

## **Timetable for roll-out of Agenda for Change**

The Shadow NHS Staff Council is continuing to gather the key lessons from the 12 'Agenda for Change' Early Implementer sites and the pilot project sites in Scotland.

We are now entering the period of review which it is agreed should be completed by the end of June.

Some unions will be holding further ballots, taking into account the outcome of the review of the experience in Early Implementers.

Further joint guidance will be provided around the end of April on the sequence of events leading up to national roll out, taking account of the results of these ballots

In the meantime, and without prejudice to further union ballots, it is essential that preparations for roll-out continue to avoid delay in transferring staff onto Agenda for Change and to ensure that agreed modernisation benefits (see Annex) are realised as soon as possible after roll out.

These are:

### **Partnership Arrangements**

- Ensure that all A4C plans are partnership based with proper and adequate staff representation and that all staff organisations are represented
- Assess the numbers of available staff representatives and take steps jointly to encourage additional representatives where there are shortages
- Agree the best use of representatives, from staff organisations and managers, so that workload is spread as effectively as possible

### **Job Matching and Evaluation**

- Ensure that arrangements are in place within your organisation to examine job descriptions and agree what families or groupings can be made
- Prepare, agree or amend job descriptions following the information which has already been circulated
- Identify the physical and administrative support which will be needed for job matching i.e. rooms, computers, filing cabinets, clerical support

- Identify the job matching panel members for training and planning purposes where this has not already been carried out
- Continue awareness training for managers, staff representatives and staff generally
- Communicate to staff what is going on, how they will be affected and how they can become involved in the process
- Plan the 'backfilling' arrangements to cover for staff who will be involved so that the impact on the normal service is reduced to a minimum
- Bring together trained matchers to check the suitability of JDs for matching purposes and refer back for revision if necessary
- Ensure that a robust administrative process is in place to log received job descriptions which should have a unique anonymous identification for tracking and auditing purposes.

This is essential to ensure that all staff are covered and that payroll will be able to effectively administer the transfer

### **Knowledge and Skills Framework**

- Review the current appraisal system – where is it working, where is it not effective, assessing how will it fit with the KSF
- Identify the KSF leads from staff organisations, managers and professional areas or directorates
- Plan the implementation and communicate this to staff
- Compare existing training programmes to see whether or not they fit with KSF

### **Terms and Conditions**

- Map the existing workplace in terms of what tasks are performed, where, when and by whom
- Ensure personal records reflect total aggregated service
- Identify posts on local terms and conditions of service and check against interim draft agreement
- Map the current unsocial hours patterns, on-call arrangements, working hours, holidays etc
- Map local variations from existing Whitley agreements

- Consider the implications of the above

### **Benefits Realisation**

- Assess the priorities for service and activity modernisation and innovation
- Ensure that the A4C structures link to other modernisation arrangements such as the new consultants' contract, the new GMS contract, the European Working Time Regulations
- Identify other service led innovations which can be facilitated by A4C
- Plan innovations in all areas of service delivery and activity in order to realise agreed modernisation benefits set out in the Annex to this document

The parties also recognise that there are a number of potential benefits in practice matching current posts to the national job profiles that have so far been prepared

This process enables employers, staff representatives and the UK Health Departments to test out the process of matching using the rules set out in the JE handbook and any agreed supplementary guidance, to identify and anticipate the range of issues that are likely to arise in national implementation and to improve the shared understanding of the potential impact of the proposed new pay system.

Where practice matching of this kind takes place, the parties recognise that the outcomes would not be able to be used in national implementation unless and until the outcomes had been re-checked at the time of implementation to establish that they remain valid, i.e. that there has been no change in the relevant profile and the individual has not changed jobs.

The parties recognise that some organisations are likely to be ready to proceed with practice matching earlier than others, taking into account the need to ensure that the preparatory steps listed under job matching and evaluation have been covered.

All parties support starting the process as soon as possible to build familiarity with the system.

But clearly, where practice matches are made before the end of June, an additional check should be made once the results of the review of early implementation are available, and if there has been any material change in the relevant profiles and guidance those matches should be reviewed.

## **Annex**

### **Extract from Agenda for Change Proposed Agreement**

(i) All parties agree to work in partnership to deliver a new NHS pay system which supports NHS service modernisation and meets the reasonable aspirations of staff. The signatories to this agreement will accordingly work together to meet the reasonable aspirations of all the parties to:

- Ensure that the new pay system leads to more patients being treated, more quickly and being given higher quality care;
- Assist new ways of working which best deliver the range and quality of services required, in as efficient and effective a way as possible, and organised to best meet the needs of patients;
- Assist the goal of achieving a quality workforce with the right numbers of staff, with the right skills and diversity, and organised in the right way;
- Improve the recruitment, retention and morale of the NHS workforce;
- Improve all aspects of equal opportunity and diversity, especially in the areas of career and training opportunities and working patterns that are flexible to family commitments;
- Meet equal pay for work of equal value criteria, recognising that pay constitutes any benefits in cash or conditions;
- Implement the new pay system within the management, financial and service constraints likely to be in place.