problems or illnesses in detail to determine the appropriate course of action. Examples of this type of analysis and judgement are fault finding on complex equipment, initial patient assessment, analysis of complex financial queries or discrepancies.

Complex (level 4) means complicated and made up of several components which have to be analysed and assessed and which may contain conflicting information or indicators e.g. assessment of specialist clinical conditions, analysis of complex financial trends, investigating and assessing serious disciplinary cases.

Interpretation (levels 4 and 5) indicates a requirement to exercise judgment in identifying and assessing complicated events, problems or illnesses and where a range of options, and the implications of each of these, have to be considered.

Highly complex (level 5) means complicated and made up of several components which may be conflicting and where expert opinion differs or some information is unavailable. This type of analysis and judgment may be required in posts where the jobholders are themselves experts in their field and judgments have to be made about situations which may have unique characteristics and where there are a number of complicated aspects to take into account which do not have obvious solutions.

Factor 4. Planning and organisational skills

Planning and organisational skills

This factor measures the planning and organisational skills required to fulfil the job responsibilities satisfactorily. It takes account of the skills required for activities such as planning or organising clinical or non-clinical services, departments, rotas, meetings, conferences and for strategic planning. It also takes account of the complexity and degree of uncertainty involved in these activities.

Skills required for:

Level 1:	Organises own day-to-day work tasks or activities.
Level 2:	Planning and organisation of straightforward tasks, activities or programmes, some of which may be ongoing.
Level 3:	Planning and organisation of a number of complex activities or programmes, which require the formulation and adjustment of plans.
Level 4:	Planning and organisation of a broad range of complex activities or programmes, some of which are ongoing, which require the formulation and adjustment of plans or strategies.
Level 5:	Formulating long-term, strategic plans, which involve uncertainty and which may impact across the whole organisation.

Definitions and notes:

Straightforward tasks, activities or programmes (level 2) means several tasks, activities or programmes, which are individually uncomplicated such as arranging meetings for others.

Planning and organisation (level 2) includes planning and organising time/activities for staff, patients or clients where there is a need to make short-term adjustments to plans for example planning non-complex staff rotas, clinics or parent-craft classes, allocating work to staff, planning individual patient/client care, ensuring that accounts are prepared for statutory deadlines, planning administrative work around committee meeting cycles.

Planning and organisation of a number of complex activities (level 3) includes complex staff or work planning, where there is a need to allocate and re-allocate tasks, situations or staff on a daily basis to meet organisational requirements. It also includes the skills required for co-ordinating activities with other professionals and agencies, for example where the jobholder is the main person organising case conferences or discharge planning where a substantial amount of detailed planning is required. These typically involve a wide range of other professionals or agencies. The jobholder must be in a position to initiate the plan or coordinate the area of activity. Participating in such activities does not require planning and organisational skills at this level.

Complex (levels 3 and 4) means complicated and made up of several components, which may be conflicting.

Planning and organisation of a broad range of complex activities (level 4) includes planning programmes which impact across or within departments, services or agencies.

Formulating plans (levels 4 and 5) means developing, structuring and scheduling plans or strategies.

Long term strategic plans (level 5) extend for at least the future year, take into account the overall aims and policies of the service/directorate/organisation and create an operational framework.

Factor 5. Physical skills

Physical skills

This factor measures the physical skills required to fulfil the job duties. It takes into account hand-eye co-ordination, sensory skills (sight, hearing, touch, taste, smell), dexterity, manipulation, requirements for speed and accuracy, keyboard and driving skills.

Level 1:	The post has minimal demand for work related physical skills.
Level 2:	The post requires physical skills which are normally obtained through practice over a period of time or during practical training e.g. standard driving or keyboard skills, use of some tools and types of equipment.
Level 3:	(a) The post requires developed physical skills to fulfil duties where there is a specific requirement for speed or accuracy. This level of skill may be required for advanced or high-speed driving; advanced keyboard use; advanced sensory skills or manipulation of objects or people with narrow margins for error, or b) the post requires highly developed physical skills, where accuracy is important, but there is no specific requirement for speed. This level of skill may be required for manipulation of fine tools or materials.
Level 4:	The post requires highly developed physical skills where a high degree of precision or speed and high levels of hand, eye and sensory co-ordination are essential.
Level 5:	The post requires the highest level of physical skills where a high degree of precision or speed and the highest levels of hand, eye and sensory co-ordination are essential.

Definitions and notes:

Physical skills normally obtained through practice (level 2) includes skills which jobholders develop in post or through previous relevant experience, such as use of cleaning, catering or similar equipment. It also includes manoeuvring wheel chairs/trolleys in confined spaces, using hoists or other lifting equipment to move patients/clients, intra-muscular immunisations/injections and use of sensory skills.

Standard keyboard skills (level 2) includes the skills exercised by those who have learned over time and those who have been trained to RSA 1 or

Specific requirement (level 3a) means that the job demands are above average and require specific training or considerable experience to get to the required level of dexterity, co-ordination or sensory skills.

Advanced or high-speed driving (level 3a) includes driving a heavy goods vehicle, ambulance, minibus or articulated lorry where a Large Goods Vehicle, Passenger Carrying Vehicle or Ambulance Driving Test or equivalent is required.

Advanced keyboard use (level 3a) includes the skills exercised by touch typists and advanced computer operators.

Advanced sensory skills (level 3a) includes the skills required for sensory, hand and eye co-ordination such as those required for audio-typing. It also includes specific developed sensory skills e.g. listening skills for identifying speech or language defects.

Restraint of patients/clients (level 3a) indicates a skill level that requires a formal course of training and regular updating.

Manipulation of fine tools or materials (level 3b) for example, manipulation of materials on a slide or under a microscope, use of fine screw drivers or similar equipment, assembly of surgical equipment, administering intravenous injections.

Highly developed physical skills (level 4) for example, the skills required for performing surgical interventions, intubation, tracheotomies, suturing, a range of manual physiotherapy treatments or carrying out endoscopies.

Highest level of physical skill (level 5) such as keyhole or laser surgery or IVF procedures.

Factor 6. Responsibilities for patient client care

Responsibilities for patient client care

This factor measures responsibilities for patient/client care, treatment and therapy. It takes account of the nature of the responsibility and the level of the jobholder's involvement in the provision of care or treatment to patients/clients, including the degree to which the responsibility is shared with others. It also takes account of the responsibility to maintain records of care/treatment/advice/tests.

