AGENDA FOR CHANGE JOB MATCHING AND JOB EVALUATION PROCEDURE

Document Summary

This procedure supports the practice of equal pay for work of equal value within Cumbria Partnership NHS Foundation Trust, in line with the NHS Job Evaluation Scheme: Agenda for Change and Equal Pay Legislation.

<table>
<thead>
<tr>
<th>DOCUMENT NUMBER</th>
<th>POL/004/041</th>
</tr>
</thead>
<tbody>
<tr>
<td>DATE RATIFIED</td>
<td>February 2017</td>
</tr>
<tr>
<td>DATE IMPLEMENTED</td>
<td>February 2017</td>
</tr>
<tr>
<td>NEXT REVIEW DATE</td>
<td>February 2020</td>
</tr>
<tr>
<td>ACCOUNTABLE DIRECTOR</td>
<td>Director of Workforce and OD</td>
</tr>
<tr>
<td>PROCEDURE AUTHOR</td>
<td>HR Business Partner</td>
</tr>
</tbody>
</table>

Important Note:
The Intranet version of this document is the only version that is maintained.

Any printed copies should therefore be viewed as “uncontrolled” and, as such, may not necessarily contain the latest updates and amendments.
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1 SCOPE

This Procedure applies to all staff within Cumbria Partnership NHS Foundation Trust (the Trust) employed under Agenda for Change Terms and Conditions.

2 INTRODUCTION

This procedure supports the practice of equal pay for work of equal value within the Trust, in line with the NHS Job Evaluation Scheme: Agenda for Change and Equal Pay Legislation.

3 STATEMENT OF INTENT

This procedure supports the continued fair and transparent operation of the Agenda for Change job evaluation process within the Trust.

Whilst all roles are eligible for re-banding within the scope of the Agenda for Change framework, the re-banding of existing roles is the exception and it is the expectation of staff-side and management that roles are managed within the grade at which they have been evaluated.

4 DEFINITIONS

4.1 National Job Profiles – are the outcomes of job evaluations of roles within the NHS which are fairly standard and have many common features. They are designed to make the process of assigning jobs to pay bands as straightforward as possible. They also provide a framework against which to check the consistency of local job evaluations.

4.2 Job Matching - in the majority of cases a role will be matched to a National Job Profile to determine its pay band.

4.3 Local Job Evaluation – roles that do not match a National Job profile will be evaluated locally by the Trust to determine pay bands. Only a very small number of roles will require local job evaluation.

4.4 Review - an individual, or group of staff, may request a review if they are dissatisfied with the result of job matching or job evaluation of their role.

4.5 Re-banding – where service need requires a role to be substantially changed to the extent that it may affect the pay band, the role may need to be re-banded.

4.6 Desk Topping – new posts developed to meet service needs will be matched, or evaluated, as a desk-top exercise, in order that a pay band can be determined for recruitment purposes.
5 DUTIES

In order to support the implementation of this procedure, it is the responsibility of:

5.1 Managers

- To be aware of this procedure

- To engage HR Business Partner in early discussion regarding service developments which include design of new roles and/or significant changes to existing roles.

- To ensure that roles are managed in line with job descriptions and requirements of the Service and that the level of work assigned is appropriate to the Pay Band

- To ensure any issues which arise are dealt with in line with this Procedure.

- To ensure the fair and consistent application of this Procedure

5.2 Employees

To use this procedure to resolve any issues that may arise in relation to their pay banding. An Employee(s) who is dissatisfied with the outcome of job matching or job evaluation for their post may request a review (see Section 6.3.3). There is no right of appeal against a banding outcome beyond the Review Panel. However, if the Employee(s) can demonstrate that the process was misapplied, they may pursue a local grievance under the Grievance Procedure about the process, but not against the banding outcome. Where a grievance is upheld, a potential remedy may be a reference to a new matching panel.

5.3 Human Resources

- To ensure that fair and transparent Agenda for Change procedures are adhered to at all times allowing for the establishment of equal, fair and consistent role grades.

- To ensure that all data and information is stored in an appropriate manner and any changes to job roles are checked to ensure that the role is still within the correct grade boundary.

5.4 Trade Union Representatives

- To be aware of this procedure, and the stages it contains

- To advise members on the appropriate use of this procedure.
• Trade Union representatives who are trained in Job Matching, Job Evaluation and Consistency Checking will make themselves available to participate in these processes when required.

6 PROCEDURE

6.1 Job Families

For jobs that occur across the organisation where the skills and responsibilities are essentially the same, for example, administrative posts within clinical teams, generic job descriptions should be used. Managers should consult their HR Business Partner regarding use of appropriate generic job descriptions.

