**Pay progression flow chart**

**Running the pay progression meeting**

The meeting takes place between the clinical manger and the consultant.

The clinical manager decides is the consultant has or has not met the criteria.

If the medical director overrides the decision, pay progression is achieved. The clinical manager opens the pay point.

If the medial director upholds the decision on pay progression is deferred for one year\*.

If remedial action is complete pay progression is achieved.

The clinical manager opens the pay point.

The clinical manger and the consultant agree that remedial action is needed and can be achieved before the pay progression date.

The consultant follows the remedial action plan.

The clinical manger decides the consultant has not met the criteria.

The clinical manager escalates their decision to the medical director who will decide whether to override the decision or uphold it.

If remedial action is not achieved the clinical manager escalates their decision to the medical director who will decide whether to override the decision or uphold it.

If the medical director upholds the decision pay progression is deferred for one year\*.

If the medical director overrides the decision, pay progression is achieved.

The clinical manger opens the pay point.

The clinical manager decides that the consultant has met the criteria.

Following the meeting the clinical manger opens the pay point.

**Meeting outcomes**

**Scheduling the pay progression meeting**

The employer is responsible for scheduling the meeting with six weeks’ notice. The meeting should occur six months, but no later than three months, before the pay progression.

**Pay progression meeting notifications**

The clinical manager (supervisor field in ESR) and the consultant will receive the pay progression notifications from ESR one, three and six months before the pay progression date.