THE NHS STAFF COUNCIL WORKING IN PARTNERSHIP

JOB EVALUATION GROUP

Clinical support worker (nursing and midwifery) jobs Updated national profiles and guidance for employers

Background

Alongside the revision of clinical support worker profiles in the <u>combined</u> <u>nursing job family</u>, the Job Evaluation Group (JEG) is publishing this guidance to assist NHS organisations to review these roles through their local job evaluation processes and to ensure that historical job matching outcomes remain reliable, accurate, fair and consistent.

The scope of these profiles covers roles in nursing and midwifery provided in mental health, maternity, acute services and community-based settings.

NHS organisations are reminded that when job evaluation processes are not followed appropriately, or full job information is not considered this may present an equal pay risk to employers. The Equality and Human Rights Commission emphasised these type of risks in its guidance.

Why is this guidance needed?

One of the reasons for NHS pay modernisation (Agenda for Change) was to ensure equal pay for work of equal value. In line with this, it was crucial that every effort was made to ensure that the NHS Job Evaluation Scheme was fair and non-discriminatory in both design and implementation.

The Hartley v Northumbria Healthcare tribunal (2008-9) found that the national aspects of the scheme, including design, profile writing, job evaluation processes and training courses were in line with equal pay requirements, but issued a warning that the processes and procedures needed to be implemented properly at local level to avoid equal pay claims being brought against the employer.

Concerns were raised with JEG that the duties and tasks in some clinical support worker (CSW) and maternity support worker (MSW) roles had changed significantly over time and job descriptions may not have been regularly reviewed and updated to reflect this with the result that matching or evaluation outcomes may no longer be reliable. As a consequence, some banding

outcomes have become out of date, inconsistent and out of step when viewed against other NHS jobs and could present an equal pay risk.

Changes to the landscape

A number of factors have impacted on CSW and MSW roles in the NHS since Agenda for Change was implemented in 2004. Increased demands on services, changes to nursing and midwifery roles and more delegation to CSW/MSW staff has, in some areas, resulted in lower banded staff being asked to undertake additional clinical and patient care duties.

Additionally, several initiatives and programmes for this group of staff have been implemented in recent years:

- Career pathway for CSW/MSWs in Wales
- HCSW/MSW Learning Framework in Scotland
- The Care Certificate in NHS England put the induction process on a formal footing and takes a number of months to complete.
- CSW/MSW Apprenticeship schemes have been introduced
- Skills for Health have been running the Talent for Care programme to support CSW/MSW development
- Career development frameworks and pathways have emerged
- The HEE Maternity support worker competency, education and career development framework

In Northern Ireland, a partnership project between staff side organisations and the Chief Nursing Officer after the Frances report was published ensured that there was clarity and accountability in each of the roles within the nursing family.

Consequently, vocational qualifications are no longer the automatic choice for many employers in NHS organisations across the UK as other learning and development initiatives and activities have been put in place.

In all areas of nursing, midwifery, mental health and community care teams factors such as staffing and recruitment challenges, combined with an increasing trend for clinical, patient care tasks and activities being delegated to CSWs/MSWs has resulted in significant changes to these roles, in some cases.

For example, in acute settings, where it is more likely for CSW/MSWs to work as part of a team, changes in staffing, skill mix and models of working may directly result in CSW/MSWs carrying out delegated clinical care duties. In community settings where CSW/MSWs may be in lone worker roles, the responsibility to record patient observations and report changes to clinical conditions may have become a regular feature of the role over time.

To support and ensure the provision of safe patient care, there has been an increasing emphasis on checking competency levels and the provision of short training courses to support CSW/MSWs to acquire or further develop the

knowledge and skills required to carry out these additional tasks and activities. This has resulted in a significant change impacting on CSW/MSW roles over time.

Job descriptions may not have been updated to reflect these types of changes including information on the types of training undertaken, CSW/MSW competency workbook completion, sometime supported by a designated mentor and delivered over a period of six to nine months or similar activities that may affect Factor 2: Knowledge, training and experience.

Updating job descriptions

Chapter 10 of the NHS Job Evaluation handbook is clear that job descriptions must be agreed and kept up to date. This is an essential requirement of the NHS Job Evaluation Scheme. Therefore, organisations should regularly review and update job descriptions to reflect the full requirements of the role even when the changes may not seem to be significant and may not necessarily change the job evaluation outcome.

Accurate records of changes and decisions made should be retained to provide an audit trail. This means that as changes are made over a period of time, these can be assessed to ensure that gradual changes are tracked and help to avoid disputes over backdating if grades subsequently change following a revision.

<u>Chapter 3 of the handbook</u> states that when changes to a job deemed to be significant, the post should be re-evaluated/matched. Decisions on what is significant must be agreed in partnership locally by knowledgeable job evaluation practitioners, ideally the job evaluation leads at the organisation.

You can find help with writing job descriptions on the NHS Employers website.

Generic job descriptions

Chapter 10 also states that:

"where generic job descriptions are in use, post holders and their managers must ensure that they adequately reflect the complete nature of the role and amend if necessary. This may trigger a review (see chapter 13)."

Some CSW/MSW roles require developed, specific or specialist skills and knowledge to safely carry out the tasks and activities in their role. These should be reflected in the job description and may not be fully described in generic job descriptions.

Access to the changed job review process

JEG acknowledges that this group of employees may face some barriers in accessing the changed job review process. NHS organisations should ensure that CSW/MSWs have equity of access to the process and can obtain the information required for them to have their job reviewed by a trained partnership

job matching panel. This information would include a copy of the job description, the matched job report and national profile used in the matching exercise.

NHS organisations should ensure that they are following the <u>changed jobs</u> <u>guidance</u> in chapter 3 of the NHS Job Evaluation handbook and regrading requests should be dealt with in a timely manner.

Ideally organisations should monitor and report on requests for re-banding as part of their mitigations of equal pay risk and to comply with their equality duties.

Consistency checking

NHS organisations should ensure that robust consistency checks are completed to assess CSW/MSW roles and similar types of roles including new roles as these are introduced.

Where issues are found that highlight inconsistencies, NHS organisations should take action to resolve these, including reviewing job descriptions where these may have become out of date or changes (such as those described above) have not been reflected and assessed over time.

Advice for panels

JEG has produced <u>guidance for panels</u> to help them in assessing the requirements of CSW/MSW roles.

Summary and actions

NHS organisations should, working in partnership, satisfy themselves that they have matched or evaluated their clinical support worker (nursing and midwifery) jobs appropriately and taken account of all agreed demands of the roles in their organisation, which should be reflected in the rationales on the matching form.

Job descriptions should be reviewed regularly as part of the appraisal process, to ensure these are up to date and accurately reflect the duties of the role, qualification requirements, knowledge, training and experience required and patient client care duties are full described.

If the jobs do not match the CSW/MSW profiles, a full local evaluation should be undertaken, again with all job demands reflected in the explanatory text.