6.1 Desk topping of New Posts

New posts developed by the Trust will be desk-topped in line with guidance contained in the NHS Job Evaluation Handbook.

The outcome will determine the pay band for the new post.

Once the new appointee has been in post for a reasonable period of time* and the full demands of the post are clear, the service, in conjunction with the new appointee, may consider whether there is a requirement for the post to be re-banded as described in Section 6.3 below. In such cases the Responsible Manager and Post holder(s) will review and mutually agree an updated Job Description for the role. The updated Job Description will form the basis for any Re-banding request.

* this may vary according to the nature of the job. Some posts may need a period of a few months, while others may be subject to seasonal variations requiring a full year to determine the full job demands. Any increase in pay resulting from a re-banding application will take effect from the date on which the Responsible Manager and the post holder(s) mutually agree that the post holder(s) commenced working to the revised job description.

6.2 Job Evaluation

The majority of posts within the NHS will match a National Job Profile. Posts that do not match a National Profile will be locally evaluated to determine the pay band.

Local Evaluation will be carried out in line with guidance contained in the NHS Job Evaluation Handbook.

6.3 Re-banding

There is the option for the review or re-banding of roles within the Agenda for Change framework. This will be based on the requirements of the service, for that role. This is to ensure that equal pay for work of equal value is consistent
throughout the Trust, and should only be progressed if there is a clear business need for the work to be done in that role.

As stated under Section 3 above, it is the normal expectation that roles are managed within the grade at which they have been evaluated.

6.3.1 Role Drift

Role drift occurs when an individual ‘picks up’ additional work and continues to do so when not formally part of their role, e.g. taking additional work when covering absence of a colleague, and then not returning it when the colleague is back at work.

It is the responsibility of Line Managers to ensure that role drift does not occur, and that roles are managed in line with the job descriptions and requirements of the Service.

Where a staff member believes their role is subject to role drift, they should seek to resolve any concerns they may have informally with their line manager in the first instance. Where they feel unable to raise it with their immediate line manager, they should involve the next level of management.

6.3.2 The Reasoning behind a Re-banding

If there is a clear need for the role to be substantially changed to include additional or reduced workload responsibilities (e.g. due to a change in service requirements) then this may have an impact upon the assigned Agenda for Change pay band for that role. In this instance the process that needs to be followed is outlined in Appendix 1.

Any request for a role to be re-banded must be approved in principle in advance by the Care Group General Manager (or in the case of Corporate Services, the responsible Executive Director or Deputy Director and must be accompanied by a clear business case and rationale. Any re-banding request must be agreed and signed off by the Associate Director of Operations for the Care Group or the responsible Director or Deputy Director (for Corporate Services) before submission to Human Resources.

6.3.3 Review

A post holder(s) who is dissatisfied with the outcome of job matching or job evaluation for their post may complete an Application for Review (Appendix 2) and submit it to Human Resources within 3 months of having received notification of the outcome of job matching or job evaluation for their post.

All information submitted must be mutually agreed with the post holder’s Line Manager and countersigned by the Associate Director of Operations for the Care Group or, in the case of Corporate Services, by the relevant Director, or Deputy Director.
The Review will be carried out in line with guidance contained in the NHS Job Evaluation Handbook.

The post holder(s) has no right of appeal beyond the Review panel if their complaint is about the banding outcome.

In the event that the post holder(s) can demonstrate that the process was misapplied, they may pursue a local grievance about the process, but not against the banding outcome. Where a grievance is upheld, a potential remedy may be a reference to a new matching panel.

6.4 Consistency Checking

Consistency Checking will be carried out in Partnership by trained management and staff-side practitioners, in line with guidance contained in the NHS Job Evaluation Handbook and the Trust’s agreed Standard Operating Procedure.

7 TRAINING

Roll-out of this Procedure and Procedure will be incorporated into People Management Training sessions for Line Managers.

For details of training in Agenda for Change Job Matching and Job Evaluation please contact the Human Resources department.

8 MONITORING COMPLIANCE WITH THIS DOCUMENT

The table below outlines the Trusts’ monitoring arrangements for this procedure/document. The Trust reserves the right to commission additional work or change the monitoring arrangements to meet organisational needs.

