



**NHS
Staff
Council**
WORKING IN PARTNERSHIP

Using job evaluation audit results to improve JE practice

**Working in
partnership**

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Background

Following the 2026 NHS England job evaluation (JE) audit, this guide sets out the NHS Staff Council's position in relation to the findings and why they matter and suggests practical steps organisations can take to improve their future audit outcomes and strengthen confidence in the NHS Job Evaluation Scheme (JES).

An annual audit of JE practice was a key element in a series of recommendations on improving local job evaluation practice, agreed in principle by the Secretary of State in April 2025. This package of measures aims to build capacity for and restore confidence in job evaluation at provider level, and the audit provides the first national picture of JE performance since the scheme was introduced in the early 2000s.

The questions in the audit (reproduced at Appendix 1) align to requirements outlined in Annex 31 of the NHS Terms and Conditions of Service. It is intended that organisations use the annual audit as a way of benchmarking their JE activity against these national standards so that improvement plans can be discussed and agreed in partnership with local staff side representatives.

This paper is intended to help support the development and implementation of these plans. All provider organisations have both their own data returns and access to a dashboard summarising all returns. Staff side organisations also have access to this data.

Organisations are reminded that full details of the NHS Job Evaluation Scheme can be found [on this web page](#) and are encouraged to consult the following resources specifically -

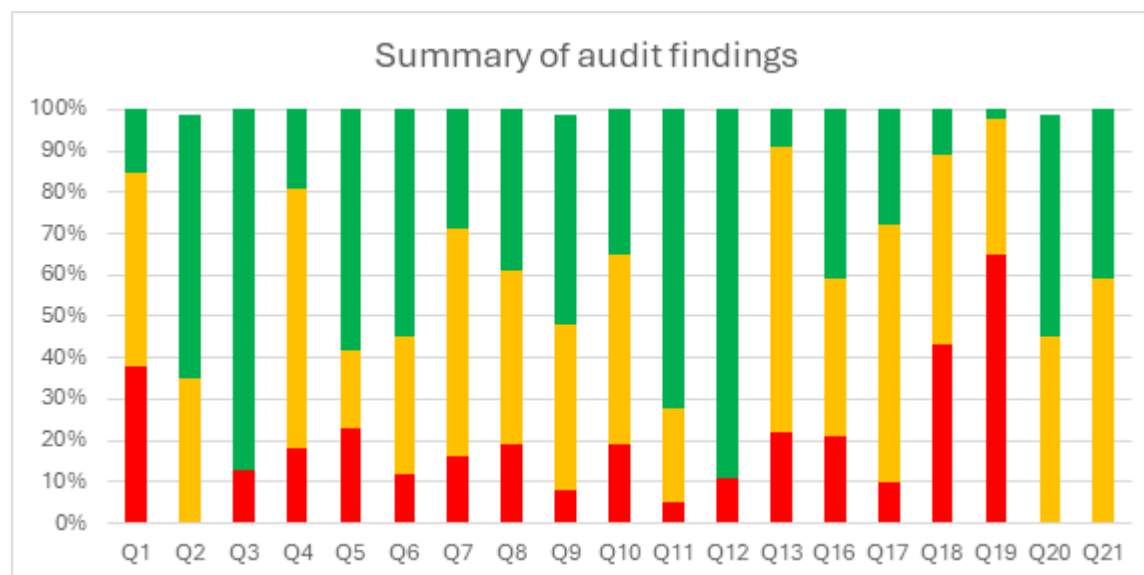
- [Annex 31](#) of the NHS Terms and Conditions of Service Handbook
- [NHS JE handbook](#)
- [Advice](#) from the NHS Staff Council Job evaluation group

Why this matters

Employers have a legal responsibility for ensuring that staff are paid consistently and fairly for work of equal value. Annex 31 of Agenda for Change also outlines JE contractual entitlements for staff. To do this they need to apply the NHS JE Scheme properly, consistently and transparently and in accordance with national guidance. Strong local JE arrangements benefit both organisations and staff by supporting fair pay, reducing equal pay risks, promoting positive industrial relations and strengthening confidence in JE outcomes.

