



Royal College  
of Midwives

**job evaluation**

**toolkit**



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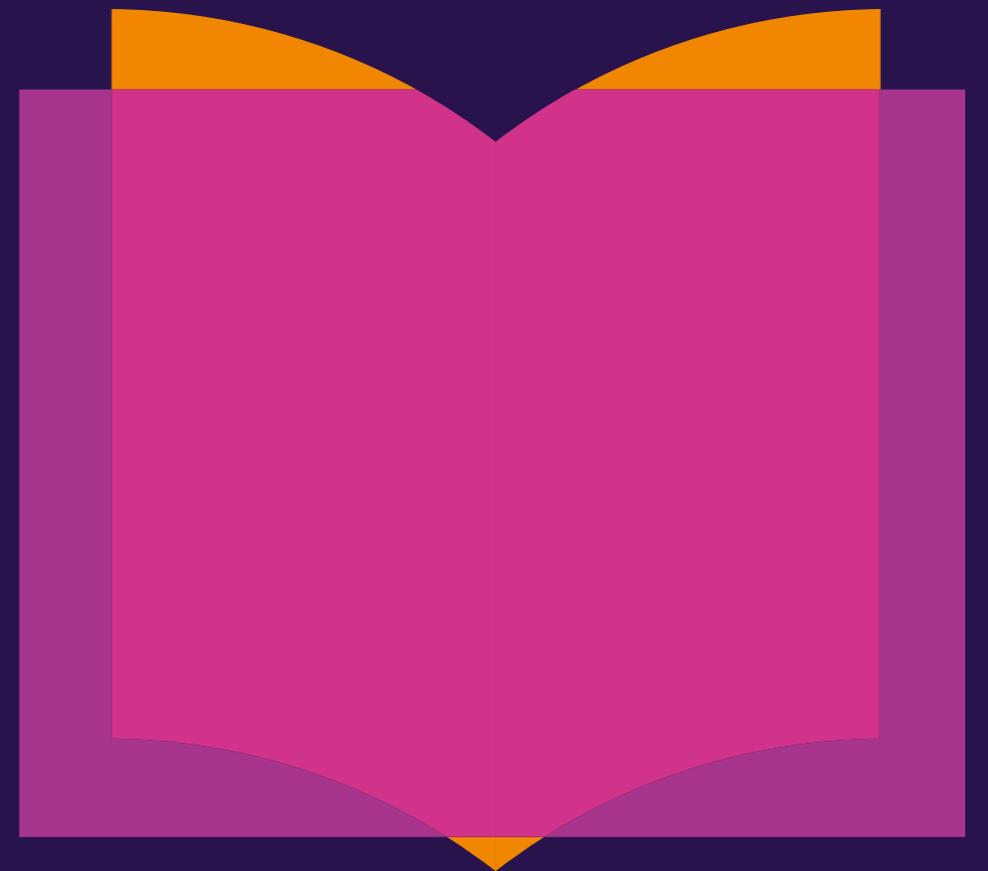




# Summary

**What is the job  
evaluation toolkit?**

**Why is job evaluation  
so important?**





## What is the job evaluation toolkit?

**Research by the Royal College of Midwives (RCM) into maternity support worker (MSW) roles has found that poor job matching practice is common across MSW roles.**

**This toolkit aims to give you all the information you need to identify and challenge inappropriate banding.**

[Research results >>](#)

### **Good job evaluation practice:**

1. Staff are treated fairly and equitably
2. Pay discrimination is removed
3. Positive partnership working between trade unions and employers which leads to better staff engagement and ultimately better patient care





## Why is job evaluation so important?

The NHS Job Evaluation Scheme (JES) underpins the Agenda for Change pay structure, it ensures equal pay for work of equal value<sup>1</sup>. It is a way of ranking jobs by knowledge, skills, responsibility and effort. Every job description that is created for Agenda for Change staff must go through a process of either job matching or job evaluation.

The majority of jobs will be matched to a nationally evaluated job profile. Where a job cannot be matched to a profile local evaluation will need to be carried out.

