



Job Evaluation

Is your
employer
getting it
right?

Improving job
evaluation capacity
locally

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Job Evaluation (JE) Recovery Tool

Introduction

This guidance aims to help you to develop job evaluation capacity locally and to help you make the case to your employer that investment in job evaluation is essential.

This tool will help you if:

- the NHS job evaluation scheme has fallen into disrepair in your organisation before or during the COVID pandemic
- there are issues with local JE capacity
- you are planning an earnings max re-banding campaign and your organisation isn't up to speed with JE
- your NHS organisation is planning a major re-organisation of services
- job evaluation is outsourced.

The NHS job evaluation scheme

The NHS job evaluation scheme is:

- jointly owned and run by employers and trade unions in partnership
- a system for comparing different jobs, applying agreed rules
- a way of establishing an internal rank order of jobs using agreed demand weighting
- an assessment of all significant job demands but only measures them once
- measurement of jobs and not the people doing those jobs
- free from bias
- transparent and has a review procedure.

In the NHS scheme the vast majority of local jobs are matched to national role profiles. However, some jobs need a full process of job analysis and evaluation of new or very specialist roles. After a job evaluation process the outcomes are checked for consistency before a job holder is told the results.

How does JE work across the nations?

National

The national Job Evaluation Group (JEG) is a sub-group of the NHS Staff Council and is made up of staff side and management side reps from across the NHS, including representatives from NI, Wales and Scotland. The group monitors the implementation of the scheme nationally. There are two sub-groups of JEG. The training group oversees the delivery of consistent and high-quality training across the service. The profile group ensures that the suite of national profiles are fit for purpose and develop new profiles when necessary.

Northern Ireland

In Northern Ireland job evaluation is co-ordinated by a staff side and management side job evaluation lead. Each of the five trusts, the ambulance service and arms-length bodies have a job evaluation lead and they work together with the all Northern Ireland leads to deliver high quality, consistent and efficient job matching and evaluation.

Training is delivered on a region wide basis to ensure that there are enough trained practitioners in each area. Outcomes are checked for consistency across Northern Ireland and the job evaluation leads meet regularly to share best practice and deal with any issues arising locally.

Cymru/Wales

Cymru/Wales has a job evaluation unit which co-ordinates work across the country. The unit has a list of all organisation JE leads and brings them together regularly to review job evaluation practice. There are three sub-groups in operation in Cymru/Wales – profile group, training group and monitoring group. If practitioners are keen to be involved in any of those groups they will be supported to be involved. Once a practitioner has completed job matching training they are then introduced to the JE leads and encouraged to attend panels. If they enjoy job evaluation they will be supported to undertake the full training. The JE unit supports new JE staff side leads to be able to undertake the role effectively.

England

NHS organisations from across England feed into the national job evaluation group and its sub-groups. There is no country wide co-ordination of job evaluation. Many regional social partnership forums have been collaborating on jointly commissioning job matching and evaluation training in their area and developing job evaluation capacity. We would recommend that branches who are involved in their regional SPFs put these issues on the agenda.

Scotland

Scotland has its own job evaluation group which is a sub-group of Scottish Terms and Conditions Committee (STAC). The Scottish JEG monitor the implementation of job evaluation across Scotland and report regularly to the STAC. The Scottish JEG group convene panels where disputes over job evaluation or matching have arisen. The group deliver job matching and evaluation training across Scotland and organise regular meetings to share best practice. STAC is currently looking at delivering the training virtually.

Job evaluation – are you getting it right?

Action points

1. Review your local JE capacity and implementation of the scheme.
2. Review your local JE policy.
3. Table the NHS JE MOT Checklist at your next JNCC and the new guidance from JEG Returning to Business As Usual Restoring Job Evaluation
4. Make the arguments for investment in job evaluation and matching locally.
5. Develop a jointly agreed plan for local capacity building around JE.
6. Flag up any implementation problems with your UNISON regional organiser.
7. Request to attend the relevant training including the newly launched virtual job matching training.
8. Sign up to your regional JE network or ask your Regional Health Committee to set one up.
9. If you are a new staff side job evaluation lead, then ask your regional head of

health to be buddied up with an experienced UNISON staff side lead. They can support you as you become more knowledgeable and experienced.