What the audit found

The findings show that **all** organisations have opportunities to strengthen their JE practice. The table below provides a high-level overview of all responses –



For full question wording see Appendix 1

	Question summary	Red	Amber	Green
Q1	JE Board reports and risks	38%	47%	15%
Q2	JE HR Lead / resources	0%	35%	64%
Q3	JE Staff side Lead	13%	0%	87%
Q4	Partnership receives JE performance reports	18%	63%	19%
Q5	Up to date JE Policy	23%	19%	58%
Q6	12-week timeliness recommendation	12%	33%	55%
Q7	JE leads panel interaction monitoring system	16%	55%	30%
Q8	JE lead involvement in service redesign	19%	42%	39%
Q9	JE leads and practitioners keep up to date with relevant JE matters	8%	40%	51%
Q10	JE policy specifies capacity and backlogs	19%	46%	35%
Q11	JE outsourcing	5%	23%	72%
Q12	JE panels conducted in partnership	11%	0%	89%
Q13	Sufficient no of practitioners (3-5)	22%	69%	9%
Q16	Panellists representative of workforce	21%	38%	41%
Q17	Paid time off for JE practitioners	10%	62%	28%
Q18	JE refresher training	43%	46%	11%
Q19	Up to date JD	65%	33%	2%
Q20	JE recording systems	0%	45%	54%
Q21	JE report for staff	0%	59%	41%

While some organisations have well-established JE processes and demonstrate good compliance with the NHS Job Evaluation Scheme, the audit found significant variation in JE maturity across the NHS in three key areas -

- Governance and assurance.
- Partnership working.
- JE capacity and capability.

The audit is not a pass-or-fail exercise. Rather, it provides an opportunity for employers and trade unions to work together to strengthen local JE arrangements, reduce organisational risk, and build trust and confidence in the NHS Job Evaluation Scheme and banding outcomes.

Employers and trade union representatives are encouraged to work together to review their organisation's findings and agree, in partnership, an improvement action plan. This plan should address local findings, have clear priorities, milestones and timescales for improvement. (NB All organisations have access to their own result and to a dashboard of findings provided by NHS England that also may be useful to take into consideration.)

To support these plans, guidance and advice for improvement in each of the three priority areas is given below.

The most successful organisations will be those that treat JE as a strategic workforce issue supported by strong governance, genuine partnership working and a sustained commitment to build and ensure local capability.

Theme 1: Governance and assurance

Why governance matters

Boards are responsible for ensuring:

- Staff are paid correctly.
- Equal pay risks are identified, monitored and addressed.
- Job evaluation is undertaken fairly, consistently and transparently
- Sufficient resources are available to support JE activity.
- Compliance with national requirements.

Key audit findings

As noted above, the overall audit findings show a mixed picture of JE maturity and robust application with some employers reporting good practice in many questions. However, the Staff Council notes with concern that:

- 15% of organisations provide regular JE reports to their board.
- Almost one quarter do not have a local JE policy.
- Nearly half rely on local spreadsheets to record JE activity.

- 41% are confident they can provide a JE outcome report if requested by staff.
- 2% have a robust process to ensure job descriptions remain accurate and up to date.
- 28% outsource some or all of the JE work to another organisation including private companies

What does this mean?

Strong governance arrangements help organisations provide assurance that JE is being applied fairly, consistently and in accordance with national guidance.

Without effective oversight and procedures, organisations may be exposed to:

- Reduced confidence in JE outcomes among staff and trade unions.
- Increased equal pay risks.
- Breach of contract risks.
- Industrial relations disputes.
- Financial pressures arising from incorrect banding
- Difficulty providing assurance or audit evidence.

How to improve

For boards and executives

- ✓ Receive regular reports on JE activity, performance, risks and workforce impacts (at least annually, ideally quarterly).
- ✓ Understand any workforce, financial and industrial relations risks associated with JE activity. Ensure they are reflected within existing governance arrangements and risk registers/management arrangements.
- ✓ Seek assurance that JE performance, panel activity, timescales, delays and backlogs are being actively monitored.

For JE leads (management and staff side) in conjunction with partnership forums/JNCs

- ✓ Review and update local JE policies and procedures to ensure they are consistent with the NHS JE Handbook and Annex 31.
- ✓ Regularly review local governance arrangements and reporting mechanisms.
- ✓ Monitor JE activity, outcomes, trends and emerging risks through partnership structures by committing to a regular agenda item on partnership forum/JNC agendas
- ✓ Support the development of local processes to ensure job descriptions are kept up to date.