<table>
<thead>
<tr>
<th>Aspect of compliance or effectiveness being monitored</th>
<th>Monitoring method</th>
<th>Individual responsible for the monitoring</th>
<th>Frequency of the monitoring activity</th>
<th>Group / committee which will receive the findings / monitoring report</th>
<th>Group / committee / individual responsible for ensuring that the actions are completed</th>
</tr>
</thead>
<tbody>
<tr>
<td>Job matching and evaluation and consistency checking is managed consistently in line with this procedure and procedure</td>
<td>Partnership Forum may review a sample of banding outcomes on demand</td>
<td>Co-chairs of Partnership Forum</td>
<td>As deemed appropriate by Partnership Forum</td>
<td>Partnership Forum</td>
<td>Partnership Forum</td>
</tr>
</tbody>
</table>

9 REFERENCES/ BIBLIOGRAPHY
10 RELATED TRUST PROCEDURE/PROCEDURES

Grievance Policy POL/004/002

11 EQUALITY IMPACT ASSESSMENT

(Please refer to the Equality Impact Assessment Guidance available on the Equality and Diversity section of the Trust website)

The Equality Act 2010 came into force on the 1st October 2010. Under the Act there is a legal obligation to undertake Equality Impact Assessments (EIAs). The Trust and its employees must have due regard of the need to:

- Eliminate unlawful discrimination, harassment and victimisation and other conduct prohibited by the Act
- Advance equality of opportunity between people who share a protected characteristic and those who do not
- Foster good relations between people who share a protected characteristic and those who do not

EIAs assess the impact of the Trust’s actions on people from the protected characteristics identified in the Act. In addition they should show how our policies and practices would further or have furthered the above aims. Demonstration of the engagement you have undertaken when doing the assessment will be a key part of this process. Engagement covers a range of different activities, from formal public consultations to direct engagement with people from protected groups. The level of engagement you undertake will depend on the scale of procedure/project/activity you are developing or updating.

To comply with legislation EIAs must be a comprehensive, formal and structured process and the results must be published. These factors enable the Trust to demonstrate to all stakeholders and regulatory bodies that we have fully addressed Equality and Diversity within the Trust.

An Equality Impact Assessment must be done at the development stage of any procedure, review, project, service change etc.

(Please refer to the Equality Impact Assessment Guidance available on the Equality and Diversity section of the Trust website)

<table>
<thead>
<tr>
<th></th>
<th>Name and Job Title of person completing assessment</th>
<th>Maria Stevens - HRBP</th>
</tr>
</thead>
<tbody>
<tr>
<td>2</td>
<td>Name of service, procedure or function being assessed</td>
<td>Agenda for Change Job Matching and Job Evaluation Procedure</td>
</tr>
<tr>
<td>3</td>
<td>What are the main objectives or aims of the service/procedure/function?</td>
<td>To provide a clear framework for the management of Agenda for Change job</td>
</tr>
<tr>
<td>4 Date</td>
<td>February 2017</td>
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</table>

Matching and job evaluation
### Stage 1: Initial Screening

5. **What evidence is available to suggest that the proposed service/procedure/function could have an impact on people from the protected characteristics?** Document reasons, e.g. research, results of consultation, monitoring data and assess relevance as: *Not relevant or Relevant Low / Medium / High.*

<table>
<thead>
<tr>
<th>Protected Characteristic</th>
<th>Relevance</th>
<th>Evidence</th>
</tr>
</thead>
<tbody>
<tr>
<td>a Race</td>
<td></td>
<td></td>
</tr>
<tr>
<td>b Religion / Spirituality</td>
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<td>c Gender</td>
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<tr>
<td>d Disability</td>
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<td>e Sexual Orientation</td>
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<tr>
<td>f Age</td>
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<tr>
<td>g Pregnancy/maternity</td>
<td></td>
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<tr>
<td>h Gender Reassignment</td>
<td></td>
<td></td>
</tr>
<tr>
<td>i Marriage and Civil Partnership</td>
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</tr>
</tbody>
</table>

If you assess the service/procedure/function as **not relevant**, please proceed to section 11.

If you assess the service/procedure/function as **relevant**, continue to Stage 2, Full Equality Impact Assessment.

### Stage 2: Full Equality Impact Assessment

6. **Are there service user, public or staff concerns that the proposed service/procedure/function may be discriminatory, or have an adverse impact on people from the protected characteristics?**

<table>
<thead>
<tr>
<th>Public</th>
<th>Staff</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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</tr>
</tbody>
</table>

If there are **no concerns**, proceed to section 11.

If **there are concerns**, amend service/procedure/function to mitigate adverse impact, consider actions to eliminate adverse impact, or justify adverse impact.

7. **Can the adverse impact be justified?**

8. **What changes were made to the service/procedure/function as result of information gathering?**

9. **What arrangements will you put in place to monitor impact of the proposed service/procedure/function on individuals from the protected characteristics?**
List below actions you will take to address any unjustified impact and promote equality of outcome for individuals from protected characteristics. Consider actions for any procedures, services, training and projects related to the service/procedure/function which have the potential to promote equality.