Level 1:	Assists patients/clients/relatives during incidental contacts.
Level 2:	Provides general non-clinical advice, information, guidance or ancillary services directly to patients, clients, relatives or carers.
Level 3:	(a) Provides personal care to patients/clients, or (b) provides basic clinical technical services for patients/clients, or (c) provides basic clinical advice.
Level 4:	(a) Implements clinical care/care packages, or (b) provides clinical technical services to patients/clients, or (c) provides advice in relation to the care of an individual, or groups of patients/clients.
Level 5:	(a) Develops programmes of care/care packages, or (b) provides specialist clinical technical services, or (c) provides specialised advice in relation to the care of patients/clients.
Level 6:	(a) Develops specialised programmes of care/care packages, or (b) provides highly specialist clinical technical services, or (c) provides highly specialised advice concerning the care or treatment of identified groups or categories of patients/clients, or (d) accountable for the direct delivery of a service within a sub-division of a clinical, clinical technical or social care service.
Level 7:	Accountable for the direct delivery of a clinical, clinical technical, or social care service(s).
Level 8:	Corporate responsibility for the provision of a clinical, clinical technical or social care service(s).

Definitions and notes:

Clients: alternative term for patients often used for those who are not unwell (pregnant women, mothers, those with learning disabilities) or to whom services are provided in the community. 'Clients' does not refer to commercial organisations or customers, nor does it refer to internal customer/client relationships. Please see advice at the end of this section about matching or evaluating non-clinical manager jobs.

At level 2 or above the clinical activities should be a significant aspect of normal duties. **Directly to patients/clients (level 2)** on a one-to-one, individual basis, usually face-to-face or over the telephone e.g. reception or switchboard services, food delivery service, ward or theatre cleaning.

Personal care (level 3a) includes assisting with feeding, bathing, appearance, portering supplied directly to patients/clients. **Basic clinical technical services (level 3b)** includes cleaning, sterilising or packing specialist equipment or facilities used in the provision of clinical services e.g. sterile supplies, theatres, laboratories; the routine obtaining or processing of diagnostic test samples; medical/ technical/ laboratory support work.

Basic clinical advice (level 3c) includes the provision of straightforward clinical advice to patients/clients by jobholders who are not clinical specialists e.g. an emergency call service operation.

Implementing care (level 4a) includes carrying out programmes of care, therapy or treatment determined by others. This may entail making minor modifications to the care programme or package within prescribed parameters, and reporting back on progress. It also includes supervising individual or group therapy sessions within an overall programme of care, treatment or therapy.

Provides clinical technical services (level 4b) e.g. initial screening of diagnostic test samples, dispensing of medicines, undertaking standard diagnostic (e.g. radiography, neurophysiology) tests on patients/clients, or maintaining or calibrating specialist or complex equipment for use on patients.

Provides advice (level 4c) provides advice which contributes to the care, wellbeing or education of patients/clients, including health promotion. This level also covers jobs involving the registration, inspection or quality assurance of facilities/services for patients/clients e.g. registration and/or inspection of nursing homes, inspection of storage and use of drugs in residential care homes.

Develops programmes of care/care packages (level 5a) involves assessment of care needs and development of suitable care

programmes/packages, to be implemented by the jobholder or by others. It includes giving clinical/professional advice to those who are the subject of the care programmes/packages.

Provides specialist clinical technical services (level 5b) for example, interprets diagnostic test results, carries out complex diagnostic procedures, processes and interprets mammograms, constructs specialist appliances, calibrates or maintains highly specialist or highly complex equipment.

Provides specialised advice (level 5c) provides specialised advice which contributes to the diagnosis, care or education of patients/clients e.g. clinical pharmacy or dietetic advice on individual patient care, specialised input to registration, inspection or quality assurance of facilities/services for patients/clients. This option applies to jobs which do not involve developing programmes of care, as these are covered by level 5a.

Develops specialised programmes of care/care packages (level 6a) takes account of the depth and breadth of this responsibility. Clinicians working in a specialist field typically provide this level of care.

Provides highly specialist clinical technical services (level 6b) provides a highly specialist clinical technical service, which contributes to the diagnosis, care or treatment of patients/clients e.g. the maxillo-facial prosthodontology service.

Provides highly specialised advice (level 6c) provides highly specialised advice, which contributes to the diagnosis, care or education of patients/clients in an expert area of practice. Clinicians working in a specialist field typically provide this level of advice. This option applies to jobs which do not involve developing specialist care programmes/packages, which are covered by level 6a.

Within a sub division of (level 6d) refers to responsibility for either a geographical or functional sub division e.g. area manager for a service, locality manager.

Accountable for direct delivery (level 7) refers to the accountability

vested in jobholders who directly manage the providers of direct patient/client care, clinical technical service or social care service and may or may not provide direct care, clinical technical services or advice themselves, for example, professional health care managers. The accountability must be for a whole service.

Corporate responsibility (level 8) refers to the accountability, normally at board or equivalent level, at the highest level of responsibility other than the Chief Executive Officer, for clinical governance across the organisation e.g. director of nursing and midwifery services.

Clinical service refers to services such as oncology and paediatrics.

Clinical technical service refers to services such as medical physics, diagnostic radiography, audiology and haematology.

Social care service refers to services such as child protection, learning disabilities.

Please note:

Responsibility for the provision of a service which contributes to patient care, e.g. hotel services management, should be regarded as a policy and service development responsibility and assessed under that factor. The responsibilities of those providing such services should be assessed under the relevant responsibility factor(s) such as maintenance of facilities or equipment under Responsibilities for Financial and Physical Resources.

Matching and local evaluation of non-clinical manager jobs in clinical areas

National monitoring of matching and local evaluations of non-clinical managerial jobs in clinical areas has revealed some misunderstanding of how the Agenda for Change JES should be applied to these jobs, particularly in relation to the Responsibility for Patient Care factor. The problem appears to have arisen from:

- The initial absence of national profiles for such jobs, which has led panels to match them to the (healthcare) Professional Manager profiles

(which have level 7 for Responsibility for Patient Care).

- The labelling and classification (in the job family 'other' on the NHS Employers website and THE COMPUTERISED SYSTEM) of the Professional Manager profiles, which does not make it clear that they are intended for clinical professional manager roles.
- The wording of the guidance on 'accountable for direct delivery of a service' at levels 6(d) and 7 on the 'Responsibility for Patient Care factor', which reads: 'accountability vested in jobholders who manage the providers of direct patient/client care, clinical technical service or social care service and may or may not provide direct care, clinical technical services or advice themselves, for example, professional healthcare managers.'

