



# The NHS Knowledge & Skills Framework

## Frequently Asked Questions

### Table of Contents

	What is the KSF and how does it affect me? .....	2
<b>New!!</b> 1 Aug 2005	Implementation .....	4
<b>New!!</b> 1 Aug 2005	New pay bands .....	6
	Pay and pay progression .....	7
	KSF post outlines .....	16
	Developing NHS KSF post outlines .....	18
<b>New!!</b> 1 Aug 2005	The E-KSF .....	23
	The development review .....	25
	Personal development planning .....	28
	Learning and development .....	29
	KSF and wider HR issues .....	30
<b>New!!</b> 1 Aug 2005	Other KSF related issues .....	32

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*New sections are indicated above, new FAQs in existing sections are highlighted in the text.*

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## **WHAT IS THE KSF AND HOW DOES IT AFFECT ME?**

### **1. What is the KSF?**

KSF stands for the Knowledge and Skills Framework. It is a framework to support personal development and career progression within the NHS. It applies to all staff except Board members, Doctors and Dentists as they did not come under the Agenda for Change Pay Negotiations. It is one of the three key strands of Agenda for Change. These are:

- The NHS KSF and the development review process
- Job evaluation, and
- Terms and conditions.

### **2. What is the purpose of the KSF?**

The NHS KSF and the development review process is about lifelong learning. The Agenda for Change national agreement includes a commitment to introduce a system of annual development reviews and to create development opportunities for all staff. Everyone will have their own Personal Development Plan (PDP) – developed jointly in discussion with their manager or reviewer, and everyone will have an annual development review. The KSF is designed to ensure that staff are supported so that they can be effective in their jobs. It also gives them opportunities to progress and develop through their time working in the NHS.

### **3. What will the KSF do?**

The NHS Knowledge and Skills Framework is designed to do six things:

1. identify the knowledge and skills that an individual needs to apply in their job – this is described in an NHS KSF post outline
2. help identify any gap between the knowledge and skills needed in the job and the current knowledge and skills of the individual
3. if there is a gap help to identify the learning and development that is needed to close it
4. provide a system of pay progression across the service based on a single agreed system
5. help individuals develop throughout their careers
6. help in the development of services by linking what the NHS needs for effective service delivery with the knowledge and skills needed in specific posts and enabling the people in those posts to develop that knowledge and skills.

### **4. How does it affect me?**

Each NHS post will have a KSF outline - this describes the knowledge and skills that need to be applied in a post. At least once a year you and your manager will review how you are applying knowledge and skills against the KSF outline. From this you will both develop and agree a Personal Development Plan for you to guide your learning and development for the year ahead.

### **5. How will the KSF benefit me?**

The KSF will benefit you in a number of ways. Firstly the Agenda for Change Agreement gives a commitment to your ongoing learning and development throughout your working life. When you are first employed in any new post,

the development will focus on helping you develop the knowledge and skills needed for the post in which you are employed. When you are fully developed in your post, your development can focus on your longer term career – if you want to do this. You will also get regular feedback from your manager on what is going well and where there are areas for development and support to develop when services change. The principle of the system is ‘no surprises’ meaning that there is ongoing support for your development.

The KSF also shows the knowledge and skills that need to be applied right across the NHS. All KSF post outlines in an organisation will be available for all staff to look at – so you can use this to think about career development opportunities in your current type of work, or perhaps in other areas of work that you had not previously thought of.

**6. Will the NHS KSF have an effect on which pay band my post is placed?**

No. The KSF has no effect on which pay band you go onto. This is done through job matching and job evaluation.

**7. What sorts of things are covered by KSF?**

The KSF is made up of 30 dimensions which describe the main functions that the NHS needs to provide a good quality service to the public. There are **6 core dimensions** which apply to everyone who works in the NHS such as communication and quality. There are a further **24 specific dimensions** covering a wide variety of work. Some relate to Health and Wellbeing and related needs, some relate to Information and Knowledge, others cover Estates and Facilities, and then there are a number of more General dimensions including management, learning and development, and marketing.

**8. How is the KSF structured?**

Each of the 30 dimensions in the KSF occurs at four levels. The levels describe the increasing demands of how people have to apply knowledge and skills in the dimensions concerned. Attached to each level are a few indicators which give more information about how knowledge and skills needs to be applied at that level. The dimensions, levels and indicators are fixed and need to be used together to describe the requirements for particular posts. As well as the dimensions levels and indicators there are examples of application which show how the KSF might be applied to different NHS posts. The examples are just for illustration – they need to be changed to be relevant to the work you do locally.

**9. How does KSF fit with the rest of the AfC arrangements?**

The NHS KSF is the driver for career, service and pay progression within Agenda for Change. It is designed to inform your development in post and throughout your career. It is also designed to help NHS organisations ensure that the services they deliver meet the needs of the public and link this to what they need people to do in the service.

New!!

**IMPLEMENTATION**

1 Aug 2005

**1. How can we get the real change on the ground that Agenda for Change offers and meet the implementation timescales?**

Agenda for Change does offer real opportunities for change on the ground through creating the enabling conditions to support service development. The Agenda for Change timescales are to ensure that organisations move forward with implementation at a fair and equitable rate for all staff across the UK. Using the implementation of Agenda for Change, and particularly the KSF, to progress service development is ideal. KSF post outlines will need to be revisited over time as the needs of patients and the public changes and services need to develop in response. So if you cannot achieve everything that you want to now you will be able to come back and revisit jobs and KSF post outlines in the future.

**2. I think the KSF is really useful in addressing service problems, but other people don't seem to think of it in this way, what can I do?**

You are right, the KSF is there to help address service issues and improve services for patients and the public. One of the reasons other people might find this difficult to recognise is that they see Agenda for Change as a project or something they have been told to do. They do not perhaps realise that Agenda for Change is designed to help address a number of service issues and that the KSF particularly is about improving services through developing the main resource that the NHS has which is its people. Helping people make the links between the KSF and other issues in the service is something that can best be done locally on an ongoing basis, although we are also trying to help with this at national level through, for example, working on joining up policies and showing how the KSF will help in their implementation.

**3. Why do we have to have the KSF implemented this year if gateways do not need to be operational until 10/06?**

So that people have the opportunity to have a meaningful development review using their KSF post outline before the gateways become operational.

**4. We are having trouble working out how we can implement the KSF in partnership as we have very few staff-side reps in our organisation and those we do have are all working on job evaluation. Have you any advice?**

KSF post outlines can be developed in partnership in a variety of ways but the first principle is that those who actually do the job need to be involved in the development of the outlines for their post. This can be done through groups of staff meeting with their managers to jointly develop KSF post outlines. Alternatively one or two members of staff could work on the development of the outlines and this can then be shared with the wider group. Or if there are very great service pressures one individual could interview some post holders and managers, draft an outline and then take it back for checking. All of these approaches have advantages and disadvantages although evidence from implementation is starting to show that there are real benefits in the first method in terms of team development and ownership of the outlines. Every organisation should have a partnership group that is overseeing the implementation of Agenda for Change as a whole or for the KSF in particular. This group needs to sign off the completed outlines

checking that there is consistency across staff groups and in the organisation. If you are having trouble engaging your staff-side reps due to overwork, this is probably the group that it would make most sense for them to concentrate on – as using the approaches outlined above the work would involve frontline staff directly and hence be done in partnership. In addition your union learning reps could be used to support the implementation of the KSF and related learning and development.

**5. Do we need to develop our own local competences to implement the KSF?**

No definitely not. The KSF has been developed as a national framework for organisations and individuals to use and to negate the need for local competences. National work is being undertaken to link more detailed national/UK competences into the KSF so that when organisations, teams and individuals see the need for more detailed specifications than appear in the KSF they are able to access UK/national ones easily. This will enable organisations to benchmark their work with national standards of good practice and allow them to concentrate their resources in other areas such as the development of their staff. The linking of national competences and the KSF is freely available to everyone in the NHS through the e-ksf at [www.e-ksf.org](http://www.e-ksf.org).

**6. How does the KSF help staff who are already likely to develop and work hard?**

The KSF and development review process is more likely to be seen as a very natural approach by such people. One of its values is that it builds development in as a natural expectation for everyone in the NHS.

