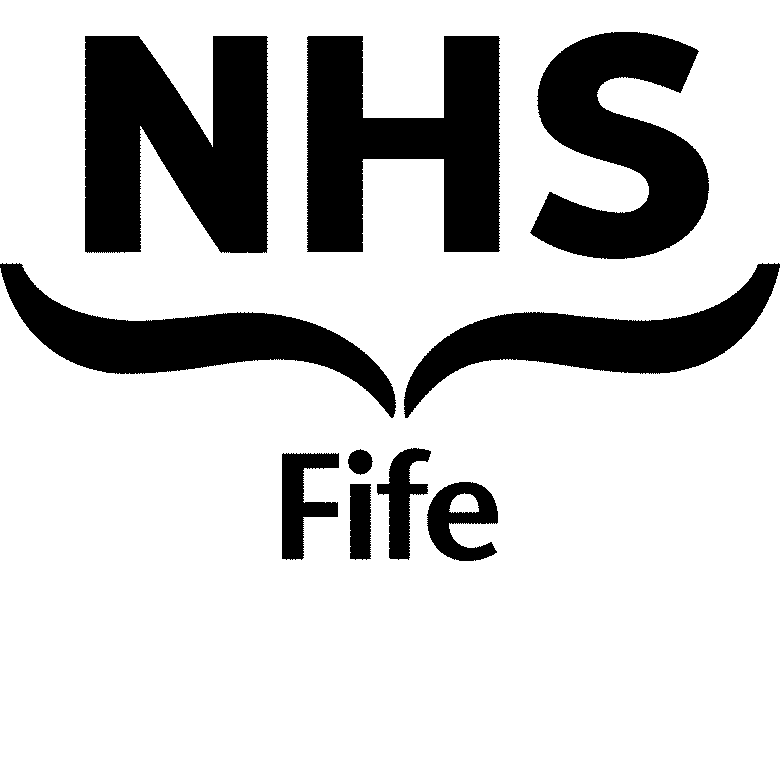
**R&S - APPENDIX 3**

**Agenda for Change**



**A GUIDE TO PREPARING JOB DESCRIPTIONS**

**APRIL 2017**

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**1. INTRODUCTION**

The guide to Preparing Job Descriptions has been created to provide support to NHS Fife employees who are required to create, revise or update job descriptions for use in planning for Implementation of Agenda for Change proposals.

To comply with the requirements of the Agenda for Change proposals, all job descriptions submitted for job matching must be up to date and agreed between the employee(s) covered by the job description and their line manager.

The Scottish Pay Reference and Implementation Group (SPRIG) issued the guidance below relating to updating and revising job descriptions for use in Agenda for Change (Appendix 1):

**JOB DESCRIPTIONS AND AGENDA FOR CHANGE**

Frequently asked questions at Agenda for Change (AfC) meetings and training sessions concern job descriptions – whether they should be updated; whether they should follow the Job Evaluation (JE) national profile or Knowledge and Skills Framework format; whether there is a recommended format (Appendix 2). Documents have circulated recently, which give misleading and unhelpful information, so it may be helpful to re-state the position.

The advice is, and always has been that:

* Having up-to-date, agreed job descriptions is good HR practice, their main purpose being to ensure that employees and their line managers have a common understanding of what is required of the job holder; the required information is generally set out in the form of a list of job duties;
* Similarly, having person specifications available for all post is good HR practice, as it facilitates the recruitment process;
* Up-to-date, agreed job descriptions and person specifications will facilitate matching and make it more accurate and efficient.
* Job descriptions should not follow the national JE profile format, as profiles are not job descriptions and do not fulfil the main purpose of having job descriptions;
* While it may suit the needs of the organisation to include in the job description information on competencies required for the job and for KSF purposes, it should be noted that job descriptions which are exclusively competence-based, are not particularly helpful for matching purposes.
* There is **a** recommended format and content for job descriptions (Appendix 3).

**2. THE PURPOSE OF JOB DESCRIPTIONS**

**2.1 To Communicate the Organisation’s Expectations**

A key purpose of a job description is to identify for a jobholder the contribution required by the organisation. It describes what is expected from the role that the member of staff is employed to fulfil. It is the means by which staff understand what has to be achieved and the criteria by which their performance will be assessed. This is very important for new jobs and for new members of staff.

**2.2 Factual Information Relating to the Job**

Collecting factual information about jobs is very important and the person best placed to provide that information is the jobholder. They know the job better than anyone and can very readily provide accurate information about the actual content of the job. To fulfil the requirements of Agenda for Change the final document is agreed and signed by the jobholder and their Manager, giving a shared understanding of the job being done and what is expected in terms of results.

**Job Descriptions are used for a range of additional purposes:**

**2.3 Recruitment and Selection**

Job descriptions are a very valuable source of information in respect of recruiting new employees, providing a clear understanding of the job, the knowledge, skills and experience required form applicants.

Internal and external candidates can be assessed against the job description.

**2.4 Training and Development**

Job descriptions can be used to identify training and development programmes required to equip individuals in meeting the full specification of their job.

* 1. **Job Evaluation**

Comprehensive, factual information must be available to assist in the decision- making process relating to relative difficulty and importance of jobs.

**2.6 Organisation Planning**

Job descriptions emphasise the accountabilities of each job and the relationships between jobs in the organisation.

**3. GUIDING PRINCIPLES IN WRITING JOB DESCRIPTIONS**

The jobholder is the primary source of information about the job they hold.

Job descriptions may already exist for posts in the organisation but over time jobs change, resulting in the job descriptions requiring to be updated, if not re-written.

**Guiding Principles**

**Analysis NOT Lists**

It is important to separate the job into its constituent parts, examine them and present them in a way that ensures they are clearly understood.

Ensure that the job descriptions do not become a list of boring, unrelated tasks.

**Describe the job NOT the person**

Remember, the job descriptions should only reflect the job and there should be NO intimation or description of the style, performance, career history or character of the jobholder.

