

GUIDANCE FOR MATCHING PARAMEDIC ROLES TO PROFILES

Background

As part of the 2015-16 pay settlement, the National Ambulance Strategic Partnership Forum (NASPF) tasked the NHS Staff Council Job Evaluation Group (JEG) with reviewing and amending, as necessary, the national profiles in respect of paramedics. The NHS Job Evaluation Scheme provides the backbone of the NHS Agenda for Change agreement, ensuring equal pay for work of equal value. As a result, JEG has developed a new band 6 paramedic national profile (JEG notes on this new profile are in the Annex to this guidance).

The NHS Staff Council Executive has agreed the profile, which has now been published. JEG has been asked to set out the steps employers need to take to reassure themselves and their staff, in light of this, that their paramedic roles are banded correctly.

Suggested process

It is important that all parties have confidence in this process. Local partnerships should therefore use this guidance and agree an outline timetable for the work. Any timetable should balance the need to match without unnecessary delay whilst ensuring the matching process is undertaken thoroughly and in partnership.

JEG recommends the following steps are taken and that this document should be made available to all matching and consistency panels:

1. **Post holders and their managers** should review and agree job descriptions (JDs) to ensure they accurately reflect the current requirements of the role.
2. **Cluster jobs around job descriptions.** If it is possible to group jobs with similar or the same JDs, this will avoid duplication and give consistency of outcomes when matching. Again, this should be done in partnership and job holders will need to agree that this is appropriate.
3. **Additional information.** JDs will not normally contain information for all 16 factors in the NHS job evaluation (JE) scheme for example effort factors. Reach agreement in partnership as to how best to do this, so that matching panels will have access to all relevant job information. Some employers use a template, others use job advisors (in partnership) that can be questioned by the panel, either in person or over the telephone
4. **Agreed JDs (or JD clusters)** should then be put to a properly constituted job matching panel of between three and five fully trained practitioners representing management and staff side, in partnership. It is important that panels do not include representatives of the jobs to be matched, as this may lead to bias. The panel will need to have up-to-date and agreed JDs, person specifications and organisation charts of jobs to be matched plus any supplementary information they need (see point 5 on page 2).

Profiles for paramedic roles are as follows:

- Ambulance practitioner specialist (band 5)¹
- Ambulance practitioner advanced (band 6)
- Paramedic (band 6 – new)

Please note that the above are **profile labels** and not necessarily job titles. JEG has labelled the new band 6 profile *paramedic* in line with labelling conventions.

5. **The panel reads the job information** before commencing the matching process and reaching consensus on which profile to begin matching to. The best way of deciding on an appropriate profile is to compare the job statement at the top of a profile with the main purpose of job section in the agreed JD. If, during the process of matching, the panel identifies that another profile needs to be considered, they can switch from one to the other.

Panels have the facility to request further information from line managers and post holders if the information on the agreed JD is not clear or the panel are unsure of the detail. Panels should use this facility and not make assumptions.

6. **On a factor by factor basis** the panel should complete the matching form with information about the job to be matched from the agreed JD or other sources. This is a comparison exercise and all factors should be considered, comparing the information collected in the agreed JD etc with the information in the profile. Decisions of the panel must be reached by consensus. It is important to record all information to provide a robust audit trail.
7. **Determining the matching outcome.** Once all factor levels and rationales have been completed, it will be clear as to whether the job matches to a profile or not. Either the job will match perfectly (all of the factor levels are the same as in the profile) or it will be a band match, i.e. knowledge, training and experience (KTE) and freedom to act (FTA) match exactly, other factors only vary up or down by one level, no more than five factors vary and the score does not take the job over a band boundary. Where it is not possible to match the panel may choose to consider a different profile or recommend a full evaluation of the role.
8. **Consistency checking.** All outcomes should be checked for consistency and quality in accordance with the process set out in the JE Handbook. If the Consistency Checking panel (CCP) finds any anomalies, these must be referred back to the original panel and a conversation should take place until both panels have agreed the outcome.
9. **Outcome.** Only when the two panels have agreed on outcome, should it be communicated to the job holder(s), together with relevant documentation – the matching form, the profile it has matched to and a personal letter explaining the outcome and what to do in case of disagreement (see below).

¹ After receiving JDs and JAQs and conducting interviews in partnership with practitioners at two site visits, on the evidence that was gathered, JEG agreed that that the role of paramedic appeared to have changed considerably over time and that there was a need for a new band 6 profile.

10. **Review process.** If a job holder disagrees with the result of the outcome, they may request a rematch within three months of notification of the original outcome. In order to trigger a review, the job holder(s) must provide details in writing of where they disagree with the match and evidence to support their case.
11. **The review panel,** consisting of trained practitioners in partnership and in which the majority of members are different from those in the original panel, will review the information and either confirm the outcome, confirm a match to a different profile or, exceptionally, refer the job for local evaluation. If the outcome has changed, consistency checking should take place before communicating it to the job holder(s).
12. **The job holder** has no right of appeal beyond the review panel.

JEG hopes that this information will help organisations to determine the best profile match for their paramedic staff in light of the newly published Band 6 profile.

The NHS Staff Council Executive has also asked JEG to work with employers and trade unions, in partnership, to collate evidence and consider the need for an additional profile at band 5 for newly-qualified paramedics entering the service and undertaking a period of preceptorship. This work will commence as soon as possible but should not hold up any work locally on ensuring jobs are matched appropriately. We will circulate more information about this as soon as possible.

Frequently asked questions

Q1: How do we update job descriptions?