The JEG has reviewed the situation and confirmed that level 6d and level 7 of the Responsibility for Patient Care factor were intended to be applied only to healthcare practitioner roles with clinical accountability for the direct delivery of clinical or social care services. They were not intended to apply to non-clinical roles and those general manager roles with responsibilities for the delivery of clinical services.

Use of the professional manager profiles for non-clinical or social care jobs and/or evaluation of such jobs at level 6(d) or 7 on the responsibility for patient/client care factor runs a risk of challenge on equality grounds.

It is recommended that non-clinical managerial jobs in clinical areas, for example:

- General or business manager jobs in clinical areas: or
- Non-clinical or divisional/departmental managers of clinical divisions/departments should, wherever possible, be matched to the professional manager, performance/operations profiles (in the business administration and projects job family). These are in bands 8b-d.

The guidance in relation to accountable for direct delivery should be read as follows: 'refers to the accountability vested in jobholders *requiring a health or social care practitioner background in order to** directly manage the providers of direct patient/client care, clinical technical service or

social care service, and may or may not provide direct care, clinical technical services or clinical or social care* advice themselves, for example professional health care managers.’

Mismatching of non-clinical manager jobs may carry risks of equal pay claims.

This advice also applies where non-clinical managerial roles are undertaken by those with professional health or social care backgrounds and expertise, if this is not a requirement of the role.

** The text in italics is additional guidance to assist in the correct use of this factor level.*

Factor 7. Responsibilities for policy and service development implementation

Responsibilities for policy and service development implementation

This factor measures the responsibilities of the job for development and implementation of policy and/or services. It takes account of the nature of the responsibility and the extent and level of the jobholder’s contribution to the relevant decision-making process, for instance, making recommendations to decision makers. It also takes account of whether the relevant policies or services relate to a function, department, division, directorate, the whole trust or employing organisation, or wider than this; and the degree to which the responsibility is shared with others.

Level 1:	Follows policies in own role which are determined by others; no responsibility for service development, but may be required to comment on policies, procedures or possible developments.
Level 2:	Implements policies for own work area and proposes changes to working practices or procedures for own work area.
Level 3:	Implements policies for own work area and proposes policy or service changes which impact beyond own area of activity.

Level 4:	Responsible for policy implementation and for discrete policy or service development for a service or more than one area of activity.
Level 5:	Responsible for a range of policy implementation and policy or service development for a directorate or equivalent.
Level 6:	Corporate responsibility for major policy implementation and policy or service development, which impacts across or beyond the organisation.

Definitions and notes:

Policies (level 1 upwards) refers to a documented method for undertaking a task which is based on best practice, legal requirements or service needs e.g. directorate policy on treatment of leg ulcers or trust/organisation policy on reporting accidents.

Follows policies in own role (level 1) refers to a responsibility for following policy guidelines which impact on own job, where there is no requirement to be pro-active in ensuring that changes are implemented.

Implements policies (level 2 and above) refers to the introduction and putting into practice of new or revised policies eg implementing policies relating to personnel practices, where the jobholder is pro-active in bringing about change in the policy or service. This is a greater level of responsibility than following new policy guidelines for own job, which is covered by the Level 1 definition.

Own work area (levels 2 and 3) refers to the immediate section/department.

Proposes policy or service changes (level 3) includes participation on working parties proposing policy changes as an integral part of the job (i.e. not a one-off exercise on a single issue). At this level, policy or service changes must impact on other disciplines, sections, departments or parts of the service.

Beyond own area of activity (level 3) refers to own function/service/discipline and not a geographic area e.g. where policy changes impact on other disciplines within multi-disciplinary (non-clinical or clinical) teams or outside own specialist area. It does not refer, for example, to the same function, service or discipline in other parts of the

trust/organisation.

Service (level 4) refers to a (discrete) standalone service, which may be a sub-division of a directorate, e.g. oncology, haematology, care of the elderly, catering, accounts.

Responsible for policy implementation and for discrete policy or service development (level 4) applies where the jobholder has overall responsibility for policy or service development and for its practical implementation. This responsibility should normally be specified on the job description.

Directorate or equivalent (level 5) refers to areas such as the medical services, children services, community services, estates services, hotel services, finance directorate and human resources directorate.

Corporate responsibility (level 6) refers to responsibility for policy or service development such as is held by those on the Board or equivalent level of accountability e.g. director of HR, director of corporate services, providing they hold the highest level of responsibility for the particular policy or service development area, besides the chief executive.

Factor 8. Responsibilities for financial and physical resources

Responsibilities for financial and physical resources

This factor measures the responsibilities of the job for financial resources (including cash, vouchers, cheques, debits and credits, invoice payment, budgets, revenues, income generation); and physical assets (including clinical, office and other equipment; tools and instruments; vehicles, plant and machinery; premises, fittings and fixtures; personal possessions of patients/clients or others; goods, produce, stocks and supplies).

It takes account of the nature of the responsibility (e.g. careful use,

security, maintenance, budgetary and ordering responsibilities); the frequency with which it is exercised; the value of the resources; and the degree to which the responsibility is shared with others.

Level 1:	Observes personal duty of care in relation to equipment and resources used in course of work.
Level 2:	(a) Regularly handles or processes cash, cheques, patients' valuables, or (b) responsible for the safe use of equipment other than equipment which they personally use, or (c) responsible for maintaining stock control and/or security of stock, or (d) Authorised signatory for small cash/financial payments, or (e) responsible for the safe use of expensive or highly complex equipment.
Level 3:	(a) Authorised signatory for cash/financial payments, or (b) responsible for the purchase of some physical assets or supplies, or (c) monitors or contributes to the drawing up of department/service budgets or financial initiatives, or (d) holds a delegated budget from a budget for a department/service, or (e) responsible for the installation or repair and maintenance of physical assets.
Level 4:	(a) Budget holder for a department/services, or (b) responsible for budget setting for a department/service, or (c) responsible for the procurement or maintenance of all physical assets or supplies for a department/service.
Level 5:	(a) Responsible for the budget for several services, or (b) responsible for budget setting for several services, or (c) responsible for physical assets for several services.
Level 6:	Corporate responsibility for the financial resources and physical assets of an organisation.