**7. We have found that we have a lack of appraisal skills amongst our reviewers meaning it is difficult to implement the KSF and development review process. What can we do about it?**

Every manager will have their own KSF post outline and Personal Development Plan. As the organisation needs its managers to implement the KSF and development review process, the easiest way to approach this would be to ensure that all of your managers who manage individuals and teams have the People Management Dimension G6 in their KSF post outlines and that this is prioritised in their own development. You might prioritise the development of KSF post outlines for managers and seek to fast-track their own development reviews to address this issue. You might also need to look at the structure of managers' jobs, and the number of people for whom they have line management responsibility, to ensure that they have sufficient time to undertake the development review process effectively.

**8. What can we do about reviewers who might be tempted to avoid difficult issues at gateways?**

It is important that your reviewers first of all realise that there are clear links between the KSF, its use in development review process and clinical governance within the organisation. The introduction of the KSF will mean that it possible to track where development needs have been identified and not addressed – and reviewers will be accountable for this. Partnership working is vital as well as it is not in staff's interest to cover up development needs – quality assurance of the implementation of the KSF should be carried out in partnership within organisations. It is also an area that should be

identified in individual reviewers' development reviews and PDPs. If your organisation knows that this is an issue for a number of reviewers perhaps setting up specific development opportunities in that area for would be a good way forward.

**New!!**

## **NEW PAY BANDS**

1 Aug 2005

### **1. With Agenda for Change we have found that a number of our staff groups are going onto the same pay band, can we give them two different post outlines reflecting their current grades?**

The majority of Agenda for Change pay bands are broader (have more incremental points) than previous NHS grades, which means that staff from two or more former grades (e.g. D and E grade nurses) may be assimilated to the same pay band.

When using the NHS KSF with posts that are affected by this, it is important to keep in mind three of the basic principles, which underpin Agenda for Change - Change, Equity and Partnership.

*Change* in role design and staff development is fundamental to the implementation of Agenda for Change in order to improve services for patients and the public. Whilst it is recognised that some would prefer to keep the status quo, the purpose of Agenda for Change and the way in which it has been jointly negotiated is to offer opportunities and support for development, with the expectation that all staff will develop continuously throughout their working lives. The broader pay bands allow staff to develop within their roles and receive yearly pay increases for longer without having to change jobs.

*Equity* must be maintained when developing KSF outlines. If separate KSF outlines for former D and E grade nurses are used after assimilation there is essentially no change from the previous Whitley system in terms of knowledge and skills applied (because E grade outlines would reflect a higher level of development). However there is a change in pay (as Ds and Es would both be on pay band five, and therefore now both have the opportunity to reach the same top increment). It is difficult to see how this would fit with the concept of equity. Outlines should therefore ultimately be developed for the new broader roles that fit with the new pay bands (e.g. for 'band five' nurses, rather than D or E grade nurses).

It must be emphasised that it is **not** possible to modify the gateway policy to artificially hold people at fixed points on the pay band (e.g. by not letting former D grade nurses go through the second gateway). It should also be recognised that when two former grades are placed on the same pay band those on the lesser grade will be assimilated at a lower increment that acknowledges they are likely to need longer to reach full development within that band.

Having different KSF outlines for the same professional/occupational group on the same pay band is possible of course when the people involved are required to do different things in the different posts. An example might be where some nurses have responsibility for rotas, staff management whilst in other posts there is a greater requirement for information collection and

analysis ie they are both working at the same level but have different roles. This does support the principle of equity.

*Partnership* is about working with all of the key stakeholders involved – staff, managers, and those responsible for the design and delivery of services - to identify opportunities for improving services and using the tools of Agenda for Change to support this. New roles, and the related KSF outlines should be developed and implemented in partnership, and a partnership approach should be used to manage this process of change. This should support all staff to see the opportunities for development and service improvement that the new system as a whole will bring.

In the National Library of NHS KSF outlines (at [www.e-ksf.org](http://www.e-ksf.org)) there are already some posts that clearly have a new pay band attached to them - such as the Band 5 Thoracic nurse from Papworth (which was developed with Grade D and E nurses to work out the implications for their role under the new broader pay bands). There is also a report on the KSF pages accessed via the NHS Employers website which outlines the issues raised at Papworth during the implementation of the KSF.

## **PAY AND PAY PROGRESSION**

### **1. What are the pay gateways?**

In most years pay progression will take the form of an annual increase in pay from one pay point within a pay band to the next as there is a normal expectation of progression. At two defined points in pay bands – which are called gateways – decisions are made about pay progression as well as development.

### **2. What is the difference between the two gateways?**

The foundation gateway always takes place one year after joining a pay band (regardless of incremental point). The second gateway is set at a specific point towards the top of pay bands – you need to refer to the KSF Handbook (or the Agenda for Change Agreement) to see where this is for the pay band that your post has been placed in.

### **3. What is the purpose of the foundation gateway?**

The purpose of the foundation gateway is to check that individuals can apply the basic knowledge and skills required from the outset in a post coupled with that needed after 12 months development and support.

### **4. Why do we need a second gateway?**

The purpose of the second gateway is to confirm that individuals are applying their knowledge and skills consistently to meet the full demands of their post – as set out in the full NHS KSF outline for that post.

**5. Does this mean that everyone is going to get a foundation gateway one year after being assimilated?**

No. The foundation gateways will not apply when staff are first assimilated across from the current pay system to the new integrated pay bands.

**6. If I move jobs after I have been assimilated and my new job is on another pay band, will I then have to have a foundation gateway in my new job?**

Yes you will have a foundation gateway in that new pay band. New staff appointed to the NHS will also have foundation gateways.

**7. What is the difference between a KSF outline for the foundation gateway and one for the second gateway?**

The foundation gateway outline for a post is a subset of the full NHS KSF post outline (used at the second gateway). As the foundation gateway focuses on the basic knowledge and skills that staff need to apply in the post and after one year of development and support, the foundation gateway outline for a post identifies these essential aspects. All of the dimensions that appear in the full KSF post outline have to appear in the foundation gateway outline. But the foundation gateway might:

- be set at a lower level of the dimension, or
- some of the indicators might be reduced for the foundation gateway, or
- there might be fewer areas of application for that post after one year, or
- it might be a combination of these things.
- The second gateway is based on the full KSF post outline.

**8. Does this mean that my Foundation Gateway could be made more difficult for me than for someone else in my post?**

No. Both Foundation and Second Gateways are based on KSF post outlines – these apply to the post and not the person. So anyone who is in that post would be reviewed against the same outline.

**9. I am a regulated healthcare professional who is subject to a preceptorship year, does this mean that I will have two foundation gateways?**

No. Within the first 12 months of employment you will have two development reviews. The first review after 6 months will seek to establish whether you are on track in your development towards the foundation gateway and if this is the case you will receive your incremental point. At 12 months your second development review will focus on the KSF foundation outline for your post and this will be your foundation gateway. When you pass through this foundation gateway, you will move up to the next point on the pay band. Like everyone else you will only have one foundation gateway and only one foundation gateway review.

**10. I am a midwife and I know that I will move to pay band 6 on the basis of accelerated progression. Will this have an impact on my foundation gateway review?**

No. Your preceptorship will assist you in developing and applying your knowledge and skills. Your foundation gateway review will take place when you have been in post for 12 months as with every other member of staff.



**11. Do some staff groups have three gateways ie a subset of the foundation outline for band 5 staff?**

No. There are just two gateways for all groups of staff. However all staff should have two reviews in their first year in post to support their development.

**12. Why do all KSF outlines need to be completed by October 2005? As the gateways only have to become active from 1st Oct 2006 there is no reason why someone could not have their initial development review against their agreed KSF outline by 30th Sept 2006 and subsequent gateway review by 30th Sept 2007 – or have I got that wrong?**

Yes you have! The focus of KSF outlines is posts and not the people in those posts and the implementation target focuses on getting all post outlines completed for the posts in your organisation.

**13. I have been assimilated above the second gateway, does this mean I don't need to bother with my KSF post outline?**

No. Your KSF post outline is just as relevant to you as it is to anyone else in that post. If you are assimilated above the second gateway, the pay progression gateway will not apply but you will still have a development review every year and this will include consideration of any development needs you have in the post using the KSF post outline as the basis. If you do not have development needs within your post that year, then there might be more focus on your career development. In many ways this will be no different from what will happen when the system has been operating for a while as individuals will need to maintain their knowledge and skills in a post as things change around them (eg legislation, technology). In the short term it is possible that more development needs might be identified for those above the second gateway in relation to their post - although no doubt that will depend on factors such as the appraisal system in place already and the amount of support these individuals have been given in their development in the past.