**Facts NOT Judgments**

It is important to ensure that only factual information is included in the job description and that personal judgements about what the job should be are not included.

**The job as it is now**

The job description should describe the job as it is now, not as it was or could be in the future. The job description should make no reference to past roles or future aspirations relating to the job.

**4. THE JOB DESCRIPTION STYLE AND FORMAT**

There are many ways in which the information required in a job description can be presented. Written in a “narrative” format provides maximum flexibility for handling a wide range of different jobs and is suitable in providing an insight into each job.

Job descriptions should be easy to read, interesting and generally highlight significant detail but not drown the reader in trivialities. It will tell the reader what the job is all about, how it fits into the framework of the organisation, describe the role of staff who are managed or supervised by the jobholder, what duties they carry out and the various relationships and processes used for decision-making.

In order to comply with Equal Opportunities legislation, including the Sex Discrimination Act and the Disability Discrimination Act, it is important to eliminate any reference to:

* Job Holder titles such as “Mr”, “Mrs”, “Miss” or “Ms”.
* Words that indicate gender, such as “he”, “she”, “her”, “his” first names, etc.
* Reference to “able bodied” or “perfect health”.

**4.1 Structure of the job description**

Job descriptions must be jointly agreed between the employee and their manager. If you do not agree with the content you can raise the matter through your staff side partnership representative. As a minimum, the job description should include:

* Title of the post
* Grade of the post
* To whom the post holder reports and to who he/she is accountable
* Location(s) of the work
* An overall statement of job purpose
* Outline of all the main duties and responsibilities of the post, set out under appropriate sub-headings, which reflect the main areas of responsibility of the post
* An organisation chart which shows where the job fits in the organisational structure
* The knowledge, skills and experience required to carry out the duties and responsibilities of the post

A template job description, endorsed by NHSGG Agenda for Change Project Group, is attached as Appendix 3.

**4.2 Title of post**

The title of the post should be representative of the role. However, while this may act as a guide, job matching panels will assess the post based on all the information supplied by the job description and the person specification. The title alone should not influence a particular Agenda for Change pay band.

**4.3 Statement of job purpose**

This should provide an accurate, concise statement in one sentence or paragraph of why the job exists. It should allow readers to immediately focus on the job’s overall role in the organisation. This section should be no more than 40 words. The job purpose should answer the question “why does the post exist?”

It is often helpful to complete the remainder of the job description to develop an overall view of it and then come back to this section to complete it, using the insights gained from the main body of the document to clarify thoughts on the job’s overall purpose.

**4.4 Outline of specific main duties and responsibilities of the post set out under sub-headings**

The job description should then list the specific duties of the post set out under sub-headings that reflect the main areas of the post’s responsibilities. Examples of what the headings may comprise are:

* Clinical
* Professional
* Education and Research
* Organisational
* Communication
* Managerial

When drawing up the list of the key tasks it is important to ensure the following:

* It includes only the work that is required form the post to achieve the main purpose of the job. The list ***should not include*** personal contributions that are not required to perform the job or detail on how the tasks in the list are done.
* The list does ***not*** include any additional work you do that is ***not*** required from the post by your manager or the service. For example, acting as the health and safety representative, or an official role within your clinical interest group, such as secretary etc.
* It includes any additional work you do that is required of your post, or any work that you carry out as part of any wider duties such as the department’s manual handling trainer, or responsibilities for student placements etc.
* The list is accurate and a fair up-to-date description of what you do. While it is important not to undersell your role or to exclude key aspects of your work, this can often be the case if you regard work you do routinely as not important enough to include or if the skills and abilities required to perform these duties are not explicitly stated.
* ***Do not*** write the job description by directly copying or following the national profiles, or by directly borrowing form the job evaluation scheme. List out what it is you do, using the job evaluation scheme headings as a prompt but not a verbatim guide on what to say. Appendix 2 contains definitions of each of the 16 Job Evaluation Scheme factors.
* Contains all of the principle duties of the post, which should describe the work that is done most frequently by the post holder. One-off, or very occasional, aspects of the post should not be included unless they are central to the job.
* Is concise – most job descriptions should be about 3 or 4 pages or so. Any that are significantly longer maybe contain irrelevant information or may be repetitive.
* Uses simple language – do not be tempted to use overly complex sentences and do not use any jargon which may not be understood by job evaluation panel members.
* Do not use the language of the job evaluation scheme as “shorthand” unless you supplement it with a clear explanation of what you actually do in practice – i.e. you should also clearly state what the duties and responsibilities of a particular element of the job are. For example, it is not enough to state that you carry out highly skilled and specialised work, you must describe what it is you do that requires highly developed skills and specialisation.
* Is the job description a coherent description of what the post actually does, and is it sufficiently comprehensive to ensure that it contains suitable information for use in the NHS Job Evaluation Scheme?
* Do not simply import the job evaluation factor headings into the list of the principle duties of the post, or simply copy into the job description any of the descriptions of particular levels in the job evaluation guidance. The matching panel will be looking at the whole job description to judge at what level within particular factors a post is working.
* You should not divide the job description into sections based on separate Job Evaluation factors, otherwise you will lose coherence.
* Is consistent throughout the job description and does not give contradictory information and is also consistent with the information supplied in the person specification and any other supporting information.

Appendix 1 contains helpful questions that should assist in the completion of the job description. Once you have finished the job description, review it to see if adequate information is provided under all the relevant factors in the job evaluation scheme. Check for any wooliness or vagueness in any of the main job description points. Review the person specification and any other supporting information to ensure that it is relevant and provides adequate information across all 16 job evaluation scheme factors.

Both the post holder(s) and their manager should formally agree the job description; both the manager and the post holder(s) will sign off the job description and any supporting information to record agreement on the content. It is important that the agreement of both parties is formally recorded, as this will prevent challenges and disagreements emerging about the post at or just prior to the matching process.