Definitions and notes:

General point on double counting

There is a risk of double-counting clinical technical services jobs under the Finance and Physical Assets factor, where part of the job role is about calibrating and repairing complex medical equipment. If the principal purpose of the job is providing a clinical technical service, these jobs will score for this under the Patient/Client Care factor and not again under the Finance and Physical Assets factor.

Personal duty of care in relation to equipment and resources (level 1) refers to careful use of communal equipment and facilities and/or

ordering supplies for personal use.

Regularly (level 2a) means at least once a week on average.

Safe use of equipment (level 2b) includes dismantling and assembling equipment for use by other staff or patients/clients. It also includes overall responsibility e.g. for office machinery or cleaning equipment for a location or area of activity.

Maintaining stock control (level 2c) is appropriate for jobs which include responsibility for re-ordering goods/stock from an agreed point/supplier on a regular basis.

Security of stock (level 2c) is appropriate for jobs where the responsibility is a significant feature of the job e.g. responsible for the security of a substantial amount/volume of drugs/materials. It also includes being a departmental key holder but holding the food store or drugs cupboard key for the shift is not sufficient to be assessed at this level.

Authorised signatory for small cash/financial payments (level 2d) includes e.g. 'signing off' travel expenses, overtime payments, agency/bank staff time sheets totalling less than around £1,000 per month. It also includes responsibility for the financial verification of documents/information such as expense sheets or purchase documents up to this amount, where it is a significant and on-going job responsibility. This role would normally be carried out within the finance department.

Safe use of expensive equipment (level 2e) refers to the personal use of individual pieces of equipment valued at £30,000 or more.

Highly complex equipment (level 2e) refers to the personal use of individual pieces of equipment which are complicated, intricate and difficult to use, for example radiography equipment.

Authorised signatory (level 3a) includes for example, "signing off" travel expenses or overtime payments agency/bank staff time sheets totalling around £1,000 or more per month. It also includes responsibility for the

financial verification of documents/information such as expense sheets or purchase documents up to this amount, where it is a significant and ongoing job responsibility. This role would normally be carried out within the finance department.

Responsible for the purchase of some physical assets or supplies

(level 3b) covers responsibility for the purchase or signing off orders valued at around £5,000 per year or greater. This level is appropriate for jobs where there is discretion to select suppliers taking into account cost, quality, reliability etc.

Monitors (level 3c) is applicable to situations where a jobholder is required to regularly review a set of financial information/accounts to ensure that they are consistent with guidelines and within pre-determined budgetary limits, as an ongoing job responsibility.

Financial initiatives (level 3c) includes income generation and cost improvement programmes.

Delegated budget (level 3d) refers to jobs which have responsibility for a sub-division of a departmental or service budget. This level also applies to jobs involved in committing substantial financial expenditures from a budget held elsewhere without formally holding a delegated budget e.g. commissioning care packages for social services clients.

Responsible for the installation or repair and maintenance (level

3e) refers to jobs which have a responsibility for carrying out repairs and maintenance on equipment, machinery or the fabric of the building. It also includes overall responsibility for security of a site.

Department/service* (levels 4a, b and c) is appropriate where there is full responsibility for budget/physical assets over a department or service. Where it involves large and multi-stranded financial/physical services, this should be treated as the equivalent of 'several services'. (i.e. Levels 5abc).

Budget holder (level 4a) refers to responsibility for authorising expenditure and accountable for expenditure within an allocated budget.

Budget setting (levels 4b and 5b) refers to an accounting activity with responsibility for overseeing the financial position.

Responsible for procurement (level 4c) refers to responsibility for selecting suppliers or authorising purchases, taking into account cost, quality, delivery time and reliability.

Several services* (levels 5a, b and c) is appropriate where there is significant responsibility over different departments and/or services and where the responsibility covers large and/or multi stranded financial/physical services.

Corporate responsibility (level 6) refers to accountability for financial governance across the organisation(s), at the highest level of responsibility other than the chief executive officer.

Commissioning of patient services should be assessed under the Responsibilities for Financial and Physical Resources factor, as a form or purchase of procurement of assets and supplies. The relevant level definitions are 3 (b), 4(c), 5(c) and, where there is corporate responsibility for the commissioning of patient services, 6.

It will be necessary to determine on an equivalence basis which of these is the appropriate definition to cover the job in question.

**The assessment should take into account the range and scope of the responsibility and the degree of control that is required. It is also helpful to consider whether the jobholder has full control of the budget(s)/physical assets or whether it is a delegated responsibility.*

Factor 9. Responsibilities for human resources

Responsibilities for human resources

This factor measures the responsibilities of the job for management, supervision, co-ordination, teaching, training and development of employees, students/trainees and others in an equivalent position.

It includes work planning and allocation; checking and evaluating work; undertaking clinical supervision; identifying training needs; developing and/or implementing training programmes; teaching staff, students or trainees; and continuing professional development (CPD). It also includes responsibility for such personnel functions as recruitment, discipline, appraisal and career development and the long-term development of human resources.

The emphasis is on the nature of the responsibility, rather than the precise numbers of those supervised, co-ordinated, trained or developed.

Level 1:	Provides advice, or demonstrates own activities or workplace routines to new or less experienced employees in own work area.
Level 2:	(a) Responsible for day-to-day supervision or co-ordination of staff within a section/function of a department/service, or (b) regularly responsible for professional/clinical supervision of a small number of qualified staff or students, or (c) regularly responsible for providing training in own discipline/practical training or undertaking basic workplace assessments, or (d) regularly responsible for the provision of basic HR advice.
Level 3:	(a) Responsible for day to day management of a group of staff, or (b) responsible for the allocation or placement and subsequent supervision of qualified staff or students, or (c) responsible for the teaching/delivery of core training on a range of subjects or specialist training, or (d) responsible for the delivery of core HR advice on a range of subjects.
Level 4:	(a) Responsible as line manager for a single function or department, or (b) responsible for the teaching or devising of training and development programmes as a major job responsibility, or (c) responsible for the delivery of a comprehensive range of HR services.
Level 5:	(a) Responsible as line manager for several/multiple departments, or (b) responsible for the management of a teaching/training function across the organisation, or (c) responsible for the management of a significant part of the HR function across the organisation.
Level 6:	Corporate responsibility for the human resources or HR function.

Definitions and notes:

Day-to-day supervision or co-ordination (level 2a) includes work allocation and checking. It also includes ongoing responsibility for the monitoring or supervision of one or more groups of staff employed by a contractor.