For people teams in conjunction with partnership forums/JNCs

- ✓ Develop robust local processes for reviewing and maintaining job descriptions, a requirement now outlined in Annex 31 of the NHS terms and conditions handbook.

This will need to include consideration of the following –

- An audit of the current state of job descriptions and agreement on actions needed as a consequence of its findings
- How job descriptions will be stored, accessed and version controlled.
- How job descriptions will be reviewed periodically and when significant role changes occur.
- How staff can access the current job description and most recent job evaluation report for their role
- How staff and line managers can ensure job descriptions are updated when roles change

For managers

- ✓ Review job descriptions regularly (minimum of every three years) and discuss and agree duties and responsibilities with staff.
- ✓ Engage with JE leads early when services are redesigned or new roles introduced.
- ✓ Ensure staff are aware of local JE processes and how changes to roles will be considered.
- ✓ Support staff participation in JE activity where appropriate.

Local JE policies

The policy should clearly describe local arrangements for administering and managing JE activity, and include the following

- Key Performance Indicators (KPIs) for reporting purposes
- panel planning and composition,
- workflow and workload management,
- roles and responsibilities,
- practitioner release*,
- consistency checking,
- record management and retention and
- dispute resolution processes, including disagreements about job description content.

Policies should also explain how the organisation will:

- promote equitable access to JE across all staff groups and pay bands
- maintain accurate and up to date job descriptions
- monitor JE activity and outcomes
- protect the integrity of the scheme while ensuring staff have appropriate access to review processes where there is evidence that duties, responsibilities or job demands have changed

(*Release for staff-side JE panellists should be agreed locally and must not be counted as facilities time)

Theme 2: Partnership Working

Why partnership matters

The NHS Agenda for Change pay structure, and its Job Evaluation Scheme, is underpinned by partnership working between employers and trade unions. Effective and constructive partnership working helps to –

- ensure that job evaluation processes are fair, transparent, and consistently applied.
- improve confidence in outcomes,
- identify and resolve issues early, and
- build positive employee relations.
- maintain the integrity and credibility of the JE scheme.

Key audit findings

As noted above, the overall audit findings show a mixed picture of JE maturity and robust application with some employers reporting good practice in many questions. However, the Staff Council notes with concern that:

- 14% of organisations completed returns without staff side involvement.
- 13% have no staff side JE lead.
- 19% report JE activity regularly to partnership forums.
- 11% do not conduct panels in partnership.
- 28% have arrangements that ensure practitioners are released to undertake JE work.

What does this mean?

Where partnership arrangements are weak, organisations may experience:

- Reduced confidence in JE outcomes.
- Increased risk of disputes and challenges.
- Delays in JE activity and decision-making.
- inconsistency of outcomes
- Damaged trust between employers and trade unions.

Strong partnership working promotes transparency, consistency and shared ownership of JE arrangements, supporting confidence that the scheme is being applied fairly and consistently.

How to improve

For employers

- ✓ Ensure there is a dedicated employer-side JE lead *.
- ✓ Ensure staff side representatives are involved in JE governance, oversight and improvement work and given partnership time off to participate
- ✓ Make JE a standing item at partnership forums.

- ✓ Share JE performance, risks, activity and workforce information openly and regularly with their JNCC or partnership forum.
- ✓ Support the release of both management and staff-side practitioners to undertake JE work, training and consistency checking.

For staff side

- ✓ Nominate a recognised staff side JE lead. This person will be accountable to the JNC and will require adequate time and resources to undertake this role.
- ✓ Support recruitment, development and mentoring of new staff side practitioners.
- ✓ Help identify and escalate barriers preventing practitioner participation.
- ✓ Promote awareness of JE developments and learning opportunities.
- ✓ Work constructively with employers to identify priorities for improving local JE practice.

(*It will be helpful to agree the remit of both staff side and employer side JE leads.)

Partnership forum discussions:

Regular partnership oversight provides an opportunity to jointly identify issues, agree solutions and ensure local JE arrangements continue to operate effectively, fairly and in line with national guidance.

