

agendaforchange

# Making a pay claim if you work outside of the NHS

# Introduction

***The RCN recommends Agenda for Change (AfC) pay rates for all nursing staff wherever they may work. Where the RCN is recognised we will work closely with the employer to explore the possibilities of implementing AfC. Where there is no recognition agreement, we will support individuals or groups in making pay claims. This document is the first step in making that pay claim.***

The NHS has introduced a significant new pay, terms and conditions package for 1.3 million staff. AfC offers nursing staff improved pay growth over their career; increases to key terms and conditions, e.g. annual leave; and opportunities for personal development, through appraisals linked to a national framework of knowledge and skills. AfC is also designed to facilitate improvements to patient care by developing new ways of working and new roles.

One in four RCN members works outside of the NHS and the RCN believes that you too should have a pay system that delivers fair pay and career development and is competitive with the NHS.

As you are not an NHS employee, it is unlikely that you will automatically benefit from AfC. This tool will help you to start thinking about how you can raise this issue with your employer and give you ideas about how to word a “pay claim”. This pay claim should be used as a mechanism to facilitate discussions with your employer on the wider aspects of the AfC proposals, in particular the increased benefits in terms and conditions.

If you are one of a number of nurses and/or health care assistants employed you may wish to speak with your colleagues about taking this forward collectively.

# What is Agenda for Change?

Many employers may not be aware of the detail or scope of the new AfC package. The majority of nurses in the NHS will see their pay increase by 15.8% over a three-year period (includes 3.225% pay increases over the period 2003/2004/2005). It is important that you work with your employer to understand the package and how it can be beneficial to them and to the patients and clients you provide services to.

## AfC encompasses:

### Job evaluation

The NHS job evaluation (JE) system assesses all jobs consistently across an organisation. Jobs are scored against job evaluation factors and then placed on a pay band according to their score. Job evaluation works by awarding points for the skills, effort and knowledge needed to carry out a job. Points are further awarded for the responsibility staff carry and the conditions under which they work. The intention is to reflect accurately the demands of a particular post and the responsibilities of the post holder.

In order to use the JE system effectively, you need to update your job description so that it accurately reflects your current role and responsibilities.

### Pay structure, including a move from grades to new pay bands

#### There are nine pay bands within the new system; Bands 1–9

Health care assistants will generally be paid on Band 2 and Band 3.

The minimum pay band for a registered nurse (includes enrolled nurses) is Band 5 and nursing jobs are distributed throughout bands 5, 6, 7, 8 – up to and including Band 9.

Band 6 is equivalent to nurse specialist roles (found in the community and hospitals).

Band 7 is equivalent to ward manager roles and highly specialist nurse roles.

Band 8 is equivalent to nurse consultant roles, modern matron and service wide management roles.

Band 9 covers future clinical specialist roles being developed within the NHS.

When nursing staff are moved onto the new pay bands (assimilation) they will be moved on to the next equal or highest point to their current basic pay. Your basic pay is your current pay minus any extra payments such as shift payments and overtime.

### Terms and conditions of service

All NHS staff covered by AfC will have a standard working week of 37.5 hours.

This means no change to the working week for most nurses.

The overtime rate for all nursing staff and other NHS workers will be paid at time-and-a-half, except for Bank Holidays, which will be paid at double time. The new arrangements will pay overtime rates automatically, unless staff request to take time off in lieu.

## Continuity of service

Continuous previous NHS employment will count as reckonable service in respect of NHS agreements on redundancy, maternity, sick pay and annual leave.

*NHS employers have the discretion to take into account any period of employment with employers outside the NHS where it is judged to be relevant to NHS employment. On returning to NHS employment, previous NHS service will be counted towards the employee's entitlement to annual leave.*

## Annual leave

All staff will receive a basic entitlement of 27 days annual leave. This rises to 33 days after ten years service. In addition there are 8 public holidays.

## Unsocial hours

After testing in the Early Implementer sites in England and four project sites in Scotland it was decided that the new AfC proposals for unsocial hours should be subject to further consideration and negotiation.

In the interim, nursing staff working within the NHS will continue to be paid on the unsocial hours (special duty) payments system they currently have under the Whitley arrangements or in accordance with other existing local arrangements.

The Department of Health, NHS employers and NHS trade unions agree that the principle of paying additional supplements for shift working remains.

### **Whitley unsocial hours arrangements:**

Weekdays 8pm–6am and Saturday midnight to midnight – time + 30%

Sundays and public holidays midnight to midnight – time + 60%

Staff above Band 6 will receive unsocial hours payments as if their basic pay is the maximum of Band 6.