Professional and clinical supervision (level 2b) is the process by which professional and clinical practitioners are able to reflect on their professional practice in order to improve, identify training needs and develop. It can be conducted by a peer or superior. It is not for the purpose of appraisal or assessment and only for the purpose of improving practice in context of clinical governance etc. It may include mentoring.

Regularly (level 2b, c and d) at least once a week on average but could be in more concentrated blocks e.g. six weeks every year. Above Level 2 the responsibility must be ongoing.

Practical training (level 2c) e.g. training in lifting and handling, Control of Substances Hazardous to Health (COSHH) regulations

Training in own discipline (level 2c) means training people from own or other disciplines concerning subjects connected with own work e.g. an accountant training departmental managers in budgetary requirements, a specialist dietitian providing training to other professionals concerning the importance of diet in different clinical situations.

Undertaking basic workplace assessments (level 2c) includes undertaking assessments of practical skills e.g. NVQ assessments.

Provision of basic HR advice (level 2d) refers to a specific and ongoing responsibility for giving basic advice on HR policies and practices to staff other than those who they supervise/manage, for example, on recruitment procedures and practices within the organisation.

Day to day management (level 3a) includes responsibility for all or most of the following: initial stages of grievance and discipline; appraisal, acting as an appointment panel member; ensuring that appropriate training is delivered to staff; reviewing work performance and progress; work

allocation and checking.

Responsibility for allocation or placement and subsequent supervision (level 3b) includes liaison with training providers, allocation of students/trainees to staff for training purposes, ensuring that student/trainee records or assessments are completed.

Responsibility for teaching/delivery of core or specialist training (level 3c) refers to a significant and on-going job responsibility for training individuals in either elements of the jobholder's specialism or a core range of subjects. The trainees may be from either within or outside the jobholder's profession.

Responsible for delivery of core HR advice across a range of subjects (level 3d) refers to responsibility for giving advice and interpretation across a range of HR issues e.g. recruitment, grievance and disciplinary matters, employment law, as a primary job function.

Line manager (level 4a, 5a) includes responsibility over own staff for all or most of the following: appraisals; sickness absence; disciplinary and grievance matters; recruitment and selection decisions; personal and career development; departmental workload and allocation (i.e. allocation and re-allocation of blocks of work or responsibilities for areas of activity, not just allocation of tasks to individuals).

Single function or department (level 4a) refers to any unit of equivalent scope to a department where there is a significant management responsibility; taking into account the diversity and scope of the workforce managed.

Several/multiple departments (level 5a) refers to units of equivalent scope to departments in different functions where there is significant management responsibility e.g. estates and hotel services or therapy and diagnostic services.

Teaching or devising training as a major job responsibility (level 4b) refers to situations where teaching or devising training is one of the primary job functions and specified as a 'job purpose' and/or as a major

Responsible for the delivery of a comprehensive range of HR services (level 4c) the provision of specialist advice, for example, on change management, work development and similar issues, should be treated on an equivalence basis as meeting the level 4 definition of being responsible for the delivery of a comprehensive range of HR services.

Responsible for the management of a teaching/training function across the organisation (level 5b) refers to major responsibility for managing the provision of multi-disciplinary training across the organisation, including nursing, management development, AHP, statutory training. It would normally include responsibility for liaising with universities and other educational bodies.

Responsible for the management of a significant part of the HR function across the organisation (level 5c) covers jobs involving responsibility for the provision of highly specialist advice on HR issues which impact across the organisation, where the job holder is responsible for the nature and accuracy of the advice and for anticipating its consequences eg strategic employment relations, compensations and benefits or change management advice at the highest level of the organisation should be treated on an equivalence basis as meeting the level 5c definition of being responsible for the management of a significant part of the HR function across the organisation.

Corporate responsibility (level 6) refers to accountability for HR across the organisation(s) at the highest level of responsibility other than the Chief Executive Officer.

Factor 10. Responsibilities for information resources

Responsibilities for information resources

This factor measures specific responsibilities of the job for information resources (for example computerised; paper based, microfiche) and

information systems (both hardware and software for example medical records).

It takes account of the nature of the responsibility (security, processing and generating information, creation, updating and maintenance of information databases or systems) and the degree to which it is shared with others. It assumes that all information encountered in the NHS is confidential.

Level 1:	Records personally generated information
Level 2:	(a) Responsible for data entry, text processing or storage of data compiled by others, utilising paper or computer-based data entry systems, or (b) occasional requirement to use computer software to develop or create statistical reports requiring formulae, query reports or detailed drawings /diagrams using desktop publishing (DTP) or computer aided design (CAD).
Level 3:	(a) Responsible for taking and transcribing formal minutes, or (b) regular requirement to use computer software to develop or create statistical reports requiring formulae, query reports or detailed drawings /diagrams using desktop publishing (DTP) or computer aided design (CAD), or (c) responsible for maintaining one or more information systems where this is a significant job responsibility.
Level 4:	(a) Responsible for adapting / designing information systems to meet the specifications of others, or (b) responsible for the operation of one or more information systems at department / service level where this is the major job responsibility.
Level 5:	(a) Responsible for the design and development of major information systems to meet the specifications of others, or (b) responsible for the operation of one or more information systems for several services where this is the major job responsibility.
Level 6:	Responsible for the management and development of information systems across the organisation as the major job responsibility.
Level 7:	Corporate responsibility for the provision of information systems for the organisation.

Definitions and notes:

General point on double counting

Care must be taken with the consideration of the information resources factor in the case of jobs which are predominantly about direct care for patients/clients; clinical technical services, such as imaging and calibrating

complex medical equipment; and jobs whose main role is giving advice directly relating to patient/client care on clinical, social care or clinical technical services issues. These jobs will score under the patient/client care factor. However, because these jobs require the jobholder to manipulate information in connection with the service they provide, panels may believe it is appropriate to score this under the information factor.

It is, in most cases, inappropriate for jobs scoring high levels under the patient/client care factor also to score highly under the information factor when the information is relevant to the actual job, as this is deemed to have been considered under the patient care factor. Measuring it again in the information factor will invariably constitute double-counting and may lead to inflation of the band outcome.

Records personally generated information (level 1) includes personally generated:

- clinical observations
- test results
- own court or case reports
- financial data
- personal data
- research data

in whatever form the data is recorded (manuscript, word processed, spreadsheets, databases).