**4.5 Key points to remember when preparing job descriptions**

The use of language in job descriptions is very important. Listed below are some key points to bear in mind when writing your job description.

When writing the key elements of the job description and person specification, where possible use present tense active verbs followed by a purpose and object. For example:

*“To take a lead role in the supervision, teaching and appraisal of ………”*

When writing the job description, do not slavishly follow the language of the job evaluation scheme. It is more important that the information gives a clear and full explanation of the duties of the post. A bad example (drawn from the Communication factor) would be:

*“Communicate complex information overcoming barriers to understanding”*

Instead you need to explain what the information is, and why it is complex, what it is used for, why you are communicating it, and to whom. Also, you need to describe what the barriers to understanding are.

Avoid the use of professional jargon and abbreviations and where possible use simple language. When professional jargon is used on a daily basis, it is easy to forget that people from other jobs may not know what the jargon means and will not understand what level of skill and knowledge is implied by the use of particular, for example, clinical terms.

Avoid using vague statements that give no indication of what the actual responsibility of the post is. The matching panel may assume that if 2 job descriptions use the same phrase, they are describing the same duties. For example:

*“Responsibility for co-ordinating clinics*” may mean very different sets of duties depending on who is doing them. An administrator and an Occupational Therapist’s job descriptions may have the same phrase in their job descriptions but this phrase may mean very different responsibilities. Explain what the responsibility is for – and how it is carried out.

Do not put too many significant duties into one statement; ensure that only one key responsibility of the post is expressed in one statement.

**4.6 Common terms and phrases to avoid using in re rewritten job description s**

***“Attend relevant (for example, clinical and planning) meetings”***

This means nothing. You need to say why the post holder is attending and what they are expected to do.

***“Liaise with” and “communicate with”***

These phrases will not convey much real information. They could indicate a variety of duties and responsibilities depending on who is doing the work. They need to be explained so that their practical content is understood.

***“Participate in the in-service training programme”***

This does not give any indication as to whether the post holder is expected to deliver education and training or is expected to attend internal training or both.

***“Work without supervision”***

This does not give sufficient information on the degree of freedom of action, which a post holder may be expected to work under, particularly for community posts working in isolation.

It is particularly important that the level of supervision is clearly indicated in the job description and that the meaning of the term supervision is understood.

**5. THE PERSON SPECIFICATION**

The person specification (Appendix 4) sets out the core and minimum knowledge, skill, training and experience required to undertake a particular job. It is an essential document for the NHS Job Evaluation Scheme, as it will provide relevant information under ***Job Evaluation Factor 2 Knowledge, Training and Experience***. As with the job description, it will need to be more comprehensive and explicit than existing person specifications about the minimum level of knowledge and experience required for a particular post.

To draw up a good person specification it is vital to have a clear and accurate job description as by knowing what the job involves it is easier to assess the qualities needed to do it.

The main elements of a person specification can be divided into the following:

**5.1 Experience**

This should comprise experience of any work that demonstrates the skills required for the post. Experience should be listed within reference to the duties and responsibilities set out in the job description. For example, if the job description lists staff supervision as a duty, the person specification could list “experience of allocating and assessing the work of a team of 3-10 people” as relevant experience.

**5.2 Skills, knowledge and abilities**

This should outline, for example, key skills and knowledge required for the post e.g. knowledge of specialist field, ability to drive, shorthand, any in-service training, in particular skills/competencies and an indication of the level of competency required.

Organisational skills should also be included in this section. For example, what sort of planning and prioritising skills are required; are project planning skills needed; will competing demands have to be prioritised, will the jobholder be responsible for prioritising the work of other staff?

**5.3 Qualifications**

This comprises any exams, certificates, SVQ’s, HNC, degrees, diplomas and courses. State the equivalent academic level of clinical courses e.g. postgraduate, Masters Level, SVQ level etc. Could individuals gain the necessary knowledge through experience rather that through formal study?

Also include any legal or statutory requirements required in the post, for example, state registration.

**5.4 Communication and people skills**

Who does the post holder communicate with? This comprises good interpersonal skills, good communication skills, ability to be empathetic, handle difficult or emotional situations etc.

**5.5 Points to remember:**

Each element of the person specification must relate to the work set out in the job description.

The person specification should make very clear the minimum level of knowledge, skills and experience required; any skills that are only desirable should be clearly marked as desirable and be in a separate section/column.

Where training received is to an equivalent level to a particular qualification, for example, SVQ level III or Masters Level, this should be stated so a clear idea of the level of the knowledge needed for the post is given.

The person specification should identify how these skills should be measured and should specify those skills that the jobholder will be expected to demonstrate at interview.

**6. PREPARING JOB DESCRIPTIONS – EXPLANATION OF ROLES**

**Role of the Manager**

It is the responsibility of the manager to ensure that all job descriptions, person specifications and supporting information are written and agreed with individual post holders. The manager should also hold responsibility for ensuring consistency across all posts in the service they manage. The decision on who actually writes job descriptions should be make on a partnership basis.

**Role of the jobholder**

Depending on what is agreed, individuals or groups of individuals may be given the task of writing or rewriting job descriptions for their posts. Post holders must formally agree with the information submitted to the matching panel about their post. Disputes or failure to agree the content of job descriptions or other information should be resolved locally.

**The role of the Staff Side Representative**

The main role of Staff Side Representatives is to agree with management a process for rewriting job descriptions. This involves deciding who will be responsible for rewriting job descriptions, how this is to be achieved, and what procedure will be used if the post holder and manager disagree with the content of the job description, person specification or other supporting information.

Staff side representatives provide advice and support to employees who are reviewing, updating or writing job descriptions.

**Getting organised**

Collating job descriptions for revision and updating, demands good organisational and time management skills.

It is helpful to map existing job descriptions and highlight those that continue to be relevant and those that no longer reflect the duties of the post.

