Guide to the use of profiles (chapter nine)
1. Introduction

1.1 Profiles have been developed in order to:

- Make the processes of assigning pay bands to roles as straightforward as possible. The matching procedure (see chapter 11) allows most jobs locally to be matched to nationally evaluated profiles, on the basis of information from job descriptions, person specifications and oral information.

- Provide a framework against which to check the consistency of local evaluations during the initial assimilation process and in the future (see chapter 13).

1.2 Profiles work on the premise that there are posts in the NHS which are fairly standard and which have many common features. Indeed one of the benefits of job evaluation is that it uses a common language and a common set of terms to describe all jobs. Job evaluation is about highlighting similarities between jobs via common language and measurement. Profiles apply these principles to particular job groups.

2. What profiles are and are not

2.1 Profiles are:

- The outcomes of evaluations of jobs (see paragraph 3 below).

- Explanations (rationales) for how national benchmark jobs evaluate as they do.

2.2 Profiles are not:

- Job descriptions and are not intended to replace organisational job descriptions. Similarly, profile labels are not intended to be read as job titles

- Person specifications for recruitment purposes, although they may be helpful in drawing up person specifications in the future.
3. The development of profiles

3.1 The NHS Staff Council Job Evaluation Group (JEG) develops and reviews profiles by working in partnership with relevant stakeholders, e.g. professional groups, trade unions, considering and analysing relevant job information and guidance from third parties (e.g. career frameworks and competency standards). Where significant changes to existing profiles are made, or new profiles developed, these are distributed for consultation via the Executive of the NHS Staff Council. Comments received are considered by JEG and the revised profile and/or explanation of response to comments is submitted to the Executive of NHS Staff Council for agreement to publish.

4. Use of profiles

National profiles are regularly reviewed and updated to ensure their accuracy and currency. For this reason, it is essential that panels use the profiles published on the NHS Employers website at the time of the panel sitting and do not rely on saved or pre-printed versions that may not be up to date.

4.1 Each profile represents a commonly occurring and recognisable healthcare or non-healthcare job found in the health service. However, for many such jobs there are small variations in the duties, responsibilities and other demands within and between NHS organisations, which need to be acknowledged but which do not make a difference to the overall band outcome.

4.2 Such variations are shown as a range for the relevant factors. Factor ranges are generally not more than two levels, but can be three levels under the effort and working conditions factors and the responsibility for research and development factor, where considerable variations occur in practice in otherwise very similar jobs.

4.3 For each factor, examples are given to exemplify the benchmark evaluation. Generic examples of duties, responsibilities and skills have been used where possible. In some cases a specific example, usually a
specialism, has been used. The profile may still be applicable where the particular example used is not relevant to an individual job.

4.4 In some cases there is more than one profile where a single job title has been used historically (e.g. clinical coding officer, healthcare assistant). This is usually because there is a wide range of duties and hence job weight carried out by staff with this title. The range is sufficient to span more than one new pay band. Employers working in partnership with staff organisations, in accordance with the agreed matching procedure, should determine which is the correct profile for the local post and assign the relevant pay band.

5. Generic profiles

5.1 Most of the current profiles apply to traditional job groups (e.g. podiatry, medical records) for the purpose of transferring all employees onto the Agenda for Change pay band structures. However, one of the aims of Agenda for Change is to increase job flexibility, where this is agreed to be desirable. For some groups, therefore, more generic profiles have been jointly developed by agreement with representatives of the group in question. These are designed to apply to a range of posts, which are broadly similar but which may have been treated differently in the past (e.g. finance, healthcare science).

5.2 Because of the range of job characteristics which can be covered by a single generic profile, this may mean that the profile score crosses the job evaluation range to a lower band. In each such case, the profile carries the following health warning: “The band for jobs covered by this generic profile is band e.g. 4. The minimum total profile score falls below the band e.g. 4 band range boundary. This is the result of using a single generic profile to cover a number of jobs of equivalent but not necessarily similar factor demand. It is not anticipated that any job will be assessed at the minimum level of every possible factor range. If this were the case, it indicates that the job should instead be matched against a band e.g. 3 profile. If this is not successful, the job must be locally evaluated.”

6. Profile labels
6.1 Profile labels are intended to assist in identifying possible profiles for matching purposes and to help employees find the profiles of relevance to their own jobs. Profile labels are NOT intended to be used as job titles. Revised profiles sometimes include commonly found job titles; there is no reason why these should not continue to be used, except where they refer to Whitley or other previous grading structures.

6.2 The principles on which the current profile labelling system is designed are to:

- Move away from the current various systems of job labelling and to emphasise the different approach and principles behind the Agenda for Change pay structure.

- Provide labels with meaning to staff in terms of career development e.g. nurse, nurse specialist, nurse advanced, nurse consultant; medical secretary entry level, medical secretary.

- Demonstrate commonality and potential for flexibility where reflected in profile content and outcomes e.g. clinical support worker.

- Keep job group profiles together in an alphabetical listing by starting with the job group name e.g. dental technician, dental technician higher level etc.

7. Profile conventions

7.1 Each profile factor box contains one or more bold statements, taken from the relevant factor level definitions and one or more text statements, summarising or exemplifying job information.

7.2 Bold statements pick out key words and phrases from the relevant factor level definitions and should be read in the context of the factor level definitions.

7.3 Bold and text statements at the same factor level are separated by a semi-colon; bold and text statements at different factor levels are separated by a forward slash.
7.4 *Bold and text statements follow the order of the factor options in the scheme.*

8. **Archived profiles**

There are times when it is necessary to archive profiles such as:

- when they are replaced by a combined suite
- where there is substantial evidence to indicate that have not been used throughout the service for a significant period of time.
- where the profile has been updated and changes are significant.

Archived profiles should be retained as such on your job evaluation system but not used to match jobs to going forward. When a profile is archived it does not mean that any jobs matched to it automatically need to be re-matched, the outcome is still valid. However, when the post is subsequently required for recruitment the job description should be confirmed against the new / revised profile as the archived profile is no longer available for future matches.