**14. My organisation wants to use other things, such as qualifications or other competences, for the second gateway rather than the NHS KSF, can it do this?**

No. It cannot do this. The National Agreement specifies that it is the NHS KSF, and it alone, that forms the basis of the second gateway. Qualifications and other competences, for example, may be used as evidence towards the achievement of the dimensions and levels if it is agreed and applicable to that post but they cannot be used in place of the NHS KSF.

**15. If you are very efficient and meet your full KSF post outline very quickly, is it possible to jump up your pay band and go through your second gateway?**

No. You will progress up the pay band in the same way. However if you and your manager agree that you are fully meeting the demands of the post as described in the KSF post outline, your learning and development can focus on your career rather than the post. You can, of course, apply for jobs in a higher pay band if they become available and the fact that you have developed quickly in your current post will no doubt be looked on favourably.

**16. If you are at the top of your pay band is your pay frozen?**

Your pay is not frozen as such, you are just at the top of the pay band for that post – exactly the same as would happen now. If you want to move onto the next pay band you would need to apply and be selected for a post on the next pay band.

**17. If my performance is better than my KSF Outline will I be moved up to the next pay band?**

No. The KSF Outline is what is required by your organisation from staff in your post. If you perform above the outline, it shows what you are capable of doing and you will be able to use this as evidence in applying for a new post, informing your career development etc.

**18. If I don't perform at the level described in the KSF outline for my post, what will happen to me?**

You and your manager will agree a development plan to help you learn and develop in those areas where you have specific development needs for your post. From the time you are appointed onto a pay band until you reach your second gateway having some development needs will not be considered unusual ie most people will need to time to develop in a post before they can apply all of the necessary knowledge and skills for that post. If at your second gateway however, you are not able to apply the knowledge and skills to meet the full KSF outline for your post and this has been discussed with you before, then you will not progress through the second gateway until you are able to do so. This will be the exception rather than the norm as it is expected that individuals will be given opportunities and support to develop over time. NHS organisations will still have capability procedures, as they do now, for situations when there are real issues.

**19. If an individual is not successful at a gateway review and their pay progression is stopped for a while, is their pay then backdated to the original incremental date, is their incremental date changed to the date at which they were deemed to have progressed, or do they wait until 12 months have passed?**

If it is agreed to defer pay progression as the individual has not applied the knowledge and skills detailed in the KSF post outline for that gateway, then individuals will stay on that incremental point until it is agreed that they have applied the necessary knowledge and skills. So, for example, if it takes someone 7 months to develop and apply the required knowledge and skills for that gateway, their pay will be held at that rate for the first seven months and then increased for the final 5 months of that year. Essentially their pay progression will resume from the point when they do apply the requisite knowledge and skills. Pay will not be backdated in these circumstances as the individual was not able to meet the required level of knowledge and skills.

**20. Can pay progression be deferred at incremental pay points other than gateways?**

Yes but only on exceptional grounds (as outlined in AfC Agreement 6.22 and 6.23). These exceptional grounds are no different than what has been previously available under Whitley.

**21. What happens with regard to gateways if someone moves to a different NHS employer but stays in the same pay band?**

The KSF is designed to be NHS wide across the UK so this means that one NHS employer should accept the position on the pay band from another NHS employer.

**22. What if the NHS KSF outline for my post has lots of dimensions at high levels, surely this will mean that I will be paid more?**

No. It is the job evaluation system that determines where your post is placed on the pay bands. Trying to alter the pay band you are on by arguing for more dimensions at higher levels in your KSF post outline will have no effect on your pay. In fact it is likely to make life harder as you will have to meet all of the dimensions and levels in the post outline to progress through the second gateway.

**23. But is there a relationship between what your KSF post outline looks like and the pay band you are on?**

Yes and no. Yes in the sense that people in the higher pay bands are likely to have more dimensions at higher levels in their KSF post outlines. This is to be expected as to be paid more people have to apply their knowledge and skills in increasingly complex and demanding ways. However the KSF post outline will not be used for job matching and job evaluation purposes. It is also possible that some jobs on the higher pay bands will have some dimensions at level 1 within the KSF outlines for that post.

**24. I'm confused about pay progression, how do the gateways and increments work?**

The KSF forms the basis of pay progression within your pay band. There are two gateway points within each pay band. The foundation gateway occurs after one year in post at whatever point you were placed on the pay band. The second gateway is at a fixed point towards the top of the pay band. The second gateway is about confirming that you can apply the knowledge and skills necessary when you are fully developed in that post as described in the KSF outline for that post. The foundation gateway is about checking after your first year in post that you are on the right track in your development and are being supported in post. The foundation gateway is formed from a subset of the whole KSF post outline – it sets out what you need to do in the first year of appointment to that post.

Other than that the incremental points within the pay bands are automatic. However you will have a review with your manager every year to see how you are developing and applying your knowledge and skills and to develop and agree a new Personal Development Plan. The reviews you get at gateways and at incremental points on the scale are very similar.

**25. Once I get to the top of my pay band will I automatically progress on to the next pay band?**

No. Just like now you won't automatically go on to a new pay band when you reach the top of your current one. You would need to apply and gain a post that is placed on the higher pay band. If you believe you have developed the job that you are in to such a significant extent that it might fall on to the new pay band, then you could seek to have the post job evaluated.

**26. Are the gateways a barrier to pay progression?**

No the gateways are not designed to act as a barrier to pay progression: they are there to ensure that there is a stronger focus on the development of essential knowledge and skills needed for NHS jobs. The Agenda for Change agreement makes it clear that there is a normal expectation of progression through both gateways as individuals move through to the top of the pay band in annual increments.

**New!!**

1 Aug 2005

**27. What happens if a member of staff is given their outline in December 2005 and only has 10 months to get through the second gateway, rather than a full year?**

The main reason for every post needing to have a KSF post outline by the end of 2005 is in order to give staff the opportunity for as much development as possible before the gateways become operational – which has to be done before October 2006. Individuals who have less than a year to develop and produce evidence towards the second gateway may need more intensive support from their organisation to allow them to prepare for the gateway in 10 months rather than a year. These issues need to be addressed in your local partnership planning and agreements.

**New!!**

1 Aug 2005

**28. If someone is reaching the second gateway in their pay band 12 months after assimilation, should we put in additional reviews to help them meet the gateway?**

The outcome of the first development review with the individual should help to identify whether s/he has any specific development needs in relation to the full KSF outline for the post - this forms the basis of the second gateway. From this a Personal Development Plan should be developed in partnership with the individual to address any learning needs that they may have. The extent of the PDP will be an indication of how much development the individual needs in the coming year to help them pass through the second gateway. Putting in additional formal reviews is unlikely to help the individual at this stage as their PDP should be setting out clearly what their development needs are. Additional learning and development and informal support is more likely to be of use to the individual.

**New!!**

1 Aug 2005

**29. If I am really effective in my job can I be fast tracked up a pay band?**

No. The pay points on pay bands are designed to apply every year, it is not possible to fast track up your pay band. However the KSF development review process will enable you to show what you can do in your current post so if a job becomes available in another pay band you could use your evidence for the new post. You are still able to apply for other jobs in different pay bands even if you have not gone through the second gateway.

**New!!**

1 Aug 2005

**30. When can people apply for jobs outside of their pay band?**

Whenever they want to. You do not have to wait until you have gone through the second gateway to apply for a job in a higher pay band, you can apply whenever you wish. As previously jobs will be open to competition. There is no automatic right of progression from one pay band to the next.