10. If your employer refuses to engage in dialogue about re-building local job evaluation capacity then this should be raised at the board level and put on the NHS organisations risk register as an equal pay risk.

New JEG Guidance

Returning to Business as Usual – Restoring Job Evaluation

The pandemic has had an impact on UNISON branches capacity, with some reps being redeployed back into substantive roles and an increase in local case loads. In some NHS organisations job evaluation work has not been undertaken or JE has been outsourced to a third party

JEG has recently launched new virtual job matching training and has published guidance to encourage NHS organisations to, in partnership, review and restore their local JE capacity. **The guidance** reminds employers of their obligations to implement the NHS job evaluation scheme locally and the equal pay risks inherent if they do not implement the scheme as outlined in the JE handbook.

The guidance reiterates that outsourcing of job matching and evaluation should only be used as a last resort, as a temporary measure and plans should be made to bring JE back in house as soon as possible. If JE has been outsourced in your NHS organisation please go to page 12 onwards for advice about what to do next.

Many NHS organisations have made the switch to virtual job matching and evaluation panels and **the guidance** refers to best practice around virtual panels.

Face to face training was paused by JEG during the pandemic which has caused some difficulties for branches in getting practitioners trained up. **The virtual job matching course** is up and running. More information about accessing the new virtual job matching training is contained in page 10 of this guidance.

Where are we at?

Before the pandemic the Health Service Group conducted a survey about local implementation and capacity issues in job evaluation and matching. There were 160 responses to the survey from health branches in UNISON. While most branches who responded felt their capacity was adequate when we looked beneath the surface of these results, we uncovered low local capacity and some poor practice. Some branches have gaps in their knowledge. In around 20% of the branches who responded there were real causes for concern.

- Branches told us that they are stretched and in the majority of branches who responded to the survey there were three or less UNISON reps who sit on job matching panels.
- Half of branches said that they have experienced some difficulty in accessing appropriate training.
- In around a third of employers where the branch responded, there are some issues around panels sitting, equal panel composition and consistency checking being carried out.
- The survey results showed some cause for concern with bad practice creeping into a small minority of the branches who responded.

Why have these challenges arisen?

The results of the survey show that there are clear challenges in the proper implementation of job evaluation and matching locally. We need to play our part in helping to future proof the scheme.

There are various reasons why JE may have slipped down the agenda in an NHS organisation.

- The local branch pressures of dealing with the pandemic
- The JE 'experts' or champions have retired or left the organisation.
- Volume of issues that you are dealing with as a branch or within an organisation.
- Low staffing levels.
- Key people don't see the importance of it.
- Refusal to give proper time to all parties to be involved.
- Job evaluation is perceived as a HR function and therefore managers from across the organisation may not understand its purpose.
- Partnership working has broken down.
- Financial pressures and reluctance from employers to fund training.

However, it is never too late to agree a way to work together to re-build job evaluation locally. The following resource can help you to raise issues, concerns and to build capacity.

Arguments to make about why an employer should invest in job evaluation

- Job evaluation underpins fair and transparent pay in the NHS. If staff believe they are being paid fairly this can lead to higher levels of job satisfaction and can increase the quality of patient care.
- There is no opt-out to implementation of job evaluation as part of the Agenda for Change agreement. The job evaluation handbook has been approved by the NHS Staff Council and is binding.
- There is a real risk of equal pay cases. Staff side can recommend that the failure to properly implement job evaluation should be recorded on the NHS organisation's risk register.
- Local implementation really matters in a defence against equal pay claims.
- There has been growing pressure on resources and staffing levels, we must make sure that NHS staff are being properly valued and paid for what they are actually doing now.
- Where there are planned re-organisations there must be robust JE practices in place. UNISON has seen examples of disputes arising unnecessarily because proper job evaluation processes haven't been followed.
- Staff may become dissatisfied and mistrust the process. This can result in low morale and can affect service delivery. We are aware that local disputes have arisen where the proper JE process hasn't been followed.

- Job evaluation, if implemented properly, depends on good partnership working. Re-establishing job evaluation can have wider benefits for partnership working.