## On-call

The AfC on-call arrangements will be available but current arrangements where they are more favourable may continue during an agreed four-year protection period. The on-call arrangements will be reviewed during the four-year protection period and then consulted upon.

### **Whitley on-call arrangements:**

Overnight £9.88

Weekends per period £14.75

Public holidays per period £14.81

## Pay in high cost areas

### London

The current system of London weighting and fringe allowances will be replaced by 'high cost area' supplements. Payments will be made as a percentage of basic pay and will be pensionable. They do not count as pay for the purposes of calculating the rate of overtime payments, unsocial hours payments, on-call payments or any other payment.

2005/06

Area	% of basic pay	Minimum	Maximum
Inner London	20%	£3,300	£5,500
Outer London	15%	£2,750	£3,850
Fringe	5%	£825	£1,430

## Recruitment and retention premia

Recruitment and retention premia (RRP) may apply to groups of staff or to individual posts where there is a recognised difficulty recruiting and/or retaining staff. In England the RRP will be decided at a local level after agreement within trusts and between trusts and strategic health authorities. In Wales, Northern Ireland and Scotland they will be agreed on a national basis. RRP can be up to 30 per cent of basic pay and is subject to regular review

## Knowledge and Skills Framework

To support career progression and personal development, there will be a new Knowledge and Skills Framework (KSF).

KSF was implemented with the rest of AfC on 1 December 2004, but it will not have an impact on pay until October 2006. The KSF is linked to annual development reviews and personal development plans. Each nurse will have a personal development plan and their development will be assessed against a KSF outline and linked to pay at the two gateways on the pay spine.

For more information on the KSF and other aspects of AfC log on to [www.rcn.org.uk/agendaforchange](http://www.rcn.org.uk/agendaforchange)

# Pay claim

The first stage is to link your current job to the new AfC pay bands. The RCN website identifies NHS national 'job profiles'. These profiles indicate the key parts of a nursing role as matched against the job evaluation scheme. Job profiles should not be used as literal translations of jobs, but should be used as a mechanism which identifies broad responsibilities, knowledge, and skill levels.

Once you have identified the appropriate profile, it will provide a link to a pay band. The pay band provides a range of increments. To identify the increment which is relevant to you – you need to transpose your current pay rate onto the AfC pay band. If your current rate falls between two incremental points, the relevant point for this purpose is the higher increment.

In order to make an effective claim, you need to present your request in a concise manner with clear rationale for making the claim.

## Pro-forma example

Please fill in the gaps with relevant details/delete elements which are not relevant/please add any issues which you think are relevant. You can fill this in as an individual or on behalf of a group of staff within the same roles.

*Dear*

*As you will be aware the NHS has introduced a new pay, terms and conditions package for its entire staff. Agenda for Change (AfC) has replaced the current Clinical Grading and Whitley systems and offers NHS nursing staff improvements on career earnings and terms and conditions, while also supporting improvements in patient and client care.*

*The Royal College of Nursing (RCN) recommends AfC for all nursing staff. They believe that organisations that compete for nursing staff with the local NHS will do better in recruitment and retention if they introduce AfC.*

*Results from the RCN membership survey show that while, nurses in the independent sector are much more likely to report feeling valued in their work than NHS nurses:*

- *70% think that they could be paid more for less effort outside nursing*
- *90% think they are not well paid in comparison to other professions*
- *they are more likely to cite pay as the reason for changing employers than NHS nurses.*

*The workforce in the independent sector is also older and therefore much more likely to retire over the next 10 years – the average age of an independent sector nurse is 46 compared to 40 in the NHS. The independent sector, therefore, needs to be developing a retention strategy for existing staff, but will also need to be recruiting significant numbers into their nursing workforce over this period.*

*I/We have been employed on terms and conditions, which have, to date, been comparable with the NHS, including pay increases in line with Pay Review Body recommendations. As Clinical Grading and the Whitley system has now disappeared it is important to discuss with you the new arrangements and how these can be introduced within our service. In order to facilitate discussion I/we have identified possible changes to my/our pay and conditions below.*

*Or*

*I/We have been employed on terms and conditions, which have been different from, though always competitive with the NHS. As the NHS is changing substantially the basis for its reward package, I/we feel that it would be timely to review my/our current terms and conditions package, ensuring it remains competitive. In order to facilitate discussion I/we have identified current gaps between my/our current reward package and those enjoyed by NHS nursing staff.*

# Information which needs to be included for the pay claim

**Please fill in your own details as appropriate:**

Name/s: .....

Job title: .....

Location (ward/unit/department): .....

Employment start date (for individuals): .....

Current base salary: .....

NHS profile most relevant to my/our role: .....

AfC pay band range: .....