**The majority of support worker posts in maternity can be matched to the following NHS Job Profiles:**

- Clinical Support Worker (Band 2)
- Clinical Support Worker, Higher Level (Band 3)
- Maternity Care Assistant (Band 4)





Both job matching and job evaluation should be done in partnership by a panel of employer and staff side representatives employed in the NHS trust/health board. Panel members must have been trained in the NHS Job Evaluation Scheme (JES).

The process assigns a pay band to a job, the evidence that this exercise has taken place is the job matching report or a completed job analysis questionnaire (JAQ). Both the job description and the appropriate documentation should be kept by NHS trusts/health boards as an audit trail, this evidence is crucial to demonstrate equal pay.

The NHS Staff Council's job evaluation group (JEG), which the RCM is a member of, is responsible for keeping the JES up to date. This includes the development of new job profiles, updating existing job profiles and ensuring that trainers and the nationally approved training courses are up to date and maintaining advice and information on the implementation of the scheme.

The group has developed lots of resources that are freely available to access.

[Download resources >](#)

[Watch 'why job evaluation is so important' >](#)



**“The NHS Job Evaluation Scheme (JES) underpins the Agenda for Change pay structure, it ensures equal pay for work of equal value”**





# background

RCM FOI request





## Results of the Freedom of Information (FOI) request

In 2019 the RCM conducted a Freedom of Information (FOI) request to NHS trusts and health boards across the UK having been made aware that MSW members felt that they were inappropriately pay banded and performing tasks outside of their remit. The FOI requested that they provide their MSW job descriptions and accompanying job matching information in order to establish whether the job matching/ job evaluation process had been carried out.

The evidence in turn revealed that some MSWs are working at a higher level than they are paid to do. The worst practice unearthed by the FOI was at the very lowest paid, band 2. In England 57% of NHS trusts were unable to provide the job matching information with the job descriptions. Some of the job descriptions were over ten years old.

We also reviewed a random sample of the band 2 job descriptions, they included tasks like feeding new-borns through their nose, observations on women such as temperature, blood pressure and pulse and observations on new-born babies. These tasks require a level three qualification or equivalent in order to be carried out safely by MSWs but this is often not a requirement in the job descriptions or person specifications.

The evidence we received showed just why Job Evaluation is so important.