- New!!** 31. **Is it true that the Job Evaluation system decides which pay band you go on and then it is the KSF that decides which paypoint you are assimilated to?**  
1 Aug 2005
- No. It is the Job Evaluation system that decides on which pay band your post is put. Broadly speaking staff are assimilated to the next equal or higher paypoint in the new pay band (although you need to see the AfC Agreement para 9.12 for the full details of this). The KSF is about progression within and across pay bands once assimilation has taken place, it has no role in the assimilation process.
- New!!** 32. **Is it possible to reach the foundation and second gateway points simultaneously?**  
1 Aug 2005
- No. Foundation gateways occur when someone is appointed to a pay band for the first time and not to a post ie if someone moves to another job in the same pay band a foundation gateway will not apply if they had one in the previous post. Foundation gateways do not apply to staff who are assimilated onto Agenda for Change. There is an expectation that when people join a new pay band they will be appointed at a paypoint which allows time for their development within that pay band so the situation described above should not apply.
- New!!** 33. **How does the foundation gateway link to preceptorship programmes?**  
1 Aug 2005
- Foundation gateways take place at the end of the first year's employment on a pay band (except during assimilation – see answer above). If NHS organisations have agreed preceptorship programmes, then work will need to be carried out at local level as to how the two fit together. However one would expect that there was a close link between the content of the preceptorship programme and the foundation gateway outline for the posts concerned.
- New!!** 34. **Some departments are very keen to bring in gateways as soon as possible as they have not had incremental pay before, is this possible?**  
1 Aug 2005
- It is good that some departments are keen to get on with implementing the gateway system as soon as possible. However NHS organisations will need to think through carefully - and working in partnership with their staff representatives - how equitable this would be to all staff members in the organisation and how this satisfies NHS Terms and Conditions which states:
- “The gateway system will only become fully operational when an employer has put in place reasonable arrangements to ensure that staff have access to development reviews, personal development plans and appropriate support for training and development to meet the applied knowledge and skills required at the gateway concerned. This must be done for all posts covered by this agreement no later than October 2006.”*
- Terms and Conditions of Service Handbook, para 6.22*
- New!!** 35. **We are having trouble working out how we are going to get all our existing staff through the foundation gateway between October 2005 and October 2006, have you any advice?**  
1 Aug 2005
- Yes, stop worrying as you don't need to do this! Staff who are assimilated from the current pay systems to Agenda for Change with a year or more experience in their post will not have a foundation gateway. This means that the foundation gateways will only come into effect when they move to a new job. They will apply to new staff, and to those who change pay bands once the gateways have gone live. (See para 6.23 of the Terms and Conditions of Service Handbook.)

**New!!**

1 Aug 2005

**36. If staff are assimilated now will they automatically go to the next point next year?**

What happens to staff at assimilation will depend on the point at which they are assimilated. If they are at a point on the pay band where an incremental point exists then they will get this increment at the due time. Once the gateways are operational within an organisation, then they will be subject to normal operation of the system at the second gateway when they reach the gateway point on their pay band. (See *para 6.24 of the Terms and Conditions of Service Handbook*.)

**New!!**

1 Aug 2005

**37. If someone has their pay deferred at a gateway because they have not met the outline and they then go on say 9 months later to do so:**

- **is their pay backdated and is the date of successfully meeting the outline their new incremental date?**
- **do they retain their incremental date and receive another pay increase 3 months later?**

If someone does not meet their outline because, despite support from the organisation they cannot demonstrate the necessary knowledge and skills then their increment is deferred [T&C para 6.21, KSF p16] until they can demonstrate these (9 months later in the example). They will then get the extra increment each subsequent month [KSF p16, 34], but this will not be backdated, as for 9 months they were not applying the knowledge and skills required for the post and were therefore not entitled to the extra pay for those 9 months. When their normal incremental date comes round again (in this case 3 months later), they will go onto the next incremental point as usual, as they are now meeting their outline requirements.

The key points are that:

- the incremental date is not affected by the outcome of a KSF development review
- the increment due at a gateway point is a recognition that the KSF outline has been achieved by the individual, if this is not the case they are not entitled to start receiving the increment until they have met the outline
- the application of knowledge and skills cannot be backdated, so the increment is not backdated

This was set out in the proposed AfC agreement, and has not changed. It is important for people to recognise that deferred does not mean backdated.

If the outline cannot be met because, although the individual is committed to develop, the organisation has not provided the support agreed for that individual, then the increment will be paid, as it is not fair to penalise the individual for something that is not their fault. However the organisation must record the outcome of the review and ensure that the necessary support is provided as a priority. [T&C 6.24, KSF p34]. [Note: This is a change from Working Draft 6 of the KSF].

Organisations must agree, in partnership, robust arrangements for cases where development reviews cannot take place before an increment is due, and for cases where there is not agreement on the outcome of a review. [T&C 6.18, 6.24]. These locally agreed arrangements may include provision for backdating of increments if it is found that they have been inappropriately deferred.

**New!!****38. Where does the KSF sit with those who remain on local conditions?**

1 Aug 2005

NHS employees who have contracts based on local pay negotiations can decide to remain on those if they wish to do so. NHS employers can decide to use the NHS KSF as a development review / appraisal system for all staff regardless of the nature of their current contract and implement the KSF system as a development tool even if the individual has decided to remain on locally negotiated pay.

**New!!****39. Is it possible to defer pay progression at times outside of the gateways?**

1 Aug 2005

Within the KSF and development review process, the only times that a manager can defer pay progression is at either of the gateways. There are a range of safeguards that apply to this process and these are set out in paragraph 6.24 of the AFC:NHS Terms & Conditions of Service handbook. In addition and separate to the KSF gateway process, paragraphs 6.26 and 6.27 set out 'Exceptional Grounds for Deferral of Pay Progression'.

Para 6.26 states:

"Where significant weaknesses in performance in the current post have been identified and discussed and documented with the staff member concerned and have not been resolved despite opportunities for appropriate training/development and support, exceptionally pay progression may be deferred at any pay point until the problems are resolved."

It then goes on in para 6.27 to define what is meant by 'significant weakness'.

Both paragraphs 6.26 and 6.27 are not to be confused with the KSF. They are intended to address issues of competency and reflect the provisions that existed in a number of the individual Whitley Council handbooks before conditions were harmonised into the new T&C handbook (eg the Nursing & Midwifery handbook contained a paragraph on the 'Withholding of Increments').

**New!!****40. How does the KSF apply to individuals who are on secondment from their normal post in the organisation?**

1 Aug 2005

The most obvious way to address this is to develop a KSF post outline in partnership for the seconded post and then support the individual's development within the post. For example, if the post is for a union activist then the local partners to involve would be other union reps, managers and full-time trade union officials who between them would agree the relevant dimensions, levels and areas of application for the post. It is quite likely that the seconded post will require a higher level of some dimensions than the post in which the person is employed. For example, for union activists there might be a requirement for a higher level in Core 1 Communication (for negotiation, making presentations etc) than the post for which the person is employed. As well as the development of the KSF post outline, consideration will need to be given to how the individual will be supported in their development ie who will be their reviewer, who will provide evidence of them operating in the new post, and how their development will be supported.

## **KSF POST OUTLINES**

### **1. 1. What is a KSF post outline?**

A KSF post outline is based on your job description and sets out the KSF dimensions, levels, indicators and areas of application that are applicable to your post.

### **2. How will I know what my KSF Outline is?**

A KSF Outline will be developed for every NHS post. This development needs to take place in partnership between managers and representatives of staff. Each NHS organisation is responsible for deciding exactly how it will do this and the timing for every staff member. However by the end of October 2005 you should have a KSF outline for your post.

### **3. What about part-time staff and bank staff?**

Every member of staff in the NHS regardless of the hours worked, and bank staff whose pay comes under Agenda for Change, will have a KSF post outline for their job and be supported in achieving it in their development.

### **4. I have two part-time jobs in the NHS, does this mean I will have two KSF post outlines?**

Yes – you will have a KSF post outline for each post you undertake (how ever many hours you work in that post). The post outline describes the knowledge and skills you need to apply in that post when you are fully developed in that role.

### **5. How can I find out what the KSF is for my job as a neonatal staff nurse?**

There is no centrally determined KSF post outline for neonatal staff nurses – or any other posts in the NHS. The KSF is a common UK and NHS-wide framework for organisations to use to describe what they want a neonatal staff nurse to do. The KSF will help provide consistency across NHS organisations and this is helped by a National Library of KSF post outlines that organisations and individuals can use as a resource. However to ensure that organisations can deliver the services needed for their own local population, it is possible for organisations to agree in partnership between managers and staff that there are particular things that need to be done in a particular post (such as a neonatal staff nurse) which are not needed in that post in another organisation.

### **6. If the KSF is a broad framework, how does it help me in my post?**

KSF post outlines set out the knowledge and skills that need to be applied in a post in the NHS through using KSF dimensions, levels and indicators. To develop a full KSF outline for a post, it is necessary to describe the exact areas in which the KSF need to be applied for that particular post. For example, both nurses and speech and language therapists might use the same KSF dimensions related to Health and Wellbeing but they each have specific knowledge and skills. These need to be described in the areas of application in the post outline. The KSF dimensions and levels show broadly what the posts have in common and how these posts help in delivering services. However it is the detail in the areas of application that states the specific contributions of those posts to services. The KSF outline for the post in which you are employed will help inform your development through describing these links clearly for you.



**7. Can management try and impose KSF outlines upon staff?**

No. KSF post outlines must be developed in partnership either between individuals and line managers, or by a representative sample of the workforce and managers, or by KSF leads at Trust level working with post-holders and managers. This reflects the partnership that is the basis of Agenda for Change. There is also a very practical reason for doing this in partnership – it is only by involving people who manage the post and those who undertake it that it is possible to get a full understanding of a post.