Data entry, text processing or storage of data (level 2a) includes word processing, typing or producing other computerised output such as drawings; inputting documents or notes compiled by others (for example test/research results, correspondence, medical or personnel records); collating or compiling statistics from existing records; pulling and/or filing of medical, personnel or similar records.

Occasional (level 2b) at least two or three times per month on average.

Develop or create statistical reports requiring formulae, (levels 2b and 3b) refers to a job requirement to produce statistical reports which require setting up and /or adjusting formulae.

Query reports (levels 2b and 3b) are computer generated structured reports used to request information from a database.

Taking and transcribing formal minutes (level 3a) includes board or trustee meetings, case conferences or similar where formal minutes are required, which are published to a wider audience than those attending the original meeting, and where this is a significant job responsibility. It does not include taking notes at departmental meetings or similar, or processing notes taken by others.

Regular (level 3b) at least two or three times a week on average.

Responsible for maintaining one or more information systems as a significant job responsibility (level 3c) includes responsibility for updating software, operating help facilities for an information system(s); managing storage and retrieval of information or records.

Responsible for adapting /designing information systems (levels 4a and 5a) refers to an ongoing and specific job responsibility for modifying or creating software, hardware or hard copy information systems.

Note: Level 5a is appropriate where the jobholder is responsible for the design and development of an entire system or equivalent.

Responsible for the operation of one or more information systems (levels 4b and 5b) includes direct responsibility for managing the operation of one or more systems which process, generate, create, update or store information.

Responsible for the operation of one or more information systems for several departments/services (levels 5b) includes responsibility for several departments/ services which process, generate, create, update, or store information as a principal activity.

Responsible for the management and development of information systems (levels 6) is appropriate only where it is the principal job responsibility and where it covers the whole organisation.

Corporate responsibility (level 7) refers to accountability, normally at board or equivalent level, at the highest level of responsibility other than the Chief Executive Officer, for information resources across the organisation(s).

Factor 11. Responsibilities for research and development

Responsibilities for research and development

This factor measures the responsibilities of the job for informal and formal clinical or non-clinical research and development (R&D) activities underpinned by appropriate methodology and documentation, including formal testing or evaluation of drugs, or clinical or non-clinical equipment.

It takes into account the nature of the responsibility (initiation, implementation, oversight of research and development activities), whether it is an integral part of the work or research for personal development purposes, and the degree to which it is shared with others.

Level 1:	Undertakes surveys or audits, as necessary to own work; may occasionally participate in R&D, clinical trials or equipment testing.
Level 2:	(a) Regularly undertakes R&D activity as a requirement of the job, or b) regularly undertakes clinical trials, or c) regularly undertakes equipment testing or adaptation.
Level 3:	Carries out research or development work as part of one or more formal research programmes or activities as a major job requirement.
Level 4:	Responsible for co-ordinating and implementing R&D programmes or activity as a requirement of the job.
Level 5:	Responsible, as an integral part of the job, for initiating (which may involve securing funding) and developing R&D programmes or activities, which support the objectives of the broader organisation.
Level 6:	Responsible, as an integral part of the job, for initiating and developing R&D programmes, which have an impact outside the organisation for example NHS-wide or outside the health service.

Definitions and notes:

Research and development (All levels) this includes testing of, e.g. drugs and equipment and other forms of formal non-clinical research (such as human resources, communications, health education) as well as formal clinical research. This factor measures the requirement for active direct participation in research or trials and does not include indirect involvement as a result of a patient being involved in the research.

Occasionally (Level 1) one or two such projects or activities per year.

Undertaking audits (Level 1) includes building and facilities audits or surveys, functional audits, clinical audits. Specific, one-off complex audits using research methodology should be counted as R& D activity (Level 2a).

Undertakes R & D activity (Level 2a) includes complex audits using research methodology for example specific one-off audits designed to improve a particular area or service. It also includes the collation of research results.

Undertakes clinical trials or equipment testing (Levels 2b and 2c) is appropriate where active participation is required.

Regularly (Levels 2a, 2b and 2c) is appropriate where it is a regular feature of the work, normally identified in a job description, with relevant activity on average at least once a month and usually more frequently.

Major job requirement (Level 3) indicates a continuing involvement for at least some part of every working week (20 per cent or more per week on average). This level is only appropriate where the jobholder normally has at least one project ongoing requiring this amount of involvement. Where the high-level involvement is only required for a one-off project, the job should be assessed according to the normal degree of involvement. Formal audits/investigations which meet the continuing involvement criteria should also be included at this level.

Co-ordinating and implementing R&D programmes (Level 4) includes taking overall control of a local, regional or national programme, which may be managed elsewhere. It also includes project management of R & D activities.

An integral part of the job (Level 5) is appropriate where R & D is a significant part of the job and takes up a substantial amount of working time.

Initiating and developing (Level 6) is appropriate where the jobholder is required to specify and develop R & D programmes and get these off the ground.

Factor 12. Freedom to act

Freedom to act

This factor measures the extent to which the jobholder is required to be accountable for their own actions and those of others, to use own initiative and act independently; and the discretion given to the jobholder to take action.

It takes account of any restrictions on the jobholder's freedom to act imposed by, for example, supervisory control; instructions, procedures, practices and policies; professional, technical or occupational codes of practice or other ethical guidelines; the nature or system in which the job operates; the position of the job within the organisation; and the existence of any statutory responsibility for service provision.

Level 1:	Generally works with supervision close by and within well established procedures and/or practices and has standards and results to be achieved.
Level 2:	Is guided by standard operating procedures (SOPs), good practice, established precedents and understands what results or standards are to be achieved. Someone is generally available for reference and work may be checked on a sample/random basis.
Level 3:	Is guided by precedent and clearly defined occupational policies, protocols, procedures or codes of conduct. Work is managed, rather than supervised, and results/outcomes are assessed at agreed intervals.
Level 4:	Expected results are defined but the post holder decides how they are best achieved and is guided by principles and broad occupational policies or regulations. Guidance may be provided by peers or external reference points.

	should be interpreted.
Level 6:	Is required to interpret overall health service policy and strategy, in order to establish goals and standards.

Definitions and notes

Within well-established procedures and/or practices (Level 1) is appropriate where jobholders are required to follow well defined procedures and do not generally deviate from these without seeking advice and guidance is guided by standard operating procedures (SOPs), good practice and established precedents (Level 2).