A: The job holder(s) with their line managers, should amend their existing JDs to reflect the role they have now, which may differ considerably from their previous JD. A typical JD should have a main purpose of job; an organisational chart and a list of the various components of the job, e.g. respond to emergency calls; see and treat; mentor newly-qualified paramedics, etc. Both staff and management should agree the contents of the JD.

Q2: Is there advice for panels on the difference between the new and former profiles?

A: Yes, JEG completed a report for the NHS Staff Council which is included in this document and should be available to panels.¹

Q3: What do we do if we do not have sufficient resources to convene a matching panel?

A: There is JEG guidance on capacity problems, which is available [on the NHS Employers website](#). We recommend that you attempt to resource this yourselves, but understand this may not always be possible and you may be able to seek resources from a nearby trust or from a database of practitioners via JEG. JEG can also provide [training](#).

Q4: What do we do if a panel cannot reach consensus on the outcome?

A: Firstly, we recommend that if there is an impasse, you put the information to another convened panel to see whether this can be resolved. This will also be the case if the

original and consistency checking panels cannot agree among themselves. Only if you have made every effort to reach an agreed outcome should you contact the JEG Secretariat for assistance. See chapters 14 and 15 of the [job evaluation handbook](#).

Q5: If a job is matched to a higher banded profile, when does the decision take effect? (Please note the banding may go down as well as up)

A: This is a matter for local partnership agreement but there are a number of options possible including, but not limited to the day the new job description is agreed or another locally agreed timescale.

Q6: Does the new band 6 profile apply to the Devolved Administrations?

A: Yes, this is a national profile and will apply throughout the United Kingdom.

Q7: Where can I find more information about the NHS JE Scheme?

A: In the [job evaluation handbook](#).

Annex

i JEG Notes on the new band 6 paramedic profile.

1. **Communication** – Level 4a –(the same as current 5 and 6 roles)

2. **Knowledge** – Level 5

Having established that there is a wide variation in the attainment of the requisite knowledge for the role this required very careful deliberation.

Knowledge is attained through a combination of qualifications, training, experience, short courses etc.

We found that there were Band 5 paramedics with a foundation degree and short experience working alongside others with similar responsibilities with a BSc degree and a large amount of experience.

Equally we found a specialist paramedic who had worked through the ranks with an Institute of Health Care Development (IHCD) qualification, had a large amount of experience and short courses which enabled him to demonstrate the requisite knowledge and skill to fulfil the role.

Having read the documents previously listed, we are aware that there has been discussion regarding the threshold level of qualification for entry to the Register for Paramedics (Health and Care Professions Council, Education and Training Committee 2014) and that the profession is moving towards graduate entry (2019/20).

All of the paramedics that were interviewed were registered with the Health and Care Professions Council, which is a prerequisite.

The Health and Care Professions Council (HCPC) has set the standards of proficiency for all of the professions that they regulate and states that Registrant Paramedics must “be able to practise as an autonomous professional, exercising their own professional Judgement” (HCPC Standards of proficiency –Paramedics 2014).

We believe that knowledge at JE level 5 is the most appropriate for the paramedic role, having considered all of the information.

Level 5: Understanding of a range of work procedures and practices, which require expertise within a specialism or discipline, underpinned by theoretical knowledge or relevant practical experience. ([Job Evaluation Handbook](#))

Furthermore the guidance note on the difference between levels 4 and 5 is relevant:

The differences between levels 4 and 5 are:

- *the breadth and depth of the knowledge requirement*

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- *the level of the equivalent qualifications* ([Job Evaluation Handbook](#))

Therefore, on the evidence that we have we believe that the breadth and depth of the knowledge required to fulfil the role of paramedic, irrespective of the way it has been acquired merits a level 5.

In addition to that, when consistency checking against the JE profiles for other clinical roles in the allied health professions and nursing where knowledge has been acquired by a mixture of qualifications, training and experiential learning, this decision seems consistent.

3. Analytical and judgemental skills – Level 3 - 4

We have applied a range to accommodate the possibility that more complex analysis and decision making may be required.

4. Planning and organisational skills - Level 2 (the same as current 5 and 6 roles)

5. Physical Skills – Level 4 - (the same as current 5 and 6 roles)

6. Responsibilities for patient/client care – 5a - (the same as current 5 and 6 roles) Level 5 was considered to be appropriate due to the assessment necessary in determining the care to be delivered. This is consistent with a band 5 nurse profile, and would be expected of a practitioner with a level 5 for KTE. Site visits interviews revealed no significant difference in the care package development or provision between current band 5 and 6 practitioners.

7. Responsibilities for policy and service development implementation - Level 1-2

We have applied a range to accommodate differing responsibility locally

8. Responsibilities for financial and physical resources - Level 2abce - (the same as current 5 and 6 roles)

9. Responsibilities for human resources – 2bc - (the same as current 5 and 6 roles)

10. Responsibilities for information resources -Level 1 - (the same as current 5 and 6 roles)

11. Responsibilities for research and development – Level 1 - (the same as current 5 and 6 roles)

12. Freedom to Act –Level 3 - (the same as current 5 and 6 roles)

13. Physical effort – Level 4c -5b

We have applied a range to accommodate differences in caseloads

14. Mental effort -Level 2a -3a

We have applied a range to accommodate differences in caseloads

15. Emotional effort –Level 4ab - (the same as current 5 and 6 roles)

16. Working conditions – Level 5 - (the same as current 5 and 6 roles)

It should be noted that these jobs score highly for the effort and environment factors and whilst this is unusual for a job with a KTE level at 5, because of the nature of the work undertaken and the impact this has on the effort and environment factors; it is, in job evaluation terms, how it is and reflects the idiosyncratic nature of this particular job.