**"The worst practice unearthed by the FOI was at the very lowest paid, band 2"**

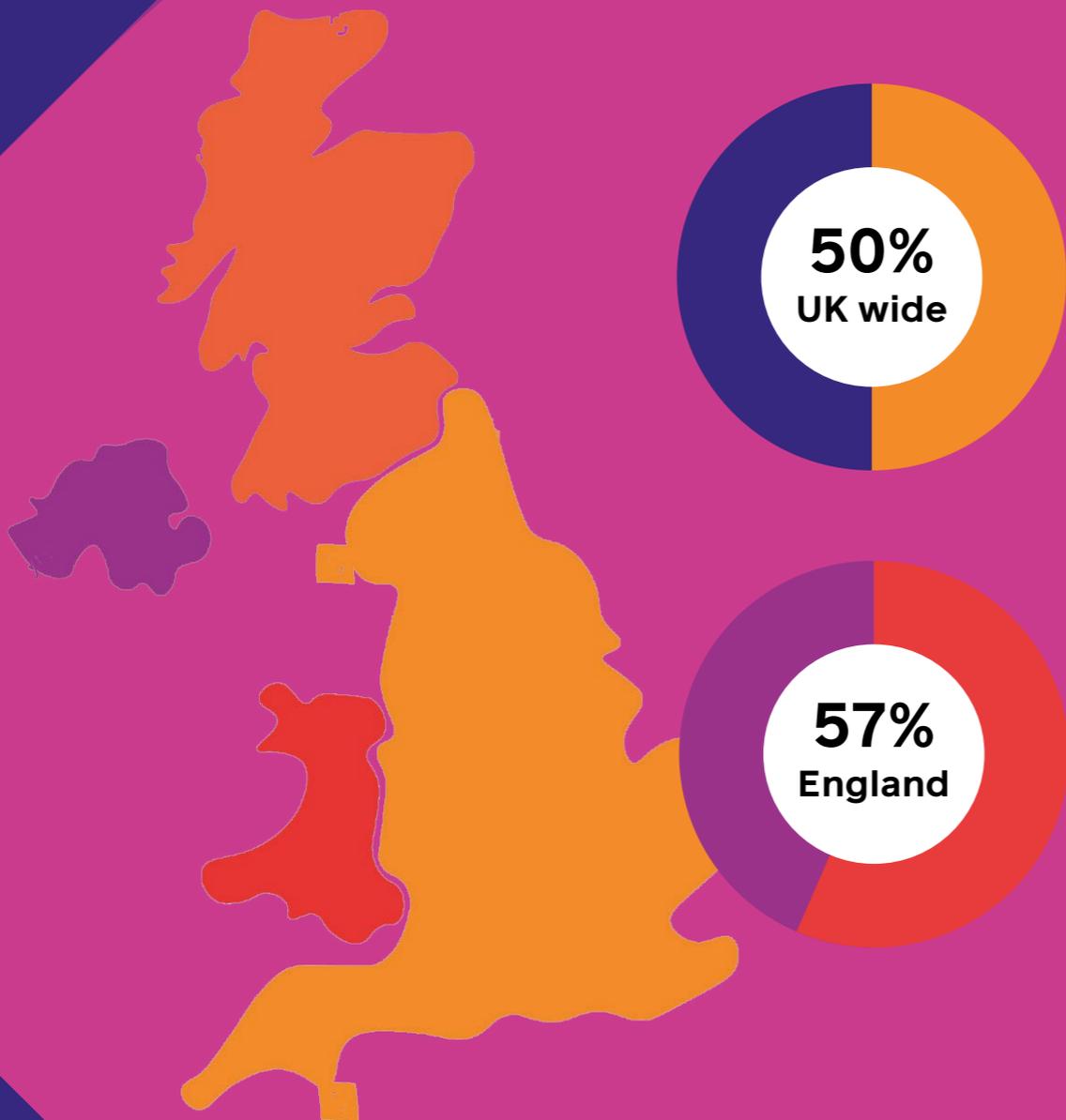




## MSW freedom of information analysis

The RCM sent a request for MSW job descriptions and the accompanying job matching information