Where staff are all doing the broadly same job it is preferable for one generic job description to be written that covers all posts. For example, employees carrying out broadly the same job, but in different locations, could usefully decide that a single job description will describe the main work of all the team members. However, in these circumstances, provision must be made for jobholders to write individual job descriptions when they are part of the same team but have different work and therefore merit their own job description.

**APPENDIX A**

**HELPFUL QUESTIONS**

This section lists some questions that may act as prompts when you are revising your job description.

**1. Teaching/training responsibilities**

* Do you undertake training? (state what you train on e.g. specialist clinical skills, manual handling etc)
* Who do you train? (students, assistants, other health care professions, carers etc)
* At what level are you expected to train? (e.g. undergraduate, postgraduate, highly specialised, SVQ or SVQ equivalent) Is this formal or informal/ad hoc?
* Do you deliver internal in-service training, or is it broader, encompassing external training?

**2. Management responsibilities**

* At what level are your management responsibilities? Are they strategic, operational, team leadership or responsible for specific tasks such as organising rotas for emergency duty or weekend services?
* Do you deputise for a more senior manager? If so, in what circumstances – for operational issues such as deployment of staff, or is it more strategic, at senior planning or service development meetings.
* Do you hold a budget or a delegated budget?
* Do you order equipment or monitor the level of supplies?
* Are you involved in the recruitment and selection for new staff?
* Are you involved in inducting new staff?
* Do you undertake or contribute to the appraisal and performance assessments of more junior staff or other health care staff?
* What clinical governance and management of risk responsibilities do you have?
* Are you responsible for overseeing sickness and absence etc of other staff within the team? Do you have other Personnel/Human Resources duties?
* Do you make recommendations on changes to clinical practice and/or working practices to your line manager that you would be expected to assist in implementing?
* Are you responsible for any broad policy development which impacts outside your team – on other services, outside the organisation? For example, introducing new services or implementing new roles, commenting on or being the lead person in the development of protocols of care for particular conditions, or clinical guidelines.
* Do you draw up service guidelines, protocols or treatment plans?
* Are you responsible for managing across ore than one site, or more than one team or more than one service?

**3. Communications**

* Are you required to produce timely and informative reports and discharge summaries for other audiences e.g. GPs, Social Services’ etc?
* Do you demonstrate the ability to communicate complex and sensitive information in an understandable form to patients which may include giving unwelcome or difficult to accept information regarding prognosis, degenerative nature of the patient’s condition etc?
* Are you required to gain acceptance for treatment and motivate/persuade patients to comply with treatment programmes where there are significant barriers to understanding such as dementia, cognitive impairment, hearing or sight impairment and memory loss, behavioural problems – mental illness, depression, aggression – from patients or their carers etc?
* Do you communicate results of audit to members of the senior management team?
* Do you communicate any changes to practice that result from audit and reassessment of treatment modalities? How is this communicated, through formal reports/presentations?
* Who do you have key working relationships with? Other staff in the same function or clinical area, the multi-disciplinary team? Other professionals external to the service, GPs, Consultants, Social Services? Why do you consult with them?
* Do the patients you treat have barriers to communication? Are the barriers physical, emotional mental or cultural?

**4. Analytical Skills**

* What judgements are necessary in your role?
* What is the nature of the facts/situations involved?
* Do you assess and diagnose clinical conditions and provide relevant treatment programmes?
* Assess risk to patients/staff?
* Analyse statistics or impact of change to practice on service development?
* Interpret broad policy/clinical guidelines?
* What degree of complexity is the information that you are required to analyse in order to reach conclusions/diagnosis – is it from several different sources? Is some of the information likely to conflict with other elements of the information?
* Who is the recipient of any recommendations or decisions you make?

**5. Planning and Organisational Skills**

* What planning/organisation is undertaken? Why?
* How complex are the programmes/activities planned/organised?
* What time period is covered?
* What function/area is affected by the planning?
* Do you plan patient care/plan treatment programmes?
* Do you plan, manage and prioritise your own caseload; are you responsible for assisting others to manage their caseloads?
* Are you required to business plan?
* Are you responsible for drawing up any service rotas etc?
* Do you organise or call case conferences or arrange clinics?
* Are you responsible for monitoring or evaluating service standards within your own practice or more broadly in the teams or the service?
* Are you expected to alter or revise plans egg treatment plans, clinics?

**6. Responsibility for patient care**

* Who is provided with care and what is involved in this?
* Do you hold your own patient caseload?
* Are you ultimately responsible for the diagnosis and treatment of your patient or client?
* Do you hold responsibility for setting or maintaining service standards – your own or others?
* Are you responsible for any clinical governance or clinical risk assessments?
* What contact do you have with patients/carers – is it frequently/daily? Why do you have contact with patients – treating, teaching, assessing, mentoring?
* Do you give specialist advice?
* Are you responsible for recording your own patient notes?
* Are you required to be involved in or take legal decisions egg child protection arrangements, domestic violence and abuse cases etc?

**7. Responsibility for equipment and resources**

Are you responsible for ensuring equipment used during treatment is safe to use? By other members of staff, by patients?

Are you an authorised signatory for goods, services, payroll (timesheets, expenses, study leave etc)?

**8. What is your level of independence and degree of supervision?**

Include clinical and/or managerial supervision and explain how this impact on your ability to make decisions.

* Is your work regularly or directly supervised or checked?
* Do you receive instruction on a regular basis about key elements of patient care/clinical treatment etc?
* Do you have access to guidance and support from senior staff in the same function or clinical area, but are not regularly supervised?
* Are you responsible for autonomous assessing, clinical decision-making, treatment selection and evaluation of treatment?
* Do you work to agreed protocols with very little ability to vary treatments set out in the protocol without reference to a more senior member of staff?
* Do you work to agreed protocols with the ability to vary treatment without gaining the consent of any senior clinicians?
* What decisions are you expected to make independently and what decisions would you be expected to seek agreement for or defer to a senior member of staff?
* Are you guided by broad professional standards, the organisation’s and service guidelines, broad codes of practice within which you are expected to work?

