

## Job Evaluation Annual Report

**Public Board**  
**30 July 2026**

|                             |                                       |
|-----------------------------|---------------------------------------|
| <b>Presented for:</b>       | Information & Assurance               |
| <b>Presented by:</b>        | Suzanne Dunkley, Chief People Officer |
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| <b>Previous Committees:</b> | People Committee, 11 June 2026        |

|                                                    |                                                                                                                                                       |
|----------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Freedom of Information Act (FOIA) Exemption</b> | <input type="checkbox"/> <b>YES</b> (restricted from the FOIA) <input checked="" type="checkbox"/> <b>NO</b> (available to the public under the FOIA) |
|----------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------|

|                                               |                                                                                                                                                       |
|-----------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Link to Strategic Objective</b>            | People – we make LTHT a brilliant place to work for everyone in order to deliver excellent, safe, and sustainable care for every patient, every time. |
| <b>Link to Provider Capability Assessment</b> | People and culture                                                                                                                                    |
| <b>Link to CQC Well-led Statement</b>         | Governance, Management and Sustainability                                                                                                             |
| <b><u>Regulatory Impact</u></b>               | N/A                                                                                                                                                   |

| <b>Key points</b>                                                                                   | <b>Purpose</b>          |
|-----------------------------------------------------------------------------------------------------|-------------------------|
| 1. To provide information and assurance on Job Evaluation activity, performance, and audit outcomes | Information & Assurance |

| <b><u>Risk Appetite Framework</u></b> |                                                                                                                                                                                   |                              |                  |
|---------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------|------------------|
| <b>Level 1 Risk</b>                   | <b>Level 2 Risks</b>                                                                                                                                                              | <b>(Risk Appetite Scale)</b> | <b>Impact</b>    |
| Workforce Risk                        | Workforce Deployment Risk - We will deliver safe and effective patient care through the deployment of resources with the right mix of skills and capacity to do what is required. | Cautious                     | Operating within |
| External Risk                         | Legal & Governance Risk - We will operate the Trust in compliance with the Law and UK Corporate Governance Code, where applicable.                                                | Averse                       | Operating within |

## 1. Summary

An annual audit of Job Evaluation (JE) practice has been introduced for the first time by NHS England in April 2026.

Following the publication of updated Nursing & Midwifery National Profiles in June 2025, NHS England also introduced a quarterly data collection exercise to enable oversight and assurance of the job evaluation scheme across the NHS. Initially the focus is on Nursing and Midwifery roles, however it is anticipated the data collection will widen to cover the whole Agenda for Change workforce.

The data collection forms part of a wider plan to restore confidence, build capacity, and modernise the JE system. These actions were agreed as part of the 2023 'non-pay' Agenda for Change deal.

This is our first paper, to formalise an annual report to board as standard practice, it outlines our activity from April 2025 to March 2026, summarising our performance and risks. The Board are asked to note the content of this report on job evaluation activity across our Agenda for Change workforce and the actions arising from the annual audit.

## 2. Discussion

Between 1<sup>st</sup> April 2025 and 31<sup>st</sup> March 2026, 44 job descriptions were completed through the full job evaluation process, with the average completion turnaround being 73 days. Of the 44 roles, 73% were concluded in under 12 weeks. The NHS Staff Council recommends that the end-to-end process is no longer than 12 weeks and the NHS England Audit suggests 90% should be completed within this time. LTHT is therefore 17% short of the NHS England standard.

| <b>NHS Staff Council<br/>turnaround threshold</b> | <b>NHS England Audit<br/>recommendation</b> | <b>LTHT performance<br/>25/26</b> |
|---------------------------------------------------|---------------------------------------------|-----------------------------------|
| 12 weeks                                          | 90%                                         | 73%                               |
| Over 12 weeks                                     | 10%                                         | 27%                               |

For the 27% that were completed in over 12 weeks, there have since been several improvements made to the process to improve colleague experience of the JE process, including:

- Improved job description template to ensure matching panellists have all the information they need first time
- Created a 5-minute video for managers on 'how to write a good job description'
- Implemented an electronic submission form to ensure all required information is provided at the outset of the process
- Developed a bi-monthly JE Newsletter to keep panellists updated with developments and share best practice.
- Implemented a quarterly panel forum to facilitate peer support and learning.

When looking at the last quarter of 25/26, 100% of activity was completed within the 12-week turnaround, demonstrating an improvement on the same period the previous year, which suggests service improvement work is having a positive impact on the turnaround times.

The trajectory from the last quarter is also continuing into the start of 26/27, with 100% of activity being completed within 12 weeks. It is envisaged that this trajectory will continue, to enable achievement of the NHS England standard in 26/27, subject to the risks outlined later in the paper. At the current time, NHS England have not said there are any implications of not achieving the turnaround. The risk, therefore, if turnaround is not achieved, is one of colleague and patient experience (ability to advertise and fill vacancies swiftly).

Appendix 1 shows a full analysis of the roles across bands, staff group and CSU.