NHS job evaluation self-assessment checklist

The NHS job evaluation MOT checklist is a good way to introduce the discussion about JE at your local JNCC. It is a jointly developed and agreed resource between staff side unions and employers and is a pro-active and practical resource which can help you review the implementation of JE practice in your organisation and also address poor practice. This is a useful resource which can act as a health check on JE in your NHS organisation and can help guide the discussion around practical steps to re-establish JE.

You can find the checklist [here](#).

The focus of the checklist is to guide your discussion to re-establish job evaluation locally. It will help you to make joint plans to build good practice locally and to address the challenges of low levels of understanding and commitment to JE.

- We recommend you schedule proper time at a JNCC for a discussion around re-establishing job evaluation best practice in your organisation.
- Reviewing job evaluation practice and capacity should be kept as a standing item on the JNCC agenda.
- It may take a while for capacity, skills and knowledge to be rebuilt again. The UNISON branch and local employer should plan for the long term and acknowledge that learning and development takes time.

Job evaluation requires a good level of partnership working. This means:

- proper time for staff side to engage in job evaluation - this should not come out of branch facility time but should be time off for partnership working
- joint ownership of decisions
- shared responsibility
- effective communication
- improved engagement
- common understanding
- working at establishing consensus decision making processes in panels.

Your local JE policy

You should have a job evaluation policy which has been agreed locally and should be regularly reviewed. The policy may contain some agreement on:

- joint management and governance of processes and workflow
- training and capacity building
- time off for attending panels (outside of trade union facilities time)
- panel composition and what should happen if panel members can't attend etc
- the process for submitting a re-banding claim

- process for settling disputes about job descriptions/additional information which aren't agreed between the line manager and the staff member
- the process for appeal
- at what point the grievance procedure will kick in
- how job evaluation will be administrated locally, this may include specific provision for job evaluation leads, a dedicated JE admin resource, consistency checking and the audit trail for job matching and evaluation decisions.

If job evaluation isn't being implemented properly then you can initiate a discussion about the policy and update it if necessary. Please contact the health group at UNISON if you would like some examples of good local job evaluation policies.

The right to time off for training and participation in job matching and evaluation panels is outlined in chapter 4 of the Job Evaluation Handbook.

“Employers should work in partnership with unions to ensure that members of trade unions and other staff organisations recognised for purposes of collective bargaining at local level are recruited, trained and released appropriately to participate in the operation and monitoring of the scheme. Such staff can, but do not need to be, accredited trade union representatives, but they should be employed by their local organisation and be nominated by and accountable to their local trade union branch and/or staff side.”

Time off for training and participation in the implementation and monitoring of the scheme locally is categorised as time off for partnership working and therefore should not be counted as part of agreed facility time.

NHS Staff Council staff side issued guidance on facilities time reporting in June 2018. It clearly states that partnership time is not facility time.

“The view of the staff side of the NHS staff council is that partnership time should not automatically be considered as facility time and therefore need not always be included in the reporting of facility time. Partnership time covers paid time spent by trade union representatives engaged in work that is distinct from member representation, consultation and negotiation, and is primarily a corporate benefit to the employer. This is because it gives them access to the representative's skills and expertise in functions that go beyond their representative role. Examples include (but limited to):

- Serving on job matching or evaluation panels
- Contributing to staff training events
- Taking part in policy development or service improvement projects
- Acting in a corporate role such as a board members, trustee, staff governor or employee director”.

Joint oversight of the delivery of job evaluation

The JE staff and management side leads should work together to review and monitor the implementation, delivery and consistency of the job evaluation scheme locally. The JE leads should report back to the JNCC about the work they are doing and report any issues of concern.

For job matching, evaluation and consistency checking to run efficiently and effectively an employer should provide adequate administrative resources.

- Panel sessions should be planned well in advance to allow practitioners time to arrange time off from their duties.
- Paperwork should be checked in advance to ensure the full range of information is provided to the panel.
- The partnership pair should work together to make joint decisions about work-flow to job matching and evaluation panels and joint decision making about priorities.
- Oversight of this process should include equal access to reviews in the case of changed jobs and ensuring that staff who have put in a request for their job to be reviewed aren't subject to unnecessary delays.

These steps should avoid panels wasting time or having to reconvene because they haven't got the right paperwork.