JE should be a regular agenda item at JNC/partnership forums to enable oversight of local arrangements and to monitor progress against actions to improve JE practice. Suggested content for these discussions includes:

- number of JE panels completed, and outcomes recorded.
- any capacity challenges, including succession planning.
- training requirements of practitioners (including refresher training)
- length of time for a job to go through JE process and any backlogs.
- outcomes of consistency checking and any emerging themes (e.g. are jobs regularly sent back to the original panel)
- ensuring all panels are done in partnership
- Agreement and discussion of quarterly and annual JE Audit data returns and reporting requirements
- Improvement actions and progress against agreed plans.
- Emerging risks and resource requirements.

Theme 3: Building JE capacity and capability

Why capacity and capability matter

Effective job evaluation depends on having sufficient numbers of trained and supported practitioners from both employer and staff-side to undertake JE activity. Without this capacity, organisations may struggle to apply the scheme consistently, maintain timely processes, and retain confidence in JE outcomes.

Therefore, building and maintaining local capacity and expertise helps ensure that JE arrangements remain sustainable, resilient and aligned with national guidance.

Key audit findings

As noted above, the overall audit findings show a mixed picture of JE maturity and robust application with some employers reporting good practice in many questions. However, the Staff Council notes the following with concern:

- A reliance on outsourcing in some areas, and consequently JE not being delivered in partnership.
- An imbalance of JE practitioners within the overall pool. staff-side practitioners account for just over one in four JE practitioners
- 59% lack confidence that JE panels are representative of all occupational groups.
- 11% offer regular refresher training.
- 30% have processes to support panel learning and development.

What does this mean?

Insufficient capacity to undertake JE undermines confidence in the scheme and can lead to:

- Increased delays and backlogs which may impact on recruitment.
- Reduced consistency.
- Over-reliance on a small group of practitioners.
- Reduced opportunities for learning and succession planning.
- Greater reliance on external providers which in turn may limit the development and retention of local expertise.

How to improve

For employers

- ✓ Build a sustainable practitioner pool -
 - Assess current practitioner numbers, skills and capacity.
 - Identify succession risks and future workforce needs.
 - Agree a plan with the JNCC / partnership forum to attract and train practitioners from a range of occupational staff groups and pay bands. Work in partnership and provide support in order to increase staff side practitioner numbers.
 - Encourage wider organisational representation.

- Seek to broaden the practitioner pool so that it reflects the diversity of the workforce.
- ✓ Invest in training -
 - Encourage local JE leads to join the [NHS Employers community of practice](#).
 - Provide refresher training every 3-5 years, or sooner where required.
 - Create opportunities for shadowing, mentoring and peer learning.
 - Use panel feedback to identify learning needs.
 - Share learning from consistency checking activity.
 - Support practitioner release in policy and ensure release arrangements are agreed and monitored.
- ✓ Support practitioner participation -
 - Recognise JE work as an important organisational responsibility rather than an additional activity.
 - Agree and monitor release arrangements for both employer and staff-side practitioners.
 - Ensure practitioners have sufficient time and support to maintain their knowledge and skills.

For staff side/staff side JE lead

- ✓ Identify and support members from a range of occupational groups to be trained as JE practitioners.
- ✓ Support the development, mentoring and retention of staff-side practitioners.
- ✓ Encourage staff side practitioners to attend refresher training, update sessions and development sessions.
- ✓ Work in partnership to identify and address barriers that affect practitioner capacity and participation.
- ✓ Regularly report back to and escalate issues of concern relating to practitioner capacity, training or release arrangements through partnership forum/JNC.

Reducing reliance on outsourcing

What the audit found

The audit found that some organisations outsource some or all JE activity to private providers, often in response to local capacity challenges. The NHS Staff Council has significant concern about the longer-term impact on local JE arrangements this has.

Why this is important

The NHS JES is founded on partnership working between employers and trade unions nationally and locally.

Employers are legally accountable for ensuring pay equality and this includes all JE activity and outcomes. Therefore, they will need to maintain sufficient local JE capacity and capability to undertake JE activity through local partnership

arrangements, with outsourcing used only in exceptional circumstances where local solutions are not immediately available. This helps preserve local expertise, strengthen partnership working and maintain confidence in the integrity of the scheme. Sustainable local arrangements also help ensure that JE decisions are informed by an understanding of local roles, services and workforce structures.