Is guided by standard operating procedures (SOPs), good practice, established precedents (Level 2) for example a jobholder may be required to deal with enquiries and other matters which are generally routine, but is normally able to refer non-routine enquiries and other matters to others.

Is guided by precedent and clearly defined occupational policies, protocols, procedures or codes of conduct (Level 3), is appropriate where the jobholder has the freedom to act within established parameters. Qualified professional/clinical/technical/scientific/administrative roles typically meet this requirement

Work is managed, rather than supervised (Level 3) is appropriate where jobholders are required to act independently within appropriate occupational guidelines, deciding when it is necessary to refer to their manager.

Is guided by principles and broad occupational policies (Level 4) is appropriate where the jobholder has significant discretion to work within a set of defined parameters. This applies, for example, to those who are the lead specialist or section/department manager in a particular (non-clinical or clinical) field e.g. an HR job specialising in continuing personal development (CPD), a clinical practitioner specialising in a particular field. This level also applies to jobs with responsibility for interpreting policies in relation to a defined caseload or locality in the community.

Establish the way in which these should be interpreted (Level

5) indicates freedom to take action based on own interpretation of broad clinical/professional/ administrative/technical/scientific policies, potentially advising the organisation on how these should be interpreted e.g. consultant, professional and managerial roles. This also applies to specialists, who have the freedom to initiate action within broad policies, seeking advice as necessary. By definition there can only be one or a very small number of jobs at this level in any service or department.

Is required to interpret overall health service policy and strategy (Level 6) would be appropriate for jobs with an ongoing requirement to act with minimal guidelines and set goals and standards for others.

Factor 13. Physical effort

Physical effort

This factor measures the nature, level, frequency and duration of the physical effort (sustained effort at a similar level or sudden explosive effort) required for the job. It takes account of any circumstances that may affect the degree of effort required, such as working in an awkward position or confined space. The job requires:

Level 1:	A combination of sitting, standing and walking with little requirement for physical effort. There may be a requirement to exert light physical effort for short periods.
Level 2:	(a) There is a frequent requirement for sitting or standing in a restricted position for a substantial proportion of the working time, or (b) there is a frequent requirement for light physical effort for several short periods during a shift, or (c) there is an occasional requirement to exert light physical effort for several long periods during a shift, or (d) there is an occasional requirement to exert moderate physical effort for several short periods during a shift.
Level 3:	(a) There is a frequent requirement to exert light physical effort for several long periods during a shift, or (b) there is an occasional requirement to exert moderate physical effort for several long periods during a shift, or (c) there is a frequent requirement to exert moderate physical effort for several short periods during a shift.

Level 4:	(a) There is an ongoing requirement to exert light physical effort, or (b) there is a frequent requirement to exert moderate physical effort for several long periods during a shift, or (c) there is an occasional requirement to exert intense physical effort for several short periods during a shift.
Level 5:	(a) There is an ongoing requirement to exert moderate physical effort, or (b) there is a frequent requirement to exert intense physical effort for several short periods during a shift, or (c) there is an occasional requirement to exert intense physical effort for several long periods during a shift.

Definitions and notes:

Light physical effort (levels 2 to 4) means lifting, pushing, pulling objects weighing from two to five kilos; bending/kneeling/crawling; working in cramped conditions; working at heights; walking more than a kilometre at any one time.

Sitting or standing in a restricted position (level 2a) restricted by the nature of the work in a position which cannot easily be changed e.g. inputting at a keyboard, wearing a telephone headset, in a driving position, sitting at a microscope examining slides; standing at a machine in a restricted area; standing while making sandwiches or serving meals on a conveyor belt system.

Moderate physical effort (levels 2 to 5) means lifting, pushing, pulling objects weighing from six to fifteen kilos; controlled restraint of patients e.g. in mental health or learning disabilities situations; sudden explosive effort such as running from a standing start; clearing tables; moving patients/heavy weights (over fifteen kilos) with mechanical aids including hoists and trolleys; manoeuvring patients/clients into position e.g. for treatment or personal care purposes; transferring patient/clients from a bed to a chair or similar.

Intense physical effort (levels 4 to 5) means lifting, pushing, pulling objects weighing over fifteen kilos with no mechanical aids; sudden explosive effort such as running from a standing start pushing a trolley; heavy manual digging, lifting heavy containers; heavy duty pot washing.

Occasional at least three times per month but fewer than half the shifts

worked, a shift being a period of work.

Frequent occurs on half the shifts worked or more, a shift being a period of work.

Several periods this applies to jobs where there are repeated recurrences of physical effort and does not apply to jobs where the effort in question occurs only once per shift. For example, level 3c applies to jobs involving the repeated moving or manoeuvring of patients, with mechanical or human assistance, into positions in which care or treatment can be carried out.

Weights quoted are illustrative only. Evaluators should take into account the difficulty of the lifting.

Ongoing is continuously or almost continuously.

Short periods are up to and including 20 minutes.

Long periods are over 20 minutes.

Walking or driving to work is not included.

Factor 14. Mental effort

Mental effort

This factor measures the nature, level, frequency and duration of the mental effort required for the job (for example concentration, responding to unpredictable work patterns, interruptions and the need to meet deadlines).

Level 1:	General awareness and sensory attention; normal care and attention; an occasional requirement for concentration where the work pattern is predictable with few competing demands for attention.
Level 2:	(a) There is a frequent requirement for concentration where the work pattern is predictable with few competing demands for attention, or

	(b) there is an occasional requirement for concentration where the work pattern is unpredictable.
Level 3:	(a) There is a frequent requirement for concentration where the work pattern is unpredictable, or (b) there is an occasional requirement for prolonged concentration.
Level 4:	(a) There is a frequent requirement for prolonged concentration, or (b) there is an occasional requirement for intense concentration
Level 5:	There is a frequent requirement for intense concentration.

Definitions and notes:

General awareness and sensory attention (level 1) is the level required for carrying out day-to-day activities where there is a general requirement for care, attention and alertness but no specific requirement for concentration on complex or intricate matters.

Concentration (levels 2 to 4) is where the jobholder needs to be particularly alert for cumulative periods of one to two hours at a time for example when checking detailed documents; carrying out complex calculations or analysing detailed statistics; active participation in formal hearings; operating machinery; driving a vehicle; taking detailed minutes of meetings; carrying out screening tests/microscope work; examining or assessing patients/clients.

Normal concentration for example seeing patients, writing reports, attending meetings and all other such activities which are interrupted by phone calls should be level 2.