Building your branch capacity

Our survey showed that there are real capacity challenges in our branches around JE. Work around job evaluation tends to fall to a small group of active members. We need to plan to develop our capacity in this area.

UNISON panel members need not be accredited reps* but they should be nominated by, and accountable to, their local UNISON branch and staff side. All panel members should agree to undertake the relevant training undertaken by the NHS employer's organisation.

Identifying new people to get involved

A staff side panel member will develop a variety of skills:

- attention to detail
- asking questions and working with others
- able to be unbiased when making matching decisions.
- assist in keeping records of panel decisions.
- reporting back to their local staff side or union branch depending on local lines of accountability.

Networking and Buddying

Some regions are setting up JE networks to help panel members to keep up to date with changes to JE and to share best practice. Ask your regional health committee or your regional organiser if this is being planned in your region.

Job evaluation can often feel like a 'mystical' process and many practitioners are very experienced in the process. It takes practice to become familiar and confident with job matching and evaluation. Some branches ask their employer for new panel members to shadow more experienced panel members.

If you are developing new UNISON/staff side panel members in your branch, we recommend that you set up a buddying system. The buddy can be a point of support and advice for the new UNISON panel member. Panels make important decisions about pay bandings and new panel members need to know they are making the right decisions and it is OK to challenge bad practice if it occurs.

UNISON is also developing a regional buddying scheme primarily aimed at new UNISON JE leads. If you are taking on the role of a job evaluation lead in your area,

please ask your regional head of health if they can assign you a UNISON JE lead who can help you with some support or advice.

*The Scottish Terms and Conditions Committee requires staff side job matching and evaluation practitioners to be accredited reps.

Getting trained

One day organising around JE course

This is a one-day UNISON activist course which can be run at branch level or virtually. It aims to introduce you to the scheme and how the scheme should be governed locally. The course serves as an introduction to the main components of the scheme and helps build activists confidence to attend the NHS staff council training for JE practitioners.

Speak to your regional organiser or your regional organiser (education) to plan a course.

Encourage your employer to plan the appropriate training

There are several different courses which equip you to become a local JE practitioner and training for job evaluation is delivered in varying ways across England, Scotland, Wales and Northern Ireland. However, the content for the courses is the same.

Job matching – this is a two-day course which teaches practitioners how to accurately match jobs to the relevant profiles. The new virtual course includes teaching on the JE scheme, the role of job matching and practical exercises to ensure you can confidently participate in a job matching panel.

In England, the course should be commissioned by your employer. Your employer is required to provide you with time off to attend, a quiet space to participate in the course and a lap top if you don't have the right tech at home.

Some regional Social Partnership Forums in England have begun to co-ordinate around their training needs and have commissioned regional courses. This keeps costs down and enables regular training and appropriate refresher training.

A course can be commissioned to be run solely for your organisation or you can contact NHS Employers to see if a job matching course is running nearby and talk to your employer about accessing the course.

Your employer should fill in the online form [here](#).

Job analysis and job evaluation – this is a two-day course and is run as a national course. You are required to have completed the job matching course before attending this course.

In England, the employer is charged on a per person rate and the fee is slightly lower if you attend as a staff side/ employer pair.

Consistency checking – this is a one-day-course. You are required to have completed the job matching and job analysis and job evaluation course. The consistency checking course is essential if you are a job evaluation staff side lead.

There is more information on staff council delivered training in England on the [NHS employers website](#).

If you have any queries about training encourage your employer to contact **Employment Relations Support**.

If you want to access training in Scotland, Wales or NI please contact the relevant partnership body.

Tackling issues around poor JE practice

Consistency checking

Consistency checking plays an important role in ensuring that panels are working to the same standards and outcomes across the organisation are not skewed.

The Job Evaluation Handbook says:-

“In order to comply with equal pay legislation, it is important that organisations are assured of the quality and consistency of their job evaluation work. Consistency is vital to ensure equal pay for work of equal value and to reassure staff that their outcomes have been achieved fairly.”

Chapter 14 of the **JE handbook** gives advice on best practice around consistency checking and achieving quality and consistent outcomes.

Consistency checking should be done in a partnership pair and the use of a computerised system to record outcomes is recommended.