The NHS Job Evaluation handbook recognises that organisations may occasionally require additional support to address temporary capacity issues. Such temporary solutions should be time-limited, agreed in partnership and have clear measurable goals, which draw on the minimum amount of external support needed while building internal capacity. Consistency checking should remain an internal organisational responsibility and be undertaken locally by a trained partnership panel, to ensure fairness, transparency and confidence in outcomes. See Chapter 3 of the NHS JE Handbook for further information.

The NHS Staff Council is concerned about the risks of longer-term outsourcing which can -

- reduce internal expertise
- weaken local partnership working and shared ownership of JE arrangements.
- limit opportunities for staff-side practitioners to gain experience and develop skills
- reduce organisational knowledge and resilience
- reduce local ownership of JE activity
- make it more difficult to identify and address equality, consistency and governance concerns
- undermine confidence in local JE processes and outcomes.

For more on the risks of outsourcing JE arrangements please see [additional guidance](#) (in particular pages 5 and 6) from the NHS Staff Council Job Evaluation Group.

Recommended approach

- ✓ Work in partnership with trade unions to build sustainable local JE arrangements and reduce reliance on external providers
- ✓ Where outsourcing is used, ensure clear governance arrangements are in place and maintain local partnership oversight of processes and outcomes AND
- ✓ Develop a jointly agreed plan with staff-side to strengthen local capacity and bring JE activity back in-house.
- ✓ This plan should cover the following:
 - Establishing effective governance and partnership oversight arrangements
 - Identifying the resources required to support local JE activity, including administration requirements as well as leads and panellists
 - Agreeing a local policy and processes aligned to national guidance.
 - Recruiting and training a sustainable pool of employer and staff-side JE practitioners including consistency checkers
 - Providing appropriate release arrangements for practitioners.
 - Mechanisms to forecast and monitor demand, manage workload and identify future capacity requirements.
 - Develop succession plans to maintain local expertise and capability.

Job evaluation improvement checklist

To help prepare for future annual audits, organisations should consider whether they can answer "yes" to the following and take appropriate action:

Governance

- We report JE activity, risks and performance through appropriate governance structures, including Board level oversight, risk registers and risk management arrangements.
- We have an up-to-date JE policy aligned to the NHS JE Handbook and Annex 31.
- We maintain accurate and accessible JE records.
- We can provide JE reports to staff when requested.
- We have a process for maintaining up-to-date job descriptions.

Partnership

- We have both employer and staff side JE leads.
- JE is discussed regularly at partnership forums.
- All panels operate in partnership.
- Staff-side representatives are involved in JE governance and improvement activity
- JE data returns and improvement plans are reviewed and agreed in partnership
- Release arrangements are actively monitored.

Capacity

- We have enough trained employer and staff-side practitioners from across the range of staff groups and bands to ensure they are broadly representative of the organisation as a whole.
- Staff side practitioners are adequately represented within the practitioner pool.
- Refresher training is provided.
- We have mentoring, shadowing and/or succession planning arrangements in place.
- We monitor and learn from panel outcomes.
- We are building and maintaining local expertise to reduce reliance on any outsourced provision.

Assurance

- We understand our JE risks and areas for improvement.
- We have a partnership agreed JE improvement plan.
- Progress against improvement actions is reviewed regularly in partnership.
- Actions have clear ownership, and timescales.
- We monitor JE activity and performance against agreed KPIs
- Staff can access information about local JE processes and their own job matching report.

Appendix 1 – JE Audit 2026 – full list of questions

Assessment of job evaluation practices audit – taken from NHS England’s technical guidance

The audit consists of 21 questions covering organisational governance, partnership arrangements, training and resources, panel capacity, timeliness, monitoring arrangements and record-keeping.

Questions are structured to provide an evidence-based assessment of whether organisations have the key components of a robust, fair and sustainable JE system in place.

Questions

1. Our board receives a regular report on job evaluation (application and outcomes) and issues are raised on the corporate risk register as appropriate, including but not limited to, equal pay risk

Red	No
Amber	Yes, but not routinely
Green	Yes, a report is made at least annually including an assessment of performance/risk

Explanation: Regular board oversight supports transparency, monitoring of resourcing and activity levels, and appropriate escalation of JE-related risks in line with the expectations set out in national guidance.