### Band 2 MSWs



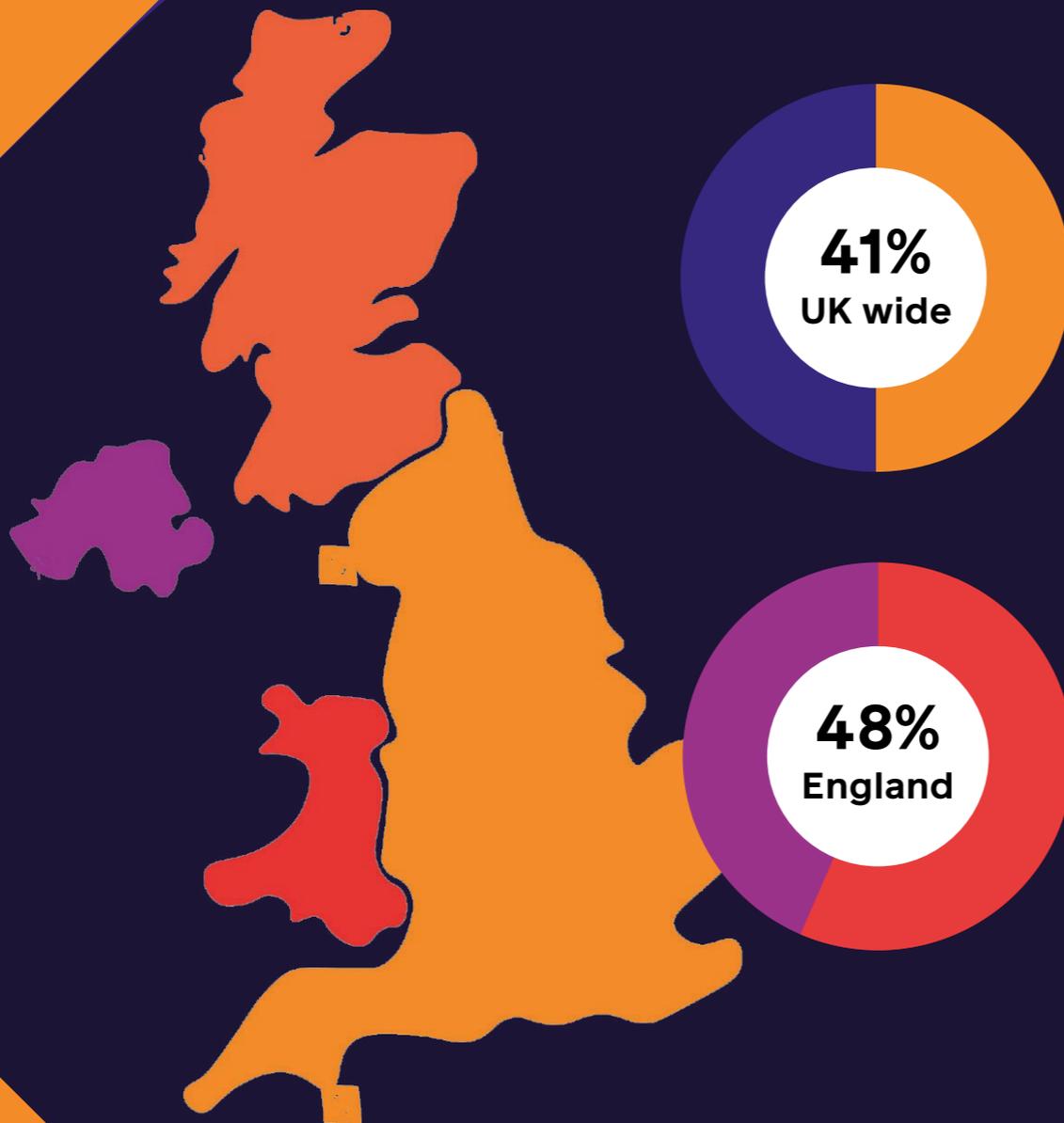
NHS trusts/health boards could not provide the accompanying job matching information



## MSW freedom of information analysis

The RCM sent a request for MSW job descriptions and the accompanying job matching information

### Band 3 MSWs



NHS trusts/health boards could not provide the accompanying job matching information



# MSW freedom of information analysis

The RCM sent a request for MSW job descriptions and the accompanying job matching information

Sent to

**156**  
NHS  
trust/health  
boards

Response rate

**88%**

Band 2 MSWs

**50%**  
UK wide

Band 3 MSWs

**41%**  
UK wide

NHS trusts/health boards could not provide the accompanying job matching information

**57%**  
England

**48%**  
England



# pay banding

What to do if you think your  
pay banding is wrong





## What to do if you think your pay banding is wrong

1. The first step is to find your job description and job specification, if you cannot find it your HR department should be able to help.
2. Check your job description and specification. Does it accurately reflect your roles and responsibilities and the level of education and training required?

If not speak to your line manager in the first instance and ask them to agree to update your job description. Your updated job description then goes to a job matching panel which will assign a pay band to it. JEG guidance on writing job descriptions can be found here:

[JEG guidance >](#)

If you meet resistance to updating your job description speak to your RCM workplace representative who will be able to support you to follow your local internal process. It is important to keep a record of all communication that you have regarding the review of your job description.

3. If your job description does accurately reflect your role and responsibilities there are still some red flags to look out for:

- What level of knowledge, skills and training is required in the job specification to carry out your role?
- Are you required to carry out clinical observations and collect specimens but only need a Level 2 qualification or equivalent?