If consistency checking has slipped in your organisation your JNCC should focus on these action points:

1. Identifying partnership pairs who can take on the consistency checking.
2. Ensure that they are given proper time to do this.
3. Identify where the panel information is held and how this is regularly updated.
4. Ensure that panels are operating consistently and bad practice is tackled.

Desk topping

Desk topping is where panels do not physically meet and the paperwork is sent to a trained staff side practitioner with no robust and proper process for making joint decisions.

Panels meeting together are an important part of the job matching and evaluation process. There are risks in desk topping, for example, unconscious bias going unchallenged, a less thorough process, partnership working undermined and ultimately mistakes happening which affect our members' pay. It takes some time and effort to gather the evidence to request a review of a job, our members are entitled for this to be taken seriously and to go through a proper process.

If your organisation is desk topping:

1. Register your concern with your employer and outline the risks.
2. Ask for a reinstatement of panel meetings and suggest ways to build capacity.
3. Agree a plan to re-establish functional panels in the NHS organisation.
4. Submit review requests if there is concern that the process has not been properly followed.

Using only factors 2 and 12

The UNISON JE survey uncovered concerning practice in a very small number of branches, which related to panels only using factor 2 (knowledge, training and experience) and factor 12 (freedom to act). Shortcutting the process is very risky. Our members roles will not be properly matched. The complexities of a role will not fully be analysed and our members' pay may be affected as a result.

Job evaluation during mergers and reconfigurations of services

The speed of change, service re-configuration and mergers means that job evaluation capacity must be robust and implemented with vigour. The JE handbook outlines steps organisations must take in order to prepare for merging of organisations or other reconfigurations of services. NHS organisations maybe vulnerable to equal pay claims if there are significant differences in the way each constituent organisation has implemented the scheme.

Chapter 4 of the JE handbook looks at mergers and reconfiguration of health service organisations.

The guidance contained in the job evaluation handbook works alongside Annex 24 of the Agenda for Change agreement. NHS trade unions through the staff council negotiated a set of national principles to be followed at local level where workforce re-profiling is being proposed. These principles emphasise the importance of local engagement and the need to follow the procedures set out in the JE handbook to ensure that staff are not being asked to take lower graded jobs but, in effect, carry on doing the same job.

You can find this advice on the NHS employers website in the terms and conditions handbook, annex 24. [Guidance](#) on workforce profiling.

UNISON has developed [branch guidance](#) on NHS workforce re-profiling and re-organisation.

Outsourcing of job evaluation

Several consultancies have sprung up over the last few years which offer job evaluation and matching services and we know that a few employers have resorted to outsourcing job matching and evaluation during the COVID pandemic.

Recently, JEG has released some [new guidance](#) which reminds employers of the importance of working in partnership to develop job matching and evaluation capacity and that any outsourcing of JE should be done on a time limited and short term basis. Concerns have been raised with JEG about the quality of job matching outcomes and poor evidence provided for decisions made.

The guidance emphasises that the NHS job evaluation scheme provides mitigation against an equal pay challenge but only if it implemented correctly at local level. JEG recommends that NHS organisations work in partnership to promote the role of JE panellists, create a plan to build capacity locally and carry out a quality assurance check on any banding outcomes undertaken by external panels.

Using External Providers – JEG Guidance.

“The use of external or third-party providers to match or evaluate posts creates an inherent risk to the integrity of the JES in the organisation and must only ever be agreed in partnership for a short time limited period.

Evidence suggests the continuance of such arrangements increases the risk of poor job matching and evaluation outcomes, which could have far reaching consequences and exposes the organisation to equal pay risk. It should not therefore be relied upon as anything more than a short-term solution.”

Chapter 3 of the JE handbook deals with maintaining good JE practice. There are a number of options an NHS organisation should explore before JE is outsourced. This includes exploring with neighbouring NHS trusts whether they can help in the short term while capacity is built up.

The JEG handbook states that:-

“8.2 It is important that all long-term and temporary solutions to existing capacity issues are discussed in partnership. Any solutions should include an action plan aimed at identifying and solving capacity issues.

8.4 Use of third-party consultants - this is unlikely, in the longer-term, to support local organisations to develop sound and comprehensive internal processes. This is because it does not build or develop internal JE resources and knowledge within the organisation.