2. There is an identifiable lead for JE in our people/HR team and designated resources* for JE activity (*could be a separate funding line)

Red	There is no identifiable HR lead nor designated resources
Amber	There is an identifiable HR lead but no designated resources or There is no identifiable HR lead, but we do have designated resources
Green	There is an identifiable HR lead and designated resources

Explanation: Organisations are expected to have an operational lead and sufficient resource to support timely, consistent and partnership-based JE delivery. This reflects core principles in the NHS Job Evaluation Handbook.

3. There is a staff side lead for JE

Red	There is no staff side lead for JE
Green	There is a staff side lead for JE

Explanation: Having a nominated staff-side JE lead is central to partnership working and ensures staff-side visibility and involvement in key JE matters.

4. The partnership forum/joint negotiating consultative committee receives regular reports on JE activity and performance including training and resources

Red	No
Amber	Only when requested
Green	Yes regularly (at least quarterly)

Explanation: Regular and shared JE reporting helps ensure shared understanding of pressures, activity, risks and training needs. It supports open dialogue and stronger partnership working.

5. There is an up-to-date JE policy that has been agreed in partnership that outlines all local processes and practices and is in line with the national [NHS Job Evaluation Handbook](#)

Red	No – or the policy is over 5 years old
Amber	Yes, but it needs reviewing
Green	Yes, and it is reviewed at least every 3 years

Explanation: A current partnership-agreed JE policy ensures local practice reflects national standards, including roles, processes, governance and consistency requirements.

6. The NHS Staff Council recommends that the end-to-end process for determining pay banding is no longer than 12 weeks unless mutually agreed (not including time taken for role holders and line managers to agree job information and/or job analysis questionnaires)

Red	We do not have any JE activity targets or less than 50% is turned around within 12 weeks
Green	Over 50% of our JE activity is completed within 12 weeks and we have a plan to improve
Amber	90% of our JE activity is completed within 12 weeks (from date agreed information is submitted for JE to delivering outcome to role holder/manager)

Explanation: Timeliness is a core expectation within the JE process. Monitoring performance helps ensure fairness, prevent delays, and mitigate equal pay risks.

7. Systems are in place that allow JE leads to monitor the interaction between panels – for example, if there are frequent misunderstandings over the same issue/factor or regular over/under-evaluation by panels, so that remedial action made, or further training arranged

Red	No – there's no feedback from panels other than their reports
Amber	We review panel reports on an ad hoc basis or when there is a complaint/grievance
Green	Yes, and there is evidence to prove this

Explanation: Monitoring panel trends supports consistency, identifies training needs, and aligns with good practice in quality assurance.

8. JE leads are involved in service reconfiguration/redesign at an early stage

Red	No or only after the org change has happened
Amber	Our JE teams are made aware when this is happening so they can plan panels
Green	Our organisational change policy recognises the need to assess the JE implications of service reconfiguration/redesign at an early stage, and we can evidence that JE advice and expertise is available to advise managers, for example if changes to roles have banding implications

Explanation: Early JE lead input ensures that role changes are understood, and implementation impacts are managed appropriately.

9. JE leads and JE practitioners keep up to date with relevant matters for example, any changes in national profiles or the JE handbook

Red	No idea – no mechanism
Amber	JE leads subscribe to the workforce bulletin
Green	JE leads are active members of the national JE CoP and there is a formal/regular mechanism to update all local practitioners

Explanation: Maintaining current knowledge supports consistent decision-making and reflects expectations set out in national JE guidance.

10. Our agreed JE policy specifies how to identify and determine how the organisation will assess and deal with any temporary capacity issues or backlogs

Red	No – there is no plan
Amber	We occasionally assess capacity and put on more panels if we can
Green	We regularly assess our capacity and have a range of options to deal with temporary issues/backlogs

Explanation: Proactive capacity planning prevents delays and supports the sustainability of JE delivery.