**9. Research and Development**

* How much research and development activity/clinical trials/equipment testing or adaptation do you normally carry out?
* Are you responsible for securing funding? If so, how was this achieved?
* Are you required to audit your own practice?
* Do you hold responsibility for auditing specific areas of practice or service delivery or quality standards with you service?
* Do you have an active role in service audit? Is this as the lead person or are you responsible for a specific element of the audit?
* Are you involved in academic research? Is this with a university, part of a formal research project across more than one service or one trust? Is it internal to the organisation?

**10. Knowledge, Skills and Experience – minimum and essential level of qualifications for the post**

* What are the minimum qualifications required to undertake your role?
* Do your qualifications require registration?
* Are you expected to undertake formal and informal postgraduate training?
* Are you expected to hold evidence of training and experience in, for example, patient treatment skills which while thy do not have a formal qualification are at the equivalent level of an SVQ, Masters, postgraduate diploma etc?
* How many years of work experience are you expected to have? Is this within a particular clinical speciality or patient group?
* Are you expected to have legal knowledge?
* Are you required to have developed non-clinical skills, for example computer skills, statistical abilities, critical appraisal skills or management skills?

**Effort Criteria – the frequency with which you will be expected to deal with the following areas should be indicated. E.g. Average over a day, a week, a month or a year.**

**11. Physical Effort**

Are you expected to?

* Work in uncomfortable/unpleasant physical surroundings?
* Work in physically cramped conditions? For example, by or next to beds?
* Lift, pull, push weights and equipment with and without the use of mechanical aids?
* Make repetitive movements?
* Climb or crawl?
* Stand/walk for long periods?
* Kneel, crouch, twist, bend or stretch?
* Push trolleys, wheel chairs or other equipment?

**12. Mental Effort**

* Do you have to concentrate for any length of time e.g. taking minutes at meetings (as a key job responsibility)? Assess and diagnose a patient? Write reports? Teach clinical/manual skills? How long are you expected to concentrate for?
* Are you likely to be interrupted? How often are you interrupted? Do you carry a bleep, pager or mobile telephone?

**13. Emotional Effort**

Are you expected to?

* Give unwelcome news to staff, patients or carers and relatives? For example, telling parents or carers of limited expectations from treatment?
* Care for terminally ill patients or patients with long term degenerative diseases?
* Deal with difficult family circumstances or situations? For example, child abuse, neglect, family break down, isolated and depressed patients?

**14. Working Conditions**

* Does your work require you to come into contact with any of the following?
* Inclement weather
* Excessive temperatures
* Unpleasant smells/odours, unpleasant substance/non-household waste
* Infectious material
* Body fluids, faces, vomit
* Dust, dirt, fleas or lice
* Humidity
* Contaminated equipment or work areas
* Working in isolation
* Driving/being driven in normal situations
* Driving/being driven in emergency situations
* Foul linen
* Needle stick injuries
* Chemical spills/hazardous chemicals
* Aggressive behaviour where there is no, or little support

**15. Physical Skills**

You should ensure that the physical skills required in your role are demonstrated in either the job description or supporting information. For example, if your role demands dexterity, precision, hand-eye co-ordination and good sensory co-ordination, your job description should contain this information. Try to use an example of how these skills are used and how often.

**APPENDIX B**

**JOB EVALUATION SCHEME – FACTOR DEFINITIONS**

This section gives an outline of the kind of information within a job each of the factors will consider. It is drawn from the NHS Job Evaluation Handbook (August 2004) and included to assist NHSGG employees in understanding what kind of information they should include in their job descriptions and other supporting information.

**FACTOR 1: COMMUNICATION AND RELATIONSHIP SKILLS**

This factor measures the skills required to communicate, establish and maintain relationships and gain the co-operation of others. It takes account of the skills required to motivate, negotiate, persuade, make presentations, train others, empathise, communicate unpleasant news sensitively and provide counselling and reassurance. It also takes account of difficulties involved in exercising these skills.

**FACTOR 2: KNOWLEDGE, TRAINING AND EXPERIENCE**

This factor measures all the forms of knowledge required to fulfil the job responsibilities satisfactorily. This includes theoretical and practical knowledge; professional, specialist or technical knowledge; and knowledge of the policies, practices and procedures associated with the job. It takes account of the educational level normally expected as well as the equivalent level of knowledge gained without undertaking a formal course of study; and the practical experience required to fulfil the job responsibilities.

**FACTOR 3: ANALYTICAL AND JUDGMENTAL SKILLS**

This factor measures the analytical and judgmental skills required to fulfil the job responsibilities satisfactorily. It takes account of requirements for analytical skills to diagnose a problem or illness and understand complex situations or information; and judgmental skills to formulate solutions and recommend/decide on the best course of action/treatment.

**FACTOR 4: PLANNING AND ORGANISATIONAL SKILLS**

This factor measures the planning and organisational skills required to fulfil the job responsibilities satisfactorily. It takes account of the skills required for activities such as planning or organising clinical or non-clinical services, departments, rotas, meetings, conferences and for strategic planning. It also takes account of the complexity and degree of uncertainty involved in these activities.

**FACTORS 5: PHYSICAL SKILLS**

This factor measures the physical skills required to fulfil the job duties. It takes into account hand-eye co-ordination, sensory skills (sight, hearing, touch, taste, smell) dexterity, manipulation, requirements for speed and accuracy, keyboard and driving skills.

**FACTOR 6: RESPONSIBILITIES FOR PATIENT/CLIENT CARE**

This factor measures responsibilities for patient/client care, treatment and therapy. It takes account of the nature of the responsibility and the level of the jobholder’s involvement in the provision of care or treatment to patients/clients, including the degree to which the responsibility is shard with others. It also takes account of the responsibility to maintain records of care/treatment/advice/tests.