Consequently, JEG advises that using third-party consultants should as a rule be a short term solution, which is used when other options have been exhausted.

JEG recommends that use of third-party consultants be subject to the following criteria:

Any temporary agreement with a third party should have clearly defined time-limits and be measurable against set criteria. Partnership working underpins the NHS JE scheme, therefore it is important that any external panels can demonstrate that they work in partnership. The organisation must be satisfied that external panel members have been properly trained in the NHS JE scheme and understand the principles, which underpin it. All information relating to the panels and the decisions they make should be audited and handed over to management and staff side JE leads of the organisation. Ownership of the information will rest with the organisation and not the third-party consultancy. Arrangements should be in place to ensure that there are channels for dialogue to allow panel findings and rationales to be interrogated, understood and differences reconciled. Consistency checking should be carried out within the organisation, not by a third party. The organisation needs to give some thought to how requests for review will be managed.”

Working in Partnership

Some of the consultancies claim they are providing staff side reps. UNISON disputes this claim. The JE handbook states that *“it is important that any external panels can demonstrate that they work in partnership.”* The JE practitioners they are referring to may have experience of job matching and job evaluation but there is no provision for UNISON or other staff side reps to be accredited by their union to job match or evaluate outside of their own local employer.

The job evaluation handbook states

“Employers should work in partnership with unions to ensure that members of trade unions and other staff organisations recognised for purposes of collective bargaining

at local level are recruited, trained and released appropriately to participate in the operation and monitoring of the scheme. Such staff can, but do not need to be, accredited trade union representatives, but they should be employed by their local organisation and be nominated by and accountable to their local trade union branch and/or staff side. The Scottish terms and conditions committee has stipulated that staff side job evaluation/matching practitioners must also be accredited trade union reps.”

Questions that you can ask the employer about the outsourcing of JE.

- Was the decision to outsource JE made in partnership?
- How is the organisation ensuring that proper consistency checking is being undertaken?
- How does the organisation know that the training that the panel members have received is up to date? External consultants will not have access to the most up to date training materials.
- What steps have the organisation taken to build staff and employer side JE capacity?
- What is the plan to bring JE back in house, including how to access training for UNISON reps?
- How will consistency checking be completed?
- How will you ensure that the external provider is providing adequate rationales and evidence for banding outcomes?
- How will the employer prove that the third party provider have the necessary objectivity given that there is a commercial relationship

At the back of this guidance is a template letter to send to the chief executive or head of HR to formally request that job evaluation is brought back in house.

JEG recently published some advice about outsourced job evaluation in the NHS.

The JEG guidance emphasises that any outsourcing of JE to a third party provider should be on a short term basis:-

Chapter 3 of the JE handbook deals with maintaining good JE practice. There are a number of options an NHS organisation should explore before JE is outsourced. This includes exploring with neighbouring NHS trusts whether they are able to help in the short term while capacity is built up.

The JEG handbook states that:-

“8.2 It is important that all long-term and temporary solutions to existing capacity issues are discussed in partnership. Any solutions should include an action plan aimed at identifying and solving capacity issues.

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Case Studies – building good practice – it can be done

UNISON Bedfordshire Health Branch

Two years ago, the Bedfordshire Health Branch identified that they needed to do something to challenge poor job evaluation practice locally and to put in place a plan to re-establish best practice in two hospital trusts who were due to merge. The branch had experienced changes in the leadership of the branch, job evaluation skills and experience had been lost and panels were not sitting in either trust. Virtual panels were running with only one member of staff from another union trained out of four thousand staff.

At their regular joint branch development day the branch committee had identified recovering job evaluation capacity as an urgent need in both hospitals. However, none of the officers or stewards in the branch were trained as job evaluation practitioners and the branches were concerned that jobs were being matched by desk topping. The branch decided to raise these issues at local JNCCs and tabled the job evaluation health check as a basis for the discussion in re-establishing best practice locally.

The branch decided to use a joint branch development day as a training day to enable branch activists to fully understand the scheme, how it should be implemented, the language and jargon used in the NHS JE scheme and the arguments to use with their employer to support more investment being put into building JE capacity locally.