**8. My managers say there isn't time to develop KSF post outlines in partnership as there are Agenda for Change targets to achieve. What can I do?**

Essentially this is a very short-term approach that will make it much more difficult and time-consuming next year. Experience from the Early Implementer sites has shown real benefits of involving people in developing KSF post outlines in partnership – both in people gaining a greater understanding of their own posts and also understanding how they fit into teams. If you have concerns, you should contact your staff-side representative locally.

**9. How will we know that the KSF outlines in my organisation are consistent?**

All organisations are setting up mechanisms for checking the consistency of KSF outlines within and across departments. This is likely to be led by the Agenda for Change KSF group in the organisation. In addition NHS organisations can use the KSF National Library found on the e-ksf ([www.e-ksf.org](http://www.e-ksf.org)) to check consistency with other organisations. KSF post outlines don't need to be exactly the same in different organisations or even for similar posts in different departments in the same organisations. This is because it is quite appropriate for posts to have a different focus to meet the needs of patients and the public.

**10. Can staff undertake KSF if not assimilated onto a pay band?**

There is no reason why the development of KSF post outlines and starting the development review process cannot happen before assimilation. However, each organisation needs to decide where it wishes to focus its energies first. Some organisations prefer to start with job evaluation and assimilation and then move onto KSF. Others are starting some staff groups with one and other staff groups with the other and then changing over. By October 2005 everyone employed in the NHS should have a KSF outline for their post and have had their first review and Personal Development Plan informed by the KSF. This is because pay progression has to be fully in place in the service by October 2006 and staff need to have had time to develop their knowledge and skills before they reach a gateway.

**11. What if the NHS KSF is not able to describe my post / a post in my department?**

This is extremely unlikely. The NHS KSF has been tested across the service with a wide range of staff groups. In addition detailed work has been undertaken on mapping existing competences to working drafts of the NHS KSF. As a result the NHS KSF has been improved and is now designed to be suitable for all staff groups. If you have real concerns you should contact the KSF lead in your organisation, and if they are unable to help they can make contact with the national team.

**12. What if I can't see my job clearly in the dimensions?**

As the NHS KSF is a broad generic framework this is not surprising. It is impossible for such a framework to use the terms and titles that everyone in the NHS uses on a day-to-day basis. You might find the 'Where to find it' guide in Appendix 3 of the KSF Guidance book a useful starting point for finding where your work fits. If you cannot find it there, then talk to someone who has the lead on the KSF in your organisation as they should be able to help you.

**13. What if my organisation wants to add on its own dimensions and/or use its own competences instead of the NHS KSF. Can it do this?**

No. The National Agreement, which has been carefully negotiated over a number of years, relates to the use of the NHS KSF as the basis of career and pay progression. If your organisation finds consistent problems with using the NHS KSF for one or more staff groups then it should alert the Staff Council to the problem. It cannot just change the National Agreement locally.

**14. What if I have a National / Scottish Vocational Qualification at level 3. Does this mean that all of the dimensions for my post will be at level 3?**

No. NHS KSF post outlines identify the dimensions and the levels that are appropriate for different posts in the NHS. This means that posts will often have dimensions at a number of different levels. For example, a post might have the vast majority of the relevant dimensions at level 4, and then also have another dimension at level 2 and one dimension at level 1. The levels in the KSF have been designed specifically for the NHS – they do not equate to levels in any other frameworks.

**DEVELOPING NHS KSF POST OUTLINES****1. What if current job descriptions and information on the post does not cover some of the core dimensions, can they be left off?**

No. The core dimensions must appear in the NHS KSF outline for all posts. The core dimensions in the NHS KSF form a key part of work in the NHS and this is reflected in the Agenda for Change National Agreement. All 6 core dimensions have to be in every NHS KSF post outline at least at level 1.

**2. What if individuals hold responsibilities in the organisation that are wider than their specific work posts, for example, trade union representatives or supervisors of midwives?**

NHS KSF post outlines describe what is needed in the post in which people are employed, they do not describe the specific knowledge and skills that individuals bring to that post or the additional knowledge and skills they develop by undertaking other roles – if they have these additional knowledge and skills then these could be shown when individuals are reviewed against the demands of the post.

- 3. If two existing Whitley grades (eg D and E grade nurses) end up on the same pay band will they both go through the second KSF gateway? There are rumours that D grades will be prevented from going through the second gateway.**

All posts on an Agenda for Change pay band will have a KSF post outline. Everyone in that post will have the opportunity to develop their knowledge and skills to go through the second gateway regardless of their previous Whitley grades. If members of staff are placed on the same pay band and have the same post outline then they will have the same Second Gateway.

- 4. Is there any backfill money available to support service delivery whilst we are developing KSF post outlines?**

It is unlikely that backfill money will be available but you need to talk to the KSF Lead in your organisation about any particular arrangements that are being made locally.

- 5. Is there an average time that it takes to produce KSF post outlines?**

No not really as it depends on a number of factors such as how clear people and the organisation are about what is needed in that post, the information that is already available on it, its complexity etc.

Lessons from the Early Implementers are that people learn best about the KSF through using it and that a good way to get going is to give people a short introduction and then get them involved in developing a post outline. It is also helpful to let people practise on developing an outline for a post that they know nothing about as then they don't have an emotional tie to that post. Once people have got used to using the KSF – and this has been found to be user-friendly – then the process can be quite quick in getting some nearly complete drafts produced. These then need to be checked by all the relevant people before being finalised.

- 6. We have been working within and assisting development of an integrated multidisciplinary Intermediate care service for the past year which involves some really innovative approaches to work. We have been unable to find any profiles which match or resemble our role. Please could you advise us of the best way forward?**

The first thing to establish is whether you mean KSF post outlines or Job Evaluation Profiles. For Job Profiles you would need to find the profiles that may match your posts in Job Evaluation Terms (eg Community Nurse, Specialist Nurse) and take it from there – you will need to seek further advice on this from the JE team.

If you mean KSF post outlines, you could look on the National Library housed on the e-ksf ([www.e-ksf.org](http://www.e-ksf.org)) to see if there is any similar post that you could look at to give you some ideas on what others have done. However if you have a really innovative post you are probably better using the KSF handbook – with some help from your KSF lead – and developing KSF post outlines for this post from scratch.

**7. Did Early Implementer sites use all of the methods outlined in the training programme to develop outlines and how effective was each method?**

Yes the guidance in the handbook was developed with the early implementer sites. The key thing is to find a method that works for you and your organisation. You don't have to use only one method in your organisation, different methods might be more appropriate for different staff groups.

**8. I have heard there is a National Library of KSF post outlines, what is it and where is it?**

The KSFDG is making a range of KSF post outlines, developed by NHS staff and managers, available as a resource to the service through the KSF National Library. This is available on the e-ksf, the computerised version of the KSF, which is available free to the NHS. Visit: [www.e-ksf.org](http://www.e-ksf.org) This is not like the British Library – it will not contain every KSF post outline in the NHS. Nor is it like the job evaluation profiles. The library is there as a resource for organisations to use if they wish to do so – there is no compulsion to use the outlines held. The National Library is also there to help organisations take the first steps to the development of their own KSF post outlines. It is vital that organisations, through managers and staff working together, identify the particular demands of the post in that organisation so that the KSF post outline can truly inform individuals' development.

**9. How do I get posts into the National Library?**

You can submit posts that you have developed in your organisation for consideration for the National Library either online through using the e-ksf or you can send your outlines by email to the Pay Modernisation Unit - [PMUadmin@dh.gsi.gov.uk](mailto:PMUadmin@dh.gsi.gov.uk). The outlines submitted will then be evaluated by the KSF Development Group against three criteria: the outlines must have been developed in partnership, include detailed areas of application for that post and broadly make sense in terms of dimensions and levels.

**10. My organisation is planning not to develop its own outlines but just take the outlines from the National Library, can it do this?**

No it cannot and it would not be a wise thing to do anyway. First of all it is highly unlikely that the National Library will ever contain all the post outlines that an organisation needs for its staff. Secondly the National Library will contain outlines developed in other organisations for real posts in those organisations – no two organisations are ever likely to need exactly the same things from a post. Thirdly the purpose of the KSF is to inform individual's personal development in post and throughout their careers, and to inform service development. Taking outlines from other organisations and using them for posts within your own organisation without any thought would not benefit staff or services.