**FACTOR 7: RESPONSIBILITIES FOR POLICY AND SERVICE DEVELOPMENT AND/OR IMPLEMENTATION**

This factor measures the responsibilities of the job for development and implementation of policy and/or services. It takes account of the nature of the responsibility and the extent and level of the jobholder’s contribution to the relevant decision making process, for instance, making recommendations to decision makers. It also takes account of whether the relevant policies or services relate to a function, department, division, directorate or employing organisation, or wider than this; and the degree to which the responsibility is shared with others.

**FACTOR 8: RESPONSIBILITY FOR FINANCIAL AND PHYSICAL RESOURCES**

This factor measures the responsibilities of the job for financial resources (including cash, vouchers, cheques, debits and credits, invoice payment, budgets, revenues, income generation); and physical assets (including clinical, office and other equipment, tools and instruments, vehicles, plant and machinery, premises, fittings and fixtures, personal possessions of patients/clients or others, goods, produce, stocks and supplies).

It takes account of the nature of the responsibility (e.g. careful use, security, maintenance, budgetary and ordering responsibilities); the frequency with which it is exercise; the value of the resources; and the degree to which the responsibility is shared with others.

**FACTOR 9: RESPONSIBILITIES FOR HUMAN RESOURCES**

This factor measures the responsibilities of the job for management, supervision, co-ordination, teaching, training and development of employees, students/trainees and others in an equivalent position. It includes work planning and allocation; checking and evaluating work; undertaking clinical supervision; identifying training needs; developing and/or implementing training programmes; teaching staff, students or trainees; and continuing professional development (CPD). It also includes responsibility for such personnel functions as recruitment, discipline, appraisal and career development; and the long term development of human resources.

The emphasis is on the nature of the responsibility, rather that the precise numbers of those supervised, co-ordinated, trained or developed.

**FACTOR 10: RESPONSIBILITIES FOR INFORMATION RESOURCES**

This factor measures specific responsibilities of the job for information resources (e.g. computerised; paper based; microfiche) and information systems (both hardware and software, e.g. medical records). It takes account of the nature of the responsibility (security; processing and generating information; creation, updating and maintenance of information databases or systems); and the degree to which it is shared with others. It assumes that all information encountered in the NHS is confidential.

**FACTOR 11: RESEARCH AND DEVELOPMENT**

This factor measures the responsibilities of the job for informal and formal clinical or non-clinical research and development (R&D) activities underpinned by appropriate methodology and documentation, including formal testing or evaluation of drugs, or clinical or non-clinical equipment. It takes into account the nature of the responsibility (initiation, implementation, oversight of research and development activities), whether it is an integral part of the work or research for personal development purposes; and the degree to which it is shared with others.

**FACTOR 12: FREEDOM TO ACT**

This factor measures the extent to which the jobholder is required to be accountable for their own actions and those of others, to use own initiative and act independently; and the discretion allowed to the jobholder to take action. It takes account of any restrictions on the jobholder’s freedom to act imposed by, for example supervisory control; instructions, procedures, practices and policies; professional, technical or occupational codes of practice or other ethical guidelines; the nature of system in which the job operates; the position of the job within the organisation; and the existence of any statutory responsibility for service provision.

**FACTOR 13: PHYSICAL EFFORT**

This factor measures the nature, level, frequency and duration of the physical effort (sustained effort at a similar level or sudden explosive effort) required for the job. It takes account of any circumstances that may affect the degree of effort required, such as working in an awkward position or confined space.

**FACTOR 14: MENTAL EFFORT**

This factor measures the nature, level, frequency and duration of the mental effort required for the job (e.g. concentration; responding to unpredictable work patterns, interruptions and the need to meet deadlines).

**FACTOR 15: EMOTIONAL EFFORT**

This factor measures the nature, level, frequency and duration of the emotional effort required to undertake clinical or non-clinical duties that are generally considered to be distressing and/or emotionally demanding.

**FACTOR 16: WORKING CONDITIONS**

This factor measures the nature, level, frequency and duration of demands arising from inevitably adverse environmental conditions (such as inclement weather, extreme heat/cold, smells, noise, fumes) and hazards, which are unavoidable (even with the strictest health and safety controls), such as road traffic accidents, spills of harmful chemicals, aggressive behaviour of patients, clients, relatives, carers.

**APPENDIX C**

#### JOB DESCRIPTION GUIDANCE NOTES

The following provides guidance on development of Job Descriptions. This guidance should be used when completing the Job Description Template.

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| JOB IDENTIFICATION |
| The information required in this section is straightforward and is required primarily for administration.  Please complete all sections apart from the job reference and note that the job holder(s) should not be named. It is intended that job descriptions will be anonymous for grading purposes. The HR department will devise a confidential system to link job holders with their job descriptions and accordingly will complete the jobholder reference.  Job Title:  Responsible to (insert job title):  Department(s):  Directorate:  Operating Division:  Job Reference:  No of Job Holders:  Last Update (insert date): |

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| 2. JOB PURPOSE |
| This section should consist of an accurate, concise statement in one sentence or paragraph of why the job exists. It should allow readers to immediately focus on the job’s overall role in the organisation and should provide an insight into the job and the context within which it works.  The job purpose statement should not be a lengthy review of the operation of the post and its problems. It should give a clear response to the question “why does the job exist?” and should seek to reflect the uniqueness of the job’s contribution. For example many different jobs in a finance department would fall within a job purpose statement that said “to assist in the day to day financial management of the organisation”. This would not be so helpful as a statement which reflected more specifically what the job has to do (e.g. by identifying the particular section in which the job operates, such as debtors or creditors)  It is often helpful to complete the remainder of the job description to develop an overall view of it, and then come back to this section to complete it, using the insights gained from the rest of the template to clarify thoughts on the job’s overall purpose. |