Unpredictable (levels 2b and 3a) is where the jobholder is required to change from one activity to another at third party request. **Dealing with frequent interruptions (as in telephone or reception work) is not unpredictable unless they frequently cause the post holder to change from what they are doing to another activity (eg responding to emergency bleep, or changing from one accounting task to another in response to requests for specific information).** These levels are appropriate for jobs where the jobholder has no prior knowledge of an impending interruption but has to immediately change planned activities in response to one.

Prolonged concentration (levels 3b and 4a) refers to a requirement to concentrate continuously for more than half a shift, on average, excluding statutory breaks. This is appropriate where the jobholder undertakes few duties other than concentrating on a detailed, intricate and important sample/slide/document, for example cytology screening, clinical coding.

Intense concentration (levels 4b and 5). Requires in-depth mental attention, combined with proactive engagement with the subject, for example:

- carrying out intricate clinical interventions
- undergoing cross examination in court
- active and prolonged participation in board meetings
- situations where the job-holder not only has to apply sustained concentration to the subject matter, but also has to respond/actively participate, as in clinical psychology or speech and language therapy.

This is greater than a requirement to observe and/or record the reactions of a patient/client or other person.

Occasional fewer than half the shifts worked; a shift being a period of work. There will be activities which are carried out very occasionally for once in six months, which should not be counted under this factor.

Frequent occurs on half the shifts worked or more; a shift being a period of work.

Factor 15. Emotional effort

Emotional effort

This factor measures the nature, level, frequency and duration demands of the emotional effort required to undertake clinical or non-clinical duties that are generally considered to be distressing and/or emotionally demanding.

Level 1:	(a) Exposure to distressing or emotional circumstances is rare, or (b) occasional indirect exposure to distressing or emotional circumstances.
Level 2:	(a) Occasional exposure to distressing or emotional circumstances, or (b) frequent indirect exposure to distressing or emotional circumstances, or (c) occasional indirect exposure to highly distressing or highly emotional circumstances.
Level 3:	(a) Frequent exposure to distressing or emotional circumstances, or (b) occasional exposure to highly distressing or highly emotional circumstances, or (c) frequent indirect exposure to highly distressing or highly emotional circumstances.
Level 4:	(a) Occasional exposure to traumatic circumstances, or (b) frequent exposure to highly distressing or highly emotional circumstances.

Definitions and notes:

Exposure relates to actual incidents but the extent of the emotional impact can be either direct, where the jobholder is directly exposed to a situation/patient/client with emotional demands, or **indirect** where the jobholder is exposed to information about the situation and circumstances but is not directly exposed to the situation/patient/ client.

Indirect exposure will generally reduce the level of intensity, so, for example, indirect exposure to highly distressing or emotional circumstances (for example word processing reports of child abuse) – levels 3b or 4b – is treated as equivalent to the levels below i.e. levels 2a or 3a.

Distressing or emotional circumstances (levels 1 to 3) for example:

- Imparting unwelcome news to staff, patients/clients or relatives. This includes disciplinary or grievance matters, or redeployment/redundancy situations.
- Care of the terminally ill.
- Dealing with difficult family situations or circumstances.
- Exposure to severely injured bodies/corpses.

Indirect exposure to highly distressing (levels 2c and 3c) for example, taking minutes or typing reports concerning child abuse.

Highly distressing or emotional circumstances (levels 3b and 4b)

- This includes imparting news of terminal illness or unexpected death to patients and relatives; personal involvement with child abuse or family breakdown.
- Dealing with people with severely challenging behaviour.

Traumatic incidents (level 4a) for example:

- Arriving at scene of, or dealing with patients/relatives as a result of, a serious incident.

Rare means less than once a month on average.

Occasional means once a month or more on average. This level is also appropriate where the circumstances in which the jobholder is involved are very serious, such as a major accident or incident, but occur less than once a month.

Frequent means on average, once a week or more.

Fear of violence is measured under working conditions.

Factor 16. Working conditions

Working conditions

This factor measures the nature, level, frequency and duration of demands arising from inevitably adverse environmental conditions (such as inclement weather, extreme heat/cold, smells, noise, and fumes) and hazards, which are unavoidable (even with the strictest health and safety controls), such as road traffic accidents, spills of harmful chemicals, aggressive behaviour of patients, clients, relatives, carers.

Level 1:	Exposure to unpleasant working conditions or hazards is rare.
Level 2:	(a) Occasional exposure to unpleasant working conditions, or (b) occasional requirement to use road transportation in emergency situations, or (c) frequent requirement to use road transportation, or

	(d) frequent requirement to work outdoors, or (e) requirement to use Visual Display Unit equipment more or less continuously on most days.
Level 3:	(a) Frequent exposure to unpleasant working conditions, or (b) occasional exposure to highly unpleasant working conditions.
Level 4:	(a) Some exposure to hazards, or (b) frequent exposure to highly unpleasant working conditions.
Level 5:	Considerable exposure to hazards

Definitions and notes:

Exposure to unpleasant working conditions is rare (level 1) is appropriate where exposure to unpleasant working conditions occurs on average less than three times a month.

Unpleasant working conditions (levels 1 to 3) includes direct exposure to dirt, dust, smell, noise, inclement weather and extreme temperatures, controlled (by being contained or subject to health and safety regulations) chemicals/samples. Verbal aggression should also be treated as an unpleasant working condition. This level also includes being in the vicinity of, but not having to deal personally with, body fluids, foul linen, fleas, lice, noxious fumes (i.e. highly unpleasant working conditions if there is direct exposure).

Highly unpleasant working conditions (levels 3b to 4b) means direct contact with (in the sense of having to deal with, not just being in the vicinity of) uncontained body fluids, foul linen, fleas, lice, noxious fumes.

Some exposure to hazards (level 4a) is appropriate where there is scope for limiting or containing the risk (e.g. through panic alarms or personal support systems) such as accident and emergency departments and acute mental health wards.

Considerable exposure to hazards (level 5) is appropriate where there is exposure to hazards on all or most shifts and where the scope for controlling or containing the exposure is limited for example, emergency ambulance service work. This level does not apply in situations where

potential hazards (chemicals, laboratory samples, electricity, radiation) are controlled through being contained or subject to specific health and safety regulations.

Rare means less than three times a month on average.

Occasional means three times a month or more on average.

Frequent means several times a week with several occurrences on each relevant shift.

Driving to and from work is not included.