**11. Why aren't there more KSF post outlines in National Library?**

The National Library consists of real outlines that are developed for real posts in local organisations. Whilst the KSFDG has been trying to work with groups to stimulate the development of outlines, it is dependent on local organisations being prepared to share the work they have done with others. The number of outlines in the library will not increase until organisations start to share their work. If every organisation put in one outline, there would potentially be 600 post outlines in the Library in a very short space of time.

**12. When you develop full KSF post outlines do you have detailed areas of application for each indicator?**

No. You will find that some indicators do not need to be further described in the detailed areas of application for a post. Also some areas will cover more than one indicator. You need to make sure that what is in the areas of application is sufficient to describe what is needed in that particular post.

**New!!**

1 Aug 2005

**13. We are having trouble getting some staff groups engaged in the development of outlines because they say this is being done centrally, is this true?**

Yes and no. The KSFG has identified that to support the implementation of the KSF across the service, it would be helpful to try to give additional support to those staff groups who are less well represented across the NHS or where specific issues have been identified. Working with various partners, the KSFG has facilitated the development of KSF post outlines for some types of posts at national level. This work is not designed to develop national KSF post outlines. Nor is it designed to prevent or stall local organisations from taking forward their own work in these areas. It is to support local processes. Once these KSF post outlines have been developed locally, they will also be added to the National Library.

The National Library of KSF post outlines is not like the British Library – it will not contain every KSF post outline in the NHS. These outlines are also not like the job evaluation profiles. The library is there as a resource for organisations to use if they wish to do so – there is no compulsion to use the outlines held. The National Library is also there to help organisations take the first steps in the development of their own KSF post outlines. It is vital however that organisations, through managers and staff working together, identify the particular demands of the post in that organisation so that the KSF post outline can truly inform individuals' development. We need everyone to move ahead at local level with the development of their own KSF outlines containing good areas of application for that post as this will inform individuals' development in that post.

**New!!**

1 Aug 2005

**14. Some people are confusing Job Evaluation with the KSF, what can we do?**

The Job Evaluation process and the KSF process are completely separate. The purpose of job evaluation is primarily to measure jobs and place them on the new pay bands. The primary purpose of the KSF is to inform people's development in their current posts and throughout their working lives. It is important that people understand that the dimensions and levels within a KSF post outline need to be realistic and achievable and capture the knowledge and skills that need to be applied in the post concerned. By the time individuals reach the second gateway they will need to have provided evidence for everything in the post outline, and managers will need to have helped them develop to do so. Of course, progressing through the second gateway does not mean automatic progression up onto the next pay band although it does take people on to the top of their current pay band.

**New!!**

1 Aug 2005

**15. If someone's KSF post outline is modified due to their disability under the Disability Discrimination Act, can this take them down a pay band?**

No as the post will have been evaluated using the Job Evaluation scheme as being on a certain pay band and the KSF does not affect which pay band a

person is on. Modification of the KSF post outline is in recognition of how that post needs to change to meet the needs of that particular individual consistent with DDA legislation. The post would still be on the same pay band.

**New!!**

1 Aug 2005

**16. Some of our staff groups have an explicit statement in their Job Description that they are expected to be fully competent in their posts after one year, does this mean that we don't need a Foundation subset and a Foundation gateway won't apply?**

No. This might be what happened for these staff groups historically but the Agenda for Change Agreement is based on the belief that all staff will need time to develop their knowledge and skills and apply this in their posts particularly that many posts are now expected to be more flexible than in the past. Perhaps the best way to take this forward would be to revisit these job descriptions in the light of the other purposes of Agenda for Change such as service modernisation and consider how the posts themselves might develop to improve services to patients and the public. This should then provide an opportunity for both developing the posts to meet service needs and the individuals who are employed in those posts.

**New!!**

1 Aug 2005

**17. I have been told that we should develop KSF outlines from the job descriptions, but in many ways that seems the wrong way round as the KSF outline would help to develop better job descriptions. What should come first?**

Job descriptions are one of the starting points for the development of KSF post outlines but they are very unlikely to be sufficient in themselves to develop post outlines. You will need to involve post holders and their managers to really understand the post and develop KSF outlines that are good enough to inform individuals' development in that post. Both job descriptions and KSF post outlines should be live documents that develop over time as jobs and services change. So you are right in saying that one should inform the other – however you have to start somewhere!

**New!!**

1 Aug 2005

**18. Why aren't there more outlines in the National Library?**

The purpose of the National Library is to share local good practice with others. It has taken a while for organisations to feel they have outlines to share. However more outlines are now being submitted to the National Library and so it is now becoming a more valuable resource. It is the responsibility of all NHS organisations to populate the national library with their locally-developed outlines.

**New!!**

1 Aug 2005

**19. How can we build the modernisation agenda into KSF outlines?**

The way organisations have done this is through using the introduction of Agenda for Change as an opportunity to work with staff to look at how services can be improved and hence the implications for their jobs and also individuals' development. The KSF and development review is very useful in this as with its focus on development it helps individuals to see that although their jobs might need to change they will get support for that change. By involving staff in how services can be improved (an indicator in Core dimension 4) it is also more likely that they will own any changes and these will make sense to them.



**New!!**

1 Aug 2005

**20. Is it possible to use qualifications as the basis of the second gateway, (we would like to make the achievement of certain qualifications as mandatory within a certain period of being in post)?**

No. This is because the KSF is about the application of knowledge and skills at work not about the achievement of qualifications and awards. If your organisation wishes to make the achievement of awards mandatory after a certain period in post, this should be done through other agreements, not the KSF.

**New!!**

1 Aug 2005

## **THE E-KSF**

**1. I can't log onto the e-KSF, what can I do?**

The first thing you need to do is talk to the KSF lead in your organisation to find out whether all staff have been given access to the e-KSF yet. S/he should be able to update you on where your organisation is on using the e-KSF and how you can access it.

**2. Our Director of Finance is not sure about the robustness of the e-KSF and how well it is supported, is there information I can give about this?**

The e-KSF is supported by all four UK Government Health Departments. In Scotland a decision has been made to make the e-KSF mandatory so it will be used by all Scottish NHS organisations and hence supported over time. In England and Wales there has been ongoing joint work between the KSF Group at national level and the Electronic Staff Record team to ensure that what is currently available on the e-KSF continues to be available to the service. This will either be through the use of the ESR or through the e-KSF or through an integration of the two. You should be able to reassure your Director that for the successful implementation of Agenda for Change it is necessary to have available for the service what is in the e-KSF and this will be maintained in one form or another.

**3. Are you undertaking quality assurance of the e-KSF centrally as we have been told that if we have any problems we should report them to the e-KSF team?**

Yes there is central and ongoing quality assurance of the e-KSF through the KSF Group of the NHS Staff Council. The reason you are asked to report issues to the e-KSF team is they are often able to sort it out directly with you without the need for others to be involved. Where there are ongoing problems or the issues raised relate to policy questions, then the KSFG become more directly involved. So if you have some one-off issues or questions then please take them to the e-KSF team through the appropriate channel on the e-KSF. If however you feel that you need to talk about any issues with the e-KSF which cannot or should not be answered by them, then contact Gill Rose at the Pay Modernisation Unit of NHS Employers who is project managing the e-KSF. Gill can be contacted at: [Gill.Rose@nhsemployers.org](mailto:Gill.Rose@nhsemployers.org).

**4. We would like to use the e-KSF as a means of sharing draft KSF outlines but we haven't worked out how to do this, is it possible?**

The e-KSF is really designed to share outlines once they have been approved. This is because we have had feedback from users that they would rather not have their 'work in progress' accessible to other people. However it is possible to create an outline on e-KSF and, before marking it as approved, save it as pdf document and email it as an attachment to other people in the organisation (or beyond) or print it out and share it. The e-KSF team are working on a "draft outline sharing" feature to allow users and administrators to access others' outlines when they are in draft and unapproved form. This is not a main priority for the e-KSF at present so it would be better to adopt the process described above in the meantime.

**5. Is there any point in implementing the e-KSF if the ESR is coming in?**

Yes. The e-KSF was originally designed as an interim solution prior to the implementation of the ESR in England and Wales and there are ongoing discussions between the ESR team and the KSFG. This will ensure that either the two systems fit together well or that the e-KSF becomes part of the ESR. There is a need for an electronic KSF that is available to the service. So if you implement the e-KSF now it will prepare you and everyone else in the organisation for the future whichever tool the KSF sits in.