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| **3. DIMENSIONS** |
| This section should reflect the size, scope and activity of the role. For managerial and supervisory jobs, it may be useful to be more specific e.g:   * size of capital and revenue budgets – when quoting figures, it is important to show only figures on which jobholders’ activities have some impact; * staff numbers – show the total number of staff who report to the job, stating whether direct or through intermediate supervisors/managers. It is helpful to have a breakdown of existing grade, group and/or function for those jobs where large numbers of staff are involved;   For clinical jobs, it may be useful to describe the patient group dealt with and the interaction with other clinical and non-clinical staff eg   * provides housekeeping service to three wards; * develops care packages for specific groups of patients; * provides specialist non-clinical advice to specific groups of staff. |

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| 4. ORGANISATIONAL POSITION |
| The purpose of this section is to establish how the job fits into the rest of the organisation. It should be clear to whom the job holder is responsible and whether they have any other key lines of accountability, e.g. to a professional head.  Please therefore record:   1. the manager’s job; 2. job titles of colleagues reporting to the same manager/peers; 3. jobs reporting directly to the job holder.   It is usually best to draw the chart with the manager in the centre at the top, the job in question immediately below with peers on either side. Jobs which report to the job holder should then be shown below. The example below gives a useful style. The names of individual job holders should not be shown on the chart, just job titles.  It is often more convenient to attach a separate sheet with the structure chart, rather than having to incorporate it in the body of the job description. This is perfectly acceptable – simply enter “organisation chart attached” in this section.  If there are any unusual organisational relationships which need to be explained or emphasised, this should also be done in this section. |

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| 5. ROLE OF DEPARTMENT |
| This section should provide an explanation of what the department, division or section does, so that anyone reading the job description will understand in general terms what activities it performs and give a clear indication of where the job fits in. |

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| 6. KEY RESULT AREAS |
| This is one of the most important sections of the job description. There is no one right way of completing this section for every job, but the aim should be to specify the key duties and responsibilities of the job.  Some jobs can be expressed best in terms of the key results or outputs of the job demonstrating what the responsibility is and why it is undertaken, not how. It is essential that the key results are a true reflection of the role to avoid under or over emphasising the extent/level of responsibility. For example often there can be confusion around the use of terminology relating to supervision and management of staff and it is important that this is clear in the job description eg.   * Responsible for the day to day management of a group of staff including work allocation, performance/attendance issues, participating in recruitment, appraisal and personal development planning etc; * Responsible for supervision of reception staff, including work allocation and checking.   It may also be useful/necessary to list some of the principal activities of the role.  Other jobs are expressed best as a list of the actual tasks carried out as part of the job. Where possible, an approximate percentage of time spent on each main duty should be indicated. It is important however, that if listing tasks, that the level of involvement and role is clearly reflected.    A good example would be:   * Plans, evaluates and implements nursing care 70%.   However incomplete examples would be:   * Assists in X-Ray dept when required 10% - this does not reflect the actual role and further information would be required to confirm this; * Involvement in audit and research 5% - this does not give the reader an indication of the level and nature of audit and research.  Where it is a clear job requirement to periodically take charge of a work section, ward or department, the details of that requirement should be described, including the duration and frequency. |

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| 7a. EQUIPMENT AND MACHINERY |
| This section should describe the main machinery and/or equipment used in the job, or to which the job otherwise relates eg for maintenance. This could range from sophisticated medical equipment, to computers, to domestic cleaning machinery. It includes all clinical equipment such as syringes and blood pressure monitors. A brief description should be given of the use of the equipment in the job, even if it appears obvious to the job holder. |
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| **7b. SYSTEMS** |
| This section should describe any systems that the post works with or contributes to, for example in relation to information management. This may range from keeping simple manual records to working with complex computer databases. The nature of the job’s role in relation to the system should be described (e.g. security, processing and generating information; inputting information on behalf of others; creation, updating and maintenance of information databases or systems) and the degree to which it is shared with others.  Examples might include:   * completion of timesheets and forwarding them to the salaries department ; * maintaining patient records; * formatting and populating databases. |

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| 8. ASSIGNMENT AND REVIEW OF WORK |
| This section should contain an explanation of where work comes from/goes to, especially those items that are self-generated by the jobholder.  Most jobs operate within procedures, plans, budgets, projects, etc. Within professionals and managerial jobs, there is a strong emphasis on being able to anticipate problems or needs and to take steps to resolve them without being asked.  There should also be a clear indication of how the jobholder is supervised and/or their work reviewed, e.g. personal contact, formal meetings, written reports, etc. There should be a clear indication of how the control works. |

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| **9. DECISIONS AND JUDGEMENTS** |
| Most jobs operate within defined procedures, plans, budgets, programmes, etc. In some jobs the day to day work is very clearly assigned by a manager or supervisor, whereas in other cases, particularly in professional and managerial jobs, the jobholder is expected to anticipate problems or needs and get on with resolving them without being asked, eg developing managerial policies and procedures, patient diagnosis or planning care. However, even many task-focused jobs will still have some degree of discretion. For example this may simply be the order in which tasks are carried out.  In this section please describe:   * The areas of discretion, areas where post holder is expected to anticipate or resolve problems independently; * Typical judgements made in the course of the job.   Where it is a clear job requirement to periodically take charge of a work section, ward or department, the details of that requirement should be described, including the duration and frequency. |

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| 10. MOST CHALLENGING/DIFFICULT PARTS OF THE JOB |
| This section is intended to give a ‘feel’ for the job’s most challenging or difficult aspects of the job. The purpose of the question is to elicit information about the issues that confront the jobholder and tax his or her skills the most. There should not normally be more than one or two of these.  For some jobs it may seem that there are no difficult aspects, and if that is the view of the jobholder, it will be sufficient to say “not relevant” in this section. However it should be borne in mind that degrees of difficulty or complexity are relative to the nature of the job, and most will have some tasks, duties or responsibilities which are felt to be more complex/difficult/challenging than the rest, and it is helpful to be aware of what these are. This may include times when the job has reduced access to supervision or support such as when assigned to take charge of the department, or during standby or on-call duty). |