11. Do you ever outsource your JE work to a private, third-party consultancy (such as a non-NHS organisation)?

Red	Yes – most or all of our JE work is done by a private company
Amber	Only occasionally in line with requirements of the JE handbook
Green	Never

Explanation: National guidance emphasises that JE should be delivered in partnership. External provision should be limited to exceptional circumstances on a temporary basis and only by local partnership agreement, with a clear plan to address bringing job matching and evaluation back in house.

12. All JE panels (including consistency checking) are conducted in partnership

Red	No
Green	Yes

Explanation: Partnership-based panels are a core requirement of the JE system.

13. We have sufficient practitioners to ensure that every matching or evaluation panel is made up of between 3 and 5 trained practitioners.

Red	No, some panels sit as 2 or sometimes sit without staff side member present
Amber	All panels sit with at least 3 practitioners with at least one staff side and one management member
Green	All panels sit with at least 4 members – with at least 2 staff side and 2 management side panellists

Explanation: Ensuring and maintaining sufficient capacity to hold panels in partnership is key to ensuring timely decision making and to maintaining confidence in the panel process.

14. How many panel practitioners do you have that are active and available to sit on JE panels?

Enter number (see validation rules).

Explanation: Maintaining an adequate pool of trained JE panel practitioners and convening panels at appropriate intervals is essential to ensure fairness, consistency, and robustness in JE outcomes. Sufficient numbers and regular panel activity help prevent delays, reduce bias, and support compliance. For the purposes of this return, an active panel practitioner is defined as someone who has participated in at least one JE panel in the past 12 months and remains available to continue doing so.

15. Of those, how many are staff side panellists (i.e. staff side job evaluation panellists should be nominated by, and be accountable to, a local union or staff side)?

Enter number (see validation rules).

Explanation: Panels should include trained staff-side practitioners, nominated through recognised union structures. This question helps assess whether staff-side capacity is sufficient to support partnership-based delivery.

16. We ensure that we have panellists from across all parts of the organisation and all occupational groups to ensure panels are representative of the workforce.

Red	We don't currently have panellists from across the organisation/occupational groups
Amber	We don't currently have panellists from across the organisation/occupational groups, but we are developing an action plan to address this
Green	Yes, we ensure that we have panellists from across the organisation/occupational groups

Explanation: Representative panels help ensure fair and knowledgeable evaluations, as recommended in national guidance and the NHS Job Evaluation Handbook.

17. We make sure that trained practitioners get sufficient paid time off to undertake JE work (this should be separate from any facilities time agreed for TU representatives)

Red	We don't monitor this
Amber	We expect managers to release staff, but we don't enforce it
Green	Our policies require managers to release practitioners, and we monitor and enforce this to ensure that all practitioners of any staff group can be released

Explanation: Protected time is essential to maintain an effective and sustainable pool of trained practitioners, supporting timely JE delivery.

18. Refresher training is offered regularly for trained job evaluation practitioners (every 3 to 5 years)

Red	We do not provide any refresher training
Amber	We provide refresher training but do not mandate attendance or monitor take up
Green	Yes, we have a programme of refresher training that ensures all active panellists receive refresher training at least every 5 years (and records to prove it)

Explanation: Regular refresher training helps maintain practitioner competence and is recommended in the JE handbook.

19. All staff have an up-to-date job description that is reviewed at least every 3 years

Red	Some do but we have no mechanism to monitor this
Amber	Some do but we have an action plan in place to address those that don't
Green	Yes, they do, and we have a process to ensure this happens; including re-banding when required

Explanation: Accurate job descriptions are essential for fair and valid JE decisions.

20. There is a robust system in place for recording all JE activity and outcomes

Red	We have paper-based system/JE outcomes are not stored
Amber	We use a spreadsheet to record information
Green	Yes, we have secure system that records all job information and outcomes/panel activity and keep records indefinitely, such as CAJE or IJES

Explanation: Complete, accurate and accessible JE records support audit, equal pay assurance and transparency.

21. If a member of staff asked for the job evaluation report for their job, we would be able to provide it

Red	No
Amber	We could do this for some roles, but not all
Green	Yes

Explanation: Being able to provide JE reports enables transparency and staff confidence in the JE process. It is an expectation under the JE handbook and will be a requirement of the new annex to the NHS Terms and Conditions of Service handbook, expected to be published in Spring 2026.