<table>
<thead>
<tr>
<th>Action</th>
<th>Lead</th>
<th>Timescales</th>
</tr>
</thead>
</table>

11 Review date

I am satisfied that this service/procedure/function has been successfully equality impact assessed.

Date: February 2017
Author: Maria Stevens – HR Business Partner

Please send the completed assessment for scrutiny to: Project Co-ordinator, Cumbria Partnership NHS Foundation Trust, Trust Head Quarters.
APPENDIX 1

AGENDA FOR CHANGE RE- BANDING REQUEST

Where there is a clear service need for a role to be substantially changed to include additional or reduced workload responsibilities, to the extent that it may require re-banding, the Line Manager and Post Holder should **jointly agree** a revised job description.

The following documentation must be included with the re-banding request:

- Re-banding Request Form signed by Line Manager and Post Holder and authorised by the Locality General Manager (or equivalent);
- revised job description, signed by Post Holder and Line Manager;
- original job description and person specification.

POSTHOLDER’S DETAILS

NAME OF POSTHOLDER:

POST:

DEPARTMENT/SERVICE:

(A copy of the original job description MUST be included with this re-banding request)
SUMMARY OF CHANGES

Please provide details of how the job responsibilities have changed since the post was originally banded.

<table>
<thead>
<tr>
<th>Factor</th>
<th>Details of Changes to the Original job Responsibilities</th>
<th>Manager's Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Communication &amp; Relationship Skills</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2. Knowledge, Training &amp; Experience</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3. Analytical &amp; Judgement Skills</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4. Planning &amp; Organisational Skills</td>
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<tr>
<td>5. Physical Skills</td>
<td></td>
<td></td>
</tr>
<tr>
<td>6. Responsibility for Patient/client Care</td>
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</tr>
<tr>
<td>7. Responsibility for Procedure/Service Development</td>
<td></td>
<td></td>
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<tr>
<td>8. Responsibility for Human Resources</td>
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<tr>
<td>9.</td>
<td>Responsibility for Financial &amp; Physical Resources</td>
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</tr>
<tr>
<td>11.</td>
<td>Responsibility for Research &amp; Development</td>
<td></td>
</tr>
<tr>
<td>12.</td>
<td>Freedom to Act</td>
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</tr>
<tr>
<td>13.</td>
<td>Physical Effort</td>
<td></td>
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<tr>
<td>14.</td>
<td>Mental Effort</td>
<td></td>
</tr>
<tr>
<td>15.</td>
<td>Emotional Effort</td>
<td></td>
</tr>
<tr>
<td>16.</td>
<td>Working Conditions</td>
<td></td>
</tr>
</tbody>
</table>
LINE MANAGER AND CARE GROUP GENERAL MANAGER VERIFICATION

Post holder’s Signature:……………………………Date:…………………………

Name of Line Manager:…………………………………………………………

Job Title of Line Manager:……………………………………………………

Line Manager’s Signature:……………………………Date:…………………………

Rationale for Change to Role:
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Name of Care Group General Manager (or in the case of Corporate Services Responsible Director or Deputy Director):……………………………………

Signature of Care Group General Manager (or Responsible Director or Deputy Director):………………………………………………………………………………

Date:……………………………
Appendix 2

Application for Review

If you are dissatisfied with the outcome of job matching or job evaluation for your post and wish to request a review, you must complete this form and submit it to Human Resources within 3 months of having received notification of the banding outcome.

ALL information submitted MUST be mutually agreed with your Line Manager and countersigned by the Care Group General Manager or, in the case of Corporate Services, by the relevant Executive Director, or Deputy Director.

Name…………………………………………………………………………………………………………………………

Post…………………………………………………………………………………………………………………………

Base…………………………………………………………………………………………………………………………

This form is to be used to provide ALL the information you wish to submit in relation to your application for a review.