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| **11. COMMUNICATIONS AND RELATIONSHIPS** |
| This section should be used to describe:   * Who the job holder communicates with; * What the communication is about (for example, is it about clinical conditions, is it about appointments, is it about budgets? is it about service change?); * Any difficulties encountered in communication (either because of the subject matter or because of factors associated with the people who the job holder is communicating with).   This section may be split by internal and external communications. |

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| **12. PHYSICAL, MENTAL, EMOTIONAL AND ENVIRONMENTAL DEMANDS OF THE JOB** |
| This section should be used to describe the nature and frequency of:   * The physical skills needed for the job (e.g requirements for speed and accuracy, keyboard and driving skills, manual handling skills.); * The physical effort needed for the job (e.g moving equipment, manipulating patients, working in cramped or restricted position); * The mental demands of the job (e.g concentration needed, extent to which workload is predictable, frequency of interruptions); * The emotional demands of the job (e.g dealing with bereaved relatives, conveying unwelcome news to staff or patients); * Environmental and working conditions of the job (e.g working with body fluids, inclement weather, exposure to verbal/physical aggression). |

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| 13. KNOWLEDGE, TRAINING AND EXPERIENCE REQUIRED TO DO THE JOB |
| This section is intended to identify the knowledge, training, qualifications and/or experience required to carry out the job. It should not take into account any additional qualifications or experience the current jobholder may have. The stated level of knowledge should be that which would be required if the post were vacant and were to be advertised now, not what the existing post holder has. It should identify the essential requirements, not the desirable ones.    This section should include theoretical and practical knowledge; professional; specialist or technical knowledge; and knowledge of the policies, practices and procedures associated with the job. (The latter is particularly important where limited or no formal qualifications are required when recruiting). It takes account of the educational level normally expected as well as equivalent levels of knowledge gained without undertaking formal courses of study; and the practical experience required to fulfil the job responsibilities satisfactorily.  Generalised statements such as “requires extensive experience” should be avoided. If experience is essential, this section should state:   * The level of experience; * The length of experience; * How specialised the experience needs to be.   Where a competency profile has previously been devised for the job, this may be attached to the job description. |

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| **14. JOB DESCRIPTION AGREEMENT** | |
| A separate job description will need to be signed off by each jobholder to whom the job description applies.  Job Holder’s Signature:  Head of Department Signature: | Date:  Date: |

APPENDIX D

RECRUITMENT AND SELECTION STANDARDS



PERSON SPECIFICATION FORM

Post Title/Grade**:**

Department/Ward:

Date:

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| --- | --- | --- | --- |
|  | **ESSENTIAL** | **DESIRABLE** | **MEASURE** |
| **Experience** |  |  |  |
| **Qualifications/**  **Training** |  |  |  |
| **Knowledge** |  |  |  |
| **Skills** |  |  |  |
| **Aptitude** |  |  |  |
| **Other**  **e.g. Team Player, Be able to travel** |  |  |  |

### Writing the Person Specification

The person specification details the experience, qualification/training, knowledge, skills and aptitude required to perform the job effectively. These criteria become the benchmark against which you measure the applicants, draw up the shortlist and eventually make the selection. It is therefore essential that the person specification is consistent with the information contained in the job description and that it contains no irrelevant or potentially discriminatory criteria.

Criteria stated within the person specification must be:

* Job related and link to the job description
* Ability based and stated in terms of exactly what is required
* Clearly defined to avoid misrepresentation
* Measurable with the method of assessment indicated
* Consistently applied to all applicants
* Justifiable and fair

Other points to consider when writing the person specification are:

* Age is a meaningless way of determining experience and is discriminatory
* Equivalent qualifications should be considered
* References and occupational health clearance are pre-employment checks and not methods of selection assessment
* Experience criteria should not be over stated as this can be discriminatory

What to include in the Person Specification:

Experience

Any experience gained overseas should be rated fairly and accurately. In order to avoid indirect discrimination on the grounds of age it is preferable to state the level of competencies which may normally be associated with the level of experience or the type of experience required rather than a definitive length of experience.

Qualifications/Training

The requirements must be tailored to the level of the post; therefore it may not be necessary to ask for qualifications gained at school, but those gained in further education.

It may also be a requirement of the post that applicants possess professional qualifications, membership of professional bodies and other examples of professional registration. These must be clearly stated within the person specification.

It is advisable to specify the areas/subjects in which applicants must have received training and whether or not certified evidence of training is required.

Knowledge

Specific knowledge required for the post holder to perform in the job effectively should be stated here. For example, “A good working knowledge of employment law”. Requirements should be specific and concise.

Skills

Specific skills required by the post holder to perform effectively in the job should be stated here. Again requirements should be specific, concise and measurable. For example, “capable of typing 30wpm” should be used rather than, “good typing skills”. Any level of English competency must be specifically related to the post.

Aptitude

Any specific aptitude required by the post holder such as, “ability to work on own initiative” should be stated here.

Other Requirements

Any other requirements of the post holder should be stated here. An example of this would be “ability to travel throughout Fife”.

Please note that a driving licence should only be stated as a criterion for posts that specifically require the post holder to have the ability to drive. Where the post holder is required to travel between locations “ability to travel” should be stated.

The person specification should state whether each criterion is essential or desirable.

**Essential criteria** are the minimum qualities expected to perform the job effectively. **Desirable criteria** are the qualities of an ideal candidate who would be expected to perform the job at the maximum level and must be relevant to the job.

Try not to set unrealistically high standards by having your requirements too strict. The inclusion of unnecessary or marginal requirements can lead to discrimination.

Once the person specification has been prepared the following should be checked:

* All the factors are necessary and justifiable
* Each requirement can be assessed
* All requirements are free from discrimination.