## **2.1 Nursing and Midwifery National Profile Review**

A project group was established last year, in response to the new Nursing & Midwifery (N&M) National profiles, consisting of Corporate Nursing, Human Resources, Trade Union representatives and a Communications representative, to deliver the review of N&M Job Descriptions. The purpose of this project group is to provide leadership & coordination of a comprehensive review on all N&M job descriptions, ensuring they are up-to-date and reflective of current practice.

The review is being undertaken in a phased approach, with Clinical Nurse Specialists being the first cohort, which is currently in their consultation phase.

The project group will determine the future cohorts and ensure learning from each cohort is applied into all future reviews. Alongside this review, we will also be ensuring the number of job descriptions in use is streamlined, adopting generic job descriptions, to enable more timely and manageable reviews moving forward.

On 2<sup>nd</sup> June 2026, NHS England wrote to all Trusts requesting submission of a band 5 Staff Nurse job evaluation delivery plan by 31<sup>st</sup> July 2026, setting out how all Band 5 nursing roles will be reviewed by October 2028. This is the first time a completion date has been set for this work, and we will therefore now review this request in the working group to support submission of a plan by the deadline.

## **2.2 NHS England JE Audit**

NHS England have developed a JE Audit for completion in partnership between management and staff side. Our audit has been completed by the JE Management Lead (Rachel McMahon) and the JE Staff Side Lead (Denise Carr). At the time of submission to NHS England, out of the 19 RAG rated questions, LTHT was rated green for 12, amber for 7 and 0 red areas. Since the submission, 2 amber areas have progressed to green – through implementation of annual board reporting and quarterly reporting to TCNC.

Appendix 2 shows the JE Audit and associated action plan.

For assurance, in the remaining amber areas, we have developed several actions, namely:

- Continue to implement service improvements to work towards consistently achieving 90% of activity being completed in 12 weeks
- Strengthen the organisational change policy to include reference to job evaluation
- Utilising the Nursing and Midwifery profile review work to start reducing from over 5000 job descriptions in use across the Trust and utilising generic job descriptions

There are 2 areas where we have not committed to further action to progress towards green, these are:

- Maintaining panel composition with 3 representatives, moving to 4 (to achieve green) would require more resource and capacity, with very little added value, and a likely detrimental impact on the 12-week turnaround.
- Delivering refresher training every 3 years to panellists (to achieve green) has a financial implication and resource implication. As an alternative, we ensure any anomalies identified at consistency stage are feedback to the panellists on a 1:1 basis and there are always at least 3 panellists to enable peer review and collaboration on panellists' practice.

### **3. Financial Implications**

Once the N&M job description review progresses, there is the potential for financial implications. It is not possible to state the current financial risk until there is a greater understanding of which roles have evolved and where individuals may have been working above or below the band. The Finance team are sighted on this project and will be kept updated on progress.

### **4. Risk**

The NHS England Audit identifies that LTHT has a good standard of JE practice. However, there are some risks that need to be noted:

- a. There is a large volume of N&M job descriptions to be reviewed amongst a workforce of around 6000 colleagues. This is a significant undertaking with no additional resource identified nationally to complete it. There is a risk that it will therefore take a significant period to complete the review. A timescale of October 2028 has been stipulated by NHS England for Band 5 Staff Nurse roles, but no deadlines for the wider workforce. We are progressing this utilising existing resource within Nursing & Midwifery, People Services and Trade Unions. As resources are finite, the volume of N&M reviews may impact on the overall turnaround of JE activity for other staff groups. This will be monitored closely.
- b. As we progress the N&M review, it is likely colleagues who work closely in similar roles may raise whether they should be in scope of review, thus potentially broadening the volume. These will be managed on a case-by-case basis.
- c. JE relies on volunteers from across the Trust to support the panel process, ensuring panellists are representative of our workforce. It can be a challenge for operational services to release trained representatives to undertake panels, which impacts on the ability to deliver JE. As we navigate the N&M review, the utilisation of all panellists will become more paramount. We will proactively work with the CSUs to support in balancing the operational demands with JE demands.
- d. Financial risk as outlined above from the nursing and midwifery national profile review, where grade drift may have occurred. We will continue to involve finance colleagues as the project progresses.

### **5. Communication and Involvement**

The JE Audit and action plan has been communicated with Trade Union representatives at the TCNC meeting in April. Opportunities are also being utilised to share the positive change in the timeliness of job evaluation activity with wider colleagues, for example through the bi-monthly JE newsletter, panel forums and team meetings.

### **6. Impact on Equality & Health Inequalities**

An EHIA is not required as job evaluation utilises nationally prescribed criteria and the implementation of these terms and conditions does not have an impact on the way colleagues are treated.

### **7. Publication Under Freedom of Information Act**

This paper has been made available under the Freedom of Information Act 2000.

### **8. Recommendation**

The Board are asked to:

- Receive assurance on the current standard of JE practice and audit compliance.
- Note the improvement actions and trajectory towards achieving the 90% 12-week standard.

### **9. Supporting Information**

Appendix 1: JE activity analysis 25/26

Appendix 2: JE Audit and action plan

Appendix 1: JE Activity Analysis 25/26