Ian Thomas, Branch Secretary of UNISON Bedfordshire Health Branch:

“The one day training run by UNISON helped us to understand the scheme more fully. Being new to the NHS job evaluation scheme we found it quite daunting to know where to start with re-building our capacity within the branch. This day helped us to feel much more confident to raise the issues at the JNCC and to know how things should be run locally.”

Following the ‘Organising around JE’ training the Bedfordshire Health Branch requested that their trusts work together to jointly commission an NHS Staff Council job matching training course delivered jointly by staff side and management side experts and organised by NHS Employers. The course was delivered for both trusts

prior to merger, therefore cutting down on costs and ensuring there was a joint understanding from both trusts on the requirements of the NHS JE scheme nationally.

Ian Thomas, branch secretary of the Bedfordshire Health branch said *“UNISON proposed running a joint job matching course between the two trusts. The job matching training was very useful. Afterwards staff side reps felt so much more confident in going to panels, asking questions and working in partnership. This was been important in advance of the merger of our two trusts. We have had discussions with both trusts to underline the importance of partnership time off to be involved in job matching, evaluation and consistency checking.”*

“COVID again presented real challenges in terms of delivering job evaluation locally, but we are in discussion with our trust to make sure we are implementing the scheme as outlined in the job evaluation handbook.”

Template Letter to Request for Job evaluation to be brought back in house

Dear

I am writing on behalf of staff side to formally request that job evaluation, matching and consistency checking processes are brought back in house.

We have concerns that the failure to build local job evaluation capacity will increase our organisations equal pay risk and damage staff morale and trust that their roles are being fairly and equitably banded.

A key principle of the NHS job evaluation scheme is the requirement to work in partnership to deliver robust job matching and evaluation locally. The Job Evaluation handbook states

“Use of third-party consultants - this is unlikely, in the longer-term, to support local organisations to develop sound and comprehensive internal processes. This is because it does not build or develop internal JE resources and knowledge within the organisation.

Consequently, JEG advises that using third-party consultants should as a rule be a short term solution, which is used when other options have been exhausted.”

Some external job matching and evaluation companies promise they can provide staff side reps to participate in panels on a partnership basis. There is no mechanism which allows any staff side reps to be accredited to carry out job matching or evaluation with any company providing job evaluation services. Therefore, these panels are not being delivered in partnership and the results are not robust and maybe challenged.

Any list of staff side practitioners provided by a job matching evaluation company or consultancy is not recognised by any staff side union.

The job evaluation handbook clearly states the definition of a local staff side job evaluation or matching practitioner as follows:--

“Employers should work in partnership with unions to ensure that members of trade unions and other staff organisations recognised for purposes of collective bargaining at local level are recruited, trained and released appropriately to participate in the operation and monitoring of the scheme. Such staff can, but do not need to be, accredited trade union representatives, but they should be employed by their local organisation and be nominated by and accountable to their local trade union branch and/or staff side.”

We therefore propose that we work together to build the skills, capacity and partnership working culture around job evaluation and to bring job evaluation and matching back in house. We believe [this document](#) is a useful basis for our discussions.

We look forward to working with you on this issue.

Yours Sincerely

On behalf of staff side unions.

Tools and Resources

The Job Evaluation Handbook

The JE handbook is a jointly produced and agreed set of detailed guidance.

Familiarising yourself with national profiles

Profiles are a convenient tool for job evaluation, to avoid having to evaluate every job fully. There are around 450 profiles which are regularly updated. You can find the national profiles here. Profile titles may differ from local job titles.

For more information on what profiles are for go here.

Job matching

A quick guide to the various stages of job matching.

Updating job descriptions

Job matching and evaluation depends on up to date, accurate and locally agreed job descriptions. **There is advice** on job descriptions in the job evaluation handbook, chapter 10, job descriptions and other job information.

Job Analysis Questionnaire (JAQ)

If a job doesn't match to a national profile then the job will go through local evaluation. The post holder and line manager need to jointly agree and complete **a JAQ.**

Local job evaluation

There is a step by step guide to local job evaluation on the **NHS employers website.**

Consistency checking

This is a crucial stage of job matching and evaluation. This is some JEG advice on the **key stages of consistency checking on the NHS employers website.**