REVIEW OF THE NHS KNOWLEDGE AND SKILLS FRAMEWORK

TERMS OF REFERENCE

1. NHS Employers, on behalf of the parties on the NHS Staff Council are seeking to commission an independent review of the workings of the NHS Knowledge and Skills Framework and its associated Development Review Process. In particular the review will consider the KSF structure, processes, and the barriers to implementation. It will make proposals as to how to maximise the usage and benefits of KSF and increase appraisal/development review rates across the NHS.

2. The NHS Knowledge and Skills Framework (NHS KSF) is the career and pay progression strand of the NHS pay system for non-medical staff (Agenda for Change (AfC)). The provisions relating to the NHS KSF are part of the national collective agreement and the expectation was that it would be fully implemented by all NHS organisations.

3. The KSF:
   i. defines and describes the knowledge and skills that staff need to apply in their work, to deliver quality services
   ii. provides a single consistent, comprehensive and explicit framework for staff reviews and development
   iii. allows the operation of the pay progression system, without which the contractual commitment to an equitable pay system cannot be met
   iv. is a generic competency framework developed from existing best practice

4. The KSF is applied by identifying the knowledge and skills requirements for each NHS post (the KSF outline) and ensuring that each post holder has an annual review against their KSF outline, to identify any development needs. A personal development plan is then agreed and carried out.

5. At two points on each of the Agenda for Change pay bands, incremental progression is dependent on fulfilling the appropriate KSF outline for the post.

6. The KSF is part of the national Agenda for Change agreement and was developed in partnership by the four UK Health Departments, management and trades unions.

7. In addition to the KSF itself, a range of supporting materials and guidance has been prepared and promulgated by the NHS Staff Council’s KSF Technical Sub group. These are available on the NHS Employers website at knowledge and skills framework.
Implementation of the KSF

8. Progress on implementation and effective use of the KSF across the NHS has been slower than and not as widespread as had been expected by the national stakeholders. There is recognition that despite the work already achieved, more work needs to be done nationally to ensure effective use of the KSF across the whole NHS. Some organisations and staff have struggled with implementation, commenting that they feel that KSF is overly complicated or detailed and resource intensive. Conversely other organisations were reporting effective application of the KSF and were linking the use of the framework to their organisational objectives and reporting benefits in terms of service improvements.

9. The Staff Survey results for England in 2008 show only very slight increases in number of appraisals (64% in 2008 compared with 61% in 2007) and the indications are that the situation is not likely to get significantly better in 2009. The National Audit Office (NAO) fieldwork in August/September 2008 estimated 54% of staff had had a development review.


“The potential of the Knowledge and Skills Framework has not been realised by many trusts, yet effective use of the Framework is essential for maximising the benefits of Agenda for Change.”

“The Knowledge and Skills Framework is viewed by trust managers and staff as too complicated, and as a consequence some trusts are discouraged from making the best use of this tool”

The NAO report may be accessed at


11. Although the KSF applies across the UK, the review will be focusing on the experience in England. However, employer and trade union representatives from the rest of the U.K. will be invited to join a reference group which will support the review.

12. The review will determine:-

- Whether the NHS KSF and its associated processes are in a format which enables local employers and staff to use the framework effectively to develop staff and improve quality of care. This should particularly include the alleged issues of complexity/practicality raised in the NAO report.
• Whether the KSF can be used effectively to identify training and development needs for staff working at all levels (i.e. those with professional backgrounds where there is familiarity with appraisal and CPD and other groups who have not traditionally had appraisals, and development reviews)

• Whether there are any trade-offs between simplification and/or reduction in detail that may reduce the barriers to implementation and the potential benefits of the KSF to staff and organisations.

• The barriers to effective implementation and usage and the actions that should be taken to make the KSF accessible and straightforward to managers and staff.

• How the KSF can be effectively linked with local appraisal arrangements and organisational objectives, to support an increase in appraisal rates across the service.

13. The review will make specific proposals on the further action needed to ensure that the principles underpinning the KSF are effectively implemented across the NHS.

14. The review will consider the published documentation and guidance and also information from a sample of NHS organisations on:-

• How the KSF has been implemented and is being used

• How local employers have linked or integrated the KSF into their staff appraisal systems.

• The views of managers and staff on how practical KSF processes have been.

• How KSF development review processes can be delivered effectively and not perceived as overly burdensome and time consuming.

Reference group

15 The review team will have access to a reference group of employer and trades union representatives (including representatives from Scotland, Ireland and Wales) who will reflect a range of perspectives in relation to the KSF.

16 In addition to a written report, representatives of the research team will be expected to present their findings to a meeting of the Executive of the NHS Staff Council.

17 The initial review should be completed by early 2010.