**6. Can we get any additional money to develop people's IT skills so that they can use the e-KSF?**

There is no additional funding for NHS organisations to develop skills specifically to use the e-KSF. However there are a number of other sources of funding that you might be able to tap into. For example, it would be worthwhile investigating the European Computer Driving License (ECDL) as one possible source of funding to develop people to use the e-KSF. Talk to your training and development department to see what suggestions they have for funding in this area.

**7. We are having problems with getting people interested in using the e-KSF particularly if they have low IT skills, what can we do?**

The e-KSF can be used as a way of encouraging people to develop IT skills as it is about their own development and in their own interests. Alternatively you might find that you need to find other ways of interesting people in IT – like including it in their personal development plan – with the use of the e-KSF being one of the pay-offs that this can bring. It is an easy tool to use and does not require a high level of IT skills.



## **THE DEVELOPMENT REVIEW**

- 1. What if the individual member of staff and their reviewer agree that the individual is not applying their knowledge and skills across all of the demands of their job but is concentrating their efforts on one or more areas to the detriment of others?**

Then the individual and their line manager need to agree how this will be addressed in the year ahead – and identify whether this is happening by the individual making the choice or it is under management pressure to deliver in some areas more than others.

- 2. What if the individual and their reviewer are unable to reach agreement?**

If the individual member of staff and their reviewer cannot agree, either one has the right to seek support on an informal local basis from a third party, such as the line manager of the reviewer, someone from the human resource department, or a trade union learning representative. This third person may seek further information from either the reviewer and/or the individual member of staff. They will look at the information from both and come to an objective decision that is non-discriminatory. If the informal process cannot address the problem, then the individual member of staff can take their case through local grievance procedures. If pay has been withheld, then if the individual's case is upheld pay will be back-dated to the point at which pay progression should have occurred. This should be the exception rather than the rule as one of the principles of the system is that it is based on 'No Surprises'.

- 3. What happens if my manager and I don't agree?**

The KSF system brings managers and staff closer together through regular feedback; this in itself will reduce the chance of disagreements. If you and your manager cannot agree, support and advice is available to you both from your trade union and human resource representatives. If it is still impossible to get agreement, then you can use the grievance procedure available in your organisation.

- 4. What if there are issues in the work team that are having a negative effect on the individual's work?**

First of all it is advisable for the individual to talk to his/her manager outside of a KSF development review. If during the development review process the reviewer realises that this is happening then they will need to address the issues in the team either directly or through seeking support from others.

- 5. What if there are organisational issues (eg with resources) that are adversely affecting the individual's work and/or their learning and development?**

The reviewer will need to note this in the review documents and address the issues directly or through taking them up with other managers as the same issues are likely to be affecting other people in the organisation.

**6. What should be the ratio for reviewer/reviewee – is it 1:6; 1:10 1:12.?**

It is up to organisations to decide what is most effective for its managers and staff. However thoughtful consideration needs to be given as to the amount of work there is in supporting individual's development and undertaking development reviews. Whilst there will be no limit centrally, it will be very difficult for a reviewer to take responsibility for a large number of reviewees over time. Organisations should give consideration as to who might be best placed to review the work of other staff and develop a number of people's skills in this area. It is worth looking at the Modernisation Agency website to find out what others have done.

**7. What if the person has developed extra skills that are not required in the post?**

The review at the second gateway focuses on the NHS KSF outline for the specific post in which the person is employed and the pay band on which that post is placed. Additional knowledge and skills that the individual has developed should be noted in the review form and feed into the personal development planning.

**8. What if the NHS KSF post outline has been modified in response to an individual's disability to be consistent with the requirements of the Disability Discrimination Act?**

This should have been agreed in partnership within the organisation and the modified outline at the foundation and second gateway should be used for this individual.

**9. What if the individual has not provided sufficient evidence of applying their knowledge and skills against the KSF post outline to pass through a gateway?**

If there is a joint decision that the individual has not yet provided sufficient evidence because s/he needs to undertake further development, the reasons for deferral should be clearly identified and documented together with those aspects of the NHS KSF outline still to be achieved. A date for reviewing this position should be set. Once there is agreement that the individual can meet the NHS KSF post outline then pay progression resumes from that date.

**10. What if the individual has been unable to develop and apply the knowledge and skills required in the NHS KSF post outline due to organisational issues?**

If there is a joint decision that the individual has not yet provided sufficient evidence because the organisation has not been able to meet its responsibilities for supporting development, then such development should be arranged as soon as is possible. The individual will automatically progress through the gateway. This situation, like others, should be clearly recorded.

**11. Can an organisation restrict the number of individuals who can progress through a gateway at any one time?**

No. Organisations are not allowed to do this and it is fundamentally against the letter and the spirit of the National Agreement. Organisations will be monitored to ensure that all staff have the opportunity to progress through gateways at the time they should.

**12. What if there is a disciplinary problem?**

Disciplinary problems must be dealt with separately from the NHS KSF and the development review process. The Terms and Conditions handbook states the exceptional grounds for deferral of pay progression.

**13. What if an individual moves to another job in the NHS?**

If individuals move to another post on the same pay band then they will be expected to apply the necessary knowledge and skills for that post as described in the NHS KSF post outline. A foundation gateway will not be applicable as the person is within the same pay band.

If the individual moves to another post in a different pay band then a foundation gateway for that post will apply after 12 months in post.

**14. What if the individual agrees to retrain in a different area of work for wider service or operational reasons?**

If this has been done with the explicit agreement of the employer concerned<sup>1</sup>, then the individual's pay should be protected until the individual has had a reasonable opportunity to complete their retraining and progress to a point where pay protection is no longer required.

**15. I confess to being a bit confused. It is said that by the time you reach the top of your band you should have met fully your KSF outline. As most bands have 9 incremental points - does that mean you can take 9 years to be fully functioning in your post? Even if we take this at the second gateway (positioned at about point 5-6) that is still a long time to take to become fully competent.**

The KSF and development review process recognises that people need time to develop fully to meet the demands of the post. The second gateways have been set at points that were considered to give people a reasonable time to develop fully in the post. Some people will not need that long but others will – all will need to focus first on meeting the full demands of the post before considering their own personal career development.

**New!!****16. How do you define the evidence that is needed to prove a KSF post outline has been met?**

1 Aug 2005

Some organisations have started work on identifying the evidence that people might use to show they have met their post outlines, although this is not a requirement of Agenda for Change. It is important that if this work is done locally, the evidence is not specified so tightly that someone who then comes up with a valid form of evidence which had not been thought of before is excluded. The development review process should not be made into a paper-chase rather it should focus on having the minimum possible amount of evidence that managers and staff can agree is reasonable for showing the application of knowledge and skills.

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<sup>1</sup> Note 'explicit employer agreement' does not cover those cases where employers have agreed to reemploy someone following redundancy.

**New!!**

1 Aug 2005

**17. How often do we need to ask people to update evidence against their KSF outline (e.g. if we are introducing a revised Patient Information System can we ask people to show evidence of using this)?**

This will depend on whether it is necessary to make changes to the KSF outline for a post (e.g. to the areas of application in one or more of the dimensions). It is expected that any changes to a post outline would be agreed in partnership. In terms of an individual's personal development review, then evidence for how they are applying their knowledge and skills will be gathered over time as they undertake their work. So, as long as you have fairly recent evidence that the individual can apply their knowledge and skills as described in the KSF post outline then this should suffice.

## **PERSONAL DEVELOPMENT PLANNING**

**1. What if an individual is not currently seeking to develop their career?**

Provided that the individual is able to apply their knowledge and skills to meet the demands of the post for which they are employed – which means that they will be able to pass through the second gateway at the due time – this is fine. PDPs for these individuals are likely to focus on enabling the individual to maintain their current knowledge and skills and develop these to meet any changing requirements.

**2. What if the PDP is not achieved within the agreed period of time due to unforeseeable circumstances?**

PDPs should be realistic and reflect the fact that individual's development might take a number of years. The non-completion of a PDP should be seen as an exception rather than the norm. However occasionally it will be possible to carry over part of the PDP to the following year.

**3. What if the individual member of staff and their reviewer are unable to agree on the content and focus of the PDP?**

The PDP is part of a joint commitment to the individual's development within the organisation. Some reviewers might need support in developing their own knowledge and skills in development review and planning. Some individuals might need support to enable them to be realistic about what the organisation can offer them personally given the commitments to all other employees in the organisation. Others will need help to realise that development can be appropriate for them. If it is impossible for a reviewer and an individual member of staff to reach agreement on the content and focus of an individual's PDP then they can seek support. This might be from, for example, a trade union learning representative, or someone in the human resource department, or the reviewer's line manager, or a professional supervisor.