Suggested new base salary based on appropriate pay point on AfC pay band: .....

Current London Weighting/regional allowance: .....

AfC pay in high cost area (% of salary): .....

AfC Recruitment and Retention Premia: (check RCN website to see if RRP are paid within your area)

Current total salary: .....

Suggested new total salary (under AfC): .....

Rationale – maintaining competitive parity with the NHS; improving recruitment and retention opportunities; linking pay to fair and transparent reward structure.

## Annual leave entitlement

**Please fill in your own details as appropriate:**

New annual leave entitlement under AfC would give me/us ..... days (based on X years service with X employer and NHS)

Increase in annual leave = ..... days

Rationale – new calculations re continuity of service within the NHS allow service gained within the independent sector to be counted towards years of service for annual leave.

# Appendix 1

## Profile outlines:

### Band 2

**Current job titles: clinical support worker nursing, health care assistant, nursing auxiliary**

Key responsibilities include:

1. Undertakes personal care duties for patients in the community
2. Records patient information

These job holders are required to have training in a range of personal care and related procedures, N/SVQ2 or equivalent experience

### Band 3

**Current job titles: clinical support worker higher level nursing, health care assistant, nursing auxiliary**

Key responsibilities include:

1. Undertakes a range of delegated patient duties
2. Records patient information

These job holders are required to have a knowledge of care and related procedures, clinical observations with a base level of theoretical knowledge, N/SVQ3 or equivalent experience

### Band 5

**Current job titles: staff nurse, registered nurse, registered practitioner**

Key responsibilities include:

1. Assesses, plans, implements and evaluates clinical care of patients, provides advice, maintains associated records.
2. Carries out nursing procedures.
3. Provides clinical supervision to other staff and students.

These job holders may work within a specialism, e.g. mental health; learning disability; palliative care, but their particular role, while requiring some additional training within the specialist area, does not require specialist training equivalent to Band 6 – there will be a specialist nurse for support or referral. Band 5 nurses do not have any formal management responsibilities for staff.

## Band 6

### **Current job titles group 1: specialist nurse, senior staff nurse, nurse specialist**

Key responsibilities include:

1. Assesses patients, plans, implements care, provides specialist advice, maintains associated records.
2. Carries out specialist nursing procedures e.g. symptom, toxicity management.
3. Provides clinical supervision to other staff and students.
4. May undertake research, lead clinical audits in own specialist area.

These job holders require specialist knowledge across range of procedures, underpinned by theory. This can be gained through degree supplemented by diploma level specialist training, experience and short courses.

### **Current job titles group 2: nurse team leader, deputy ward/unit manager, ward team leader, senior staff nurse**

Key responsibilities include:

1. Assesses patients, plans, implements care, provides advice, maintains associated records.
2. Carries out nursing procedures.
3. Provides clinical and managerial leadership to nursing and support staff; may ensure effective running of ward/unit in the absence of a nurse team manager.

## Band 7

### **Current job titles group 1: nurse team manager, ward manager, sister, charge nurse, clinical manager**

Key responsibilities include:

1. Assesses patients, plans, implements care, provides advice, maintains associated records.
2. Carries out nursing procedures.
3. Manages staff, including appraisal, rotas, recruitment and selection; supervises students, allocates duties to nursing staff, care assistants, undertakes appraisals, recruitment and retention, also staff development.
4. May hold and manage budgets. Authorises overtime for nursing and support staff; holds delegated budget/holds budget.

Job holders may have professional knowledge acquired through degree/diploma supplemented by specialist clinical, managerial training.

**Current job titles group 2: nurse advanced, lead specialist, clinical nurse specialist, senior specialist nurse**

Key responsibilities found include:

1. Assesses patients, plans, implements care in hospital, community or other setting.  
Develop specialised programmes of care/care packages; provide highly specialised advice concerning care settings, provides specialist advice; maintains associated records.
2. Lead specialist in a defined area of nursing care.
3. Provides specialist education and training to other staff, students.
4. Undertakes research and leads clinical audits in own specialist area.

Assesses, develops and implements specialist nursing care programmes; and provides advice to patients, relatives.

Job holders have professional knowledge acquired through degree/diploma supplemented by specialist training, experience and short courses to master's level equivalent.

Log on to the RCN website for more  
information on Agenda for Change  
[www.rcn.org.uk/agendaforchange](http://www.rcn.org.uk/agendaforchange)

**agendaforchange**



**June 2005**

Published by the Royal College of Nursing  
20 Cavendish Square  
London  
W1G 0RN  
020 7409 3333

**The RCN represents nurses and nursing, promotes  
excellence in practice and shapes health policies**

Publication code 002 763