4. Ask your HR department for the job matching report that supports the banding of your job description. If this isn't available you can ask for it to go back to your trust/health board's job matching panel. If it is available you can ask when it was consistency checked. Speak to your RCM workplace representative about any concerns you have.

### Job evaluation

Job evaluation is concerned with posts not people. The job you do may require a NVQ (or in Scotland – a SVQ) level 2. If you possess a level 3 qualification as far as job evaluation is concerned this does not count. What matters is what your job requires. This is why job descriptions and person specifications are so important. Job descriptions set out what is required of a job. They must be accurate and up to date and reflect what is actually required to do your job.





# rcm support

**The role of the RCM  
workplace  
representative**

**The role of the  
RCM branch**





## The role of the RCM workplace representative

**Workplace representatives can assist in the process ensuring the following checks and balances are in place:**

- Are you confident that there is robust processes in place for job matching and job evaluation? These should include, staff-side and management side panels , a job evaluation policy that was agreed in partnership and is in line with the national Job Evaluation Handbook, a plan for JES practitioner training, enough trained practitioners and time off for training and sitting on job matching and job evaluation panels (this is not facilities time).
- Job evaluation outcomes should be recorded, monitored, consistency checked and reviewed.
- If you have concerns about job evaluation processes in your trust/health board speak to local staff-side colleagues with a view to raising at your local Joint Negotiating Committee (JNC).
- If a member comes to you with concerns you can advise them to follow the steps above, remind the member to keep a record of all relevant communication and ensure timeframes are met. This will be really important if it is found the member is owed any back pay.
- Consider addressing this issue collectively, it may be that other members are affected. Speak to RCM members in similar roles and organise a workplace meeting (your RCM Organiser can help you with this).





## The role of the RCM branch

**In order to ensure that the job evaluation process is understood you may find it helpful to:**

- Add job evaluation to the agenda at your next branch meeting – its important members have an understanding of job evaluation in terms of their own roles and how it relates to the Agenda for Change pay structure as a whole. This may encourage members who have concerns to come forward.
- Hold an MSW week event, we know inappropriate pay banding is predominantly an issue in the lower pay bands so this could be a great topic for MSW week.
- Promote successes – show midwives and MSWs in your trust/health board all the hard work you do and the results that you achieve. This is a great recruitment tool!
- Recruit an RCM activist (it does not have to be a steward and they should receive protected time) to become a job matching/job evaluation practitioner in your trust/health board. Ensuring that there are enough staff-side job evaluation practitioners is key to ensuring robust job evaluation practice and the sustainability of the scheme
- Ensure learning representatives promote job evaluation training and the benefits to members career progression and development from getting involved.





# case study

**RCM workplace  
representative**



## Case study from RCM rep:

### The problem

Midwives Julie\* and Sophie\* were employed in their positions for 10 and six years respectively, both doing the same job-shared role. Each role was very different but both were considered Specialist. Both RCM members had been discussing their roles and responsibilities with management over a two-year period with the hopes of rebanding, but without success.

### The solution

As a steward, I was made aware of the step-by-step RCM Job Evaluation Toolkit guide. It is a great resource to give to members to ensure they have followed all the initial stages correctly. That includes ensuring their job description accurately reflects the work they're doing and having it agreed by the Head of Midwifery, then having the job description reviewed by the local job matching panel.

I was able to support this process and ensure it was managed in a timely manner. Once this information was gathered, having the dates and times accurately recorded was pivotal in negotiating back pay.

### Time frame

Discussions about rebanding had been taking place over a period of four to five years. The RCM steward stepped in to assist in June 2020. Job rebanding (including the negotiations with HoM regarding back pay) was ratified by September 2020.

### The outcome

Both specialist midwifery roles were successfully rebanding from a Band Six to a Band Seven and both received two years back pay, largely thanks to the RCM Job Evaluation Toolkit to ensure every piece of necessary information was gathered.

Both members were happy with the outcome of being recognised as a well-deserved Band Seven in a specialist role and also for the successfully negotiated two years of back pay.

\*names have been changed to protect identities



# Job Evaluation Toolkit

Version 2. updated September 2021



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