**4. Is there an appeals process?**

No but if things get really difficult the individuals can take issues through the normal grievance procedures within the organisation.

## 5. Can staff undertake personal development before the second gateway?

All development should be linked to the needs of the individual so in that sense all development is personal. Personal Development Plans should enable individuals to either maintain their current position or develop beyond their current post. It is important to prioritise the learning needed for the full KSF outline for the post (ie the second gateway).

## LEARNING AND DEVELOPMENT

### 1. Will I need to go on a lot of courses to meet my KSF Outline?

No. Having attended lots of courses does not mean that you can demonstrate how to apply the knowledge and skills needed in your post. There are lots of different ways of gaining skills and knowledge in the workplace as part of your everyday job eg through self development activity, job shadowing, watching others, learning as you practise. You and your manager will agree a development plan that covers a wide variety of approaches to learning and development.

**New!!**

1 Aug 2005

### 2. Some of our staff are concerned about funding for training and development; will there be any?

The Government is making considerable investment in NHS pay and reward systems. The KSF and development review process is about making a commitment for the first time to the development of every member of NHS staff. However this isn't just about people going on training courses but looking at alternative ways that people can learn knowledge and skills and how to apply them in their work. This could include learning on-the-job or through shadowing, mentoring, e-learning etc. There will be monitoring of the implementation of the KSF to see that it is delivered fairly and equitably to all staff groups. Through the implementation of the KSF organisations will be able to allocate learning and development resources more effectively and ensure that it is fair and equitable to all staff.

**New!!**

1 Aug 2005

### 3. I have heard discussions that all training and development will be linked to the KSF, is this true?

It is too early to say definitely but probably the answer is yes. Given that the KSF covers all of the functions that the NHS needs to undertake then learning and development is likely to be linked to the KSF in some way or other. Organisations are interested in making sure that they get value for money from the learning and development that they commission. By collating and analysing information from Personal Development Plans, organisations get an overview of the learning and development requirements for the organisation as a whole for the coming years.

## **KSF AND WIDER HR ISSUES**

- 1. How should we use KSF outlines in new job adverts that are being issued now? Do we have to do interim ones or can we wait until we agree that we have finalised the KSF outlines for the posts concerned and they really are a live and a true reflection of the post concerned?**

It is up to local organisations as to how they use KSF outlines in recruitment during the implementation phase of Agenda for Change. Obviously NHS organisations should be communicating information about the new pay system and the central role of the KSF within it to people applying to work in the NHS. If it is agreed in partnership during the implementation phase that draft KSF outlines would not provide helpful information on the post at that point in time, then it is probably best not to use them until they have been finalised.

KSF full and foundation outlines should be available to new staff no later than October 2005.

- 2. How do we link our current appraisal system with the KSF development review process?**

It is not possible to answer that question without knowing what your current appraisal system is like as appraisal systems differ. Organisations with appraisal systems that have development of staff as their basis should have no trouble integrating their existing system with the KSF. It is worth looking at some of the examples of KSF policies offered in the [KSF compendium of shared information](#) on the Modernisation Agency website. Organisations that do not have an existing appraisal system should concentrate on implementing the KSF first as it will form a good solid basis for staff development.

However if your organisation does not currently have an appraisal system in place you might need to invest in developing the skills of your managers as similar skills are needed in the development review process. Organisations should make sure that they do not run two separate systems – the KSF focuses on individual development whilst appraisal systems focus on organisational development and the individual's contribution to the organisation. The two can work well together for the organisation and for individuals. So, for example, organisations can use the mandatory forms that are needed for the development review process and an additional form that brings in the organisational objectives which the individual needs to meet.

- 3. Do you need to write a new job description before you develop a KSF post outline?**

Organisations do not need to write new job descriptions before they develop KSF post outlines. However, some organisations have found with the implementation of Agenda for Change that there are a number of areas of human resource management which need to be addressed to facilitate implementation – and revising job descriptions so they are up-to-date is one aspect of this.

- 4. How many days of KSF training will there be for managers?**

This needs to be determined locally and will depend on the knowledge and skills that managers already have, such as in relation to supporting staff development.

**5. Is there any guidance relating to the effect that maternity leave, parental leave and adoption leave will have on meeting PDPs and progress through the KSF gateways?**

Organisations will have to look at a number of their current policies to identify the impact that the KSF will have on them. Each case probably needs to be considered individually as, for example, some people will already have achieved the requirements of the second gateway, even before they are due to pass through it. It is also possible, in the case of pregnancy, for a manager and employee to agree to conduct a gateway review ahead of any leave actually being taken, as this is often known and predictable. Thus the individual could proceed through the gateway whilst actually on leave, provided that it has been established in advance that the individual has applied the required knowledge and skills. Either party might take responsibility to think ahead in this way, and the precise procedure could be agreed and written up into local policies.

**6. Can we use the KSF with staff who are employed on other contracts (e.g. local pay, those in working in multi-agency teams)?**

Yes. The KSF can be used as a development review system with people working in or with your organisation who do not fall under Agenda for Change.

**7. What are the service and role redesign opportunities within and across agencies that can be supported by the KSF?**

The implementation of Agenda for Change provides the opportunity for organisations – working alone or with others – to think about current roles and how these could change to improve services. As the KSF has been designed in partnership and is to be used in partnership it provides a good focus for having the discussion about what happens now and how this needs to be changed to improve services in the future. The organisations that have done this successfully have involved staff on the ground right through the process so that there has been buy-in and understanding from day one. They have worked with staff on how services need to change. Then they have looked at the implications of these service changes for how everyone's job is designed and the relationship between different jobs. The jobs and their focus are then captured in KSF outlines for those jobs. Consideration is then given to everyone's development needs given jobs have changed and any implications for systems and processes. And this is then followed through with the necessary learning and development being put in place. It is worth looking at the Modernisation Agency website for examples of how this has been done.

**8. What work has been done centrally to link other competences to the KSF and how can we get hold of this information?**

The KSF Development Group has an ongoing programme of work to link national / UK quality assured standards and competences to the NHS KSF 2004. This includes national occupational standards / workforce competences developed by Sector Skills Councils, such as Skills for Health, and also the competences / standards of proficiency issued by the regulatory bodies, such as the Nursing and Midwifery Council and the Health Professions Council. The linking takes some time as not only does the detail of each of the competences need to be looked at and then linked to the KSF but this then needs to be confirmed by the body which owns / developed the competences.

Once the linking of the competences has been agreed the information on the links is held on the e-ksf (the computerised tool for the KSF). This allows you to look at the detail of the competences concerned as well as the detail of the KSF. In addition the planned work in this area is available on the KSF website. You can also let us know if there are other areas that you think should be linked centrally which do not appear on this list as the KSFDG needs to hear from the field about other areas that would be helpful to look at. If this the case then please contact [PMUAdmin@dh.gsi.gov.uk](mailto:PMUAdmin@dh.gsi.gov.uk).

**9. If we don't already use other competences do we need to do so?**

No there is nothing in the Agenda for Change Agreement that says organisations have to link and use the KSF to other competences. It is up to organisations to decide whether other competences would inform their work (such as through providing more detailed information to support development). Organisations should embed the KSF first and then consider whether or not they want to become involved in using competences. The linking that has been done at national level is initially designed to support organisations who are already using other competences. It also provides a resource for all organisations should they decide to use other competences in the future.

**10. How does the KSF link with Skills for Life being led by NHSU?**

The KSF Development Group has planned some work with the NHSU to show the inter-relationship between the two – it is unlikely that anything will be available until spring 2005.

**11. How does the Career Development Framework developed by the MA for the NHS fit with the KSF?**

The Modernisation Agency's Career Development Framework is a draft framework that is out for consultation. Overall it is to be welcomed as it emphasises lifelong learning and helps people to see how their careers might develop. However it is important to note that the levels used in the Career Framework do not necessarily relate to the levels used in the KSF or within the Agenda for Change pay bands.

**New!!**

**OTHER KSF RELATED ISSUES**

1 Aug 2005

**1. Will the KSF Development Group cease to exist now the KSF has been developed?**

No. The KSFDG has now been formally recognised as a technical subgroup of the new NHS Staff Council. Its name has been changed to the KSFG – KSF Group – in recognition that its role has changed as the KSF now exists.

**2. What will happen to the NHSU's PDR toolkit as the NHSU is closing down?**

The PDR toolkit, together with all of the NHSU's programmes, will continue to be available to the service. A lead SHA will take overall responsibility for this. See the NHSU website for further information [www.nhsu.org.uk](http://www.nhsu.org.uk)