ONLY COMPLETE THE FACTORS WHICH YOU FEEL HAVE BEEN UNSATISFACTORILY MATCHED

<table>
<thead>
<tr>
<th>Factor Number</th>
<th>Relevant Evidence</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Communication and Relationship Skills</td>
<td></td>
</tr>
<tr>
<td>2. Knowledge Training and Experience</td>
<td></td>
</tr>
<tr>
<td>3. Analytical and Judgemental skills</td>
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<td></td>
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<tr>
<td>4. Planning and Organisational skills</td>
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<td>5. Physical Skills</td>
<td></td>
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<tr>
<td>6. Patient/Client Care</td>
<td></td>
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<tr>
<td>7. Procedure and Service</td>
<td></td>
</tr>
<tr>
<td>8. Financial and Physical Resources</td>
<td></td>
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<tr>
<td>9. Human Resources</td>
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<td>10. Information Resources</td>
<td></td>
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<tr>
<td>11. Research and Development</td>
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<tr>
<td>12. Freedom to Act</td>
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<td>13. Physical Effort</td>
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<tr>
<td><strong>14. Mental Effort</strong></td>
<td></td>
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<tr>
<td><strong>15. Emotional Effort</strong></td>
<td></td>
</tr>
<tr>
<td><strong>16. Working Conditions</strong></td>
<td></td>
</tr>
</tbody>
</table>

All 3 signatures are necessary to validate this review application.

**Post Holder**
Signature ................................................................. Date ................. ..
Print Name ..................................................Contact Tel No. ...... .........................

**Line Manager**
Signature ................................................................. ..Date ..........................
Print Name ..................................................Contact Tel No ........  ................

**Care Group General Manager (or Responsible Director or Deputy Director for Corporate Services)**
Signature ................................................................. ..Date ..........................
Print Name ..................................................Contact Tel No. ...... .........................

Please return this form to: **HR Department**
**Agenda for Change**
**Maglona House**
**68 Kingstown Broadway**
**Kingstown Industrial Estate**
**Carlisle**
**CA3 0HA**
### DOCUMENT CONTROL CHECKLIST

Please submit this form with your document to the Procedure Management Group for approval.

<table>
<thead>
<tr>
<th>1. Indicate type of document</th>
<th>Assessor Use Only</th>
</tr>
</thead>
<tbody>
<tr>
<td>Procedure x Procedure</td>
<td>YES</td>
</tr>
<tr>
<td>Guideline</td>
<td></td>
</tr>
<tr>
<td>Protocol</td>
<td></td>
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<tr>
<td>Pathway</td>
<td></td>
</tr>
<tr>
<td>Link to NHSLA CQC Trust Procedure Trust/Adult Social Care Other (please specify)</td>
<td></td>
</tr>
</tbody>
</table>

| 2. Title: Agenda for Change Re-banding Procedure and Procedure | |
| | |

| 3. Has the Document Template been applied fully? | |
| (Tick as appropriate) | YES | NO | N/A | Unclear |
| Comments | | | | |

| 4. Key words: List the Key words from your guidance document. (Key words allow rapid/accurate searching of guidance when using the Trust intranet search engine) | |
| Agenda for Change, Job matching, Job evaluation, Re-banding | |

| 5. Summary of Document Guidance: (less than 100 words) | |
| This procedure supports the continued fair and transparent operation of the Agenda for Change job evaluation process within the Trust. | |

| 6. Why have you written this guidance? (Complaint, Incident, NICE/ External advice, review etc) | |
| To meet NHSLA standard level 1 and CQC registration Best practice and employee relations issues have identified the need for a clear framework for the management of job matching and job evaluation. | |

Notes: 

**Agenda For Change Job Matching And Job Evaluation Procedure**

March 2017  Page 19 of 21  "Cumbria Partnership NHS Foundation Trust Our Ref: POL/004/041"
7. Is there a written patient information for this guidance?  
(Tick as appropriate) YES  NO  
If yes, please ensure that it is forwarded to the Trusts Communications Department for display on the Internet and/or distribution.
If no, does there need to be? YES  NO  Who will develop it?

<table>
<thead>
<tr>
<th>Assessor Use Only</th>
</tr>
</thead>
<tbody>
<tr>
<td>YES</td>
</tr>
</tbody>
</table>

8. Equality Impact Assessment – Initial Screening Form – Ensure this is completed and attached.  
Age of Patient/s mentioned? No  
Disability if any mentioned? No  
Ethnicity of patient/s mentioned? No  
Religion/belief of patient/s considered? No  
Sexual orientation of patient/s mentioned? No  
Gender of patient/s mentioned? No

| Notes: |

9. Please list the Clinicians & Committee/Groups (including multi-disciplinary team where appropriate) that have been consulted and have agreed with the submitted guidance (in addition to co-authors). If it is a document related to NHSLA, make sure that the Project Team has signed been consulted.

<table>
<thead>
<tr>
<th>Name</th>
<th>Job Title</th>
<th>Department</th>
</tr>
</thead>
<tbody>
<tr>
<td>HR Procedure Sub Group</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Partnership Forum</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

| Notes: |

10. Have service users and/or other representatives been consulted?  
(Tick as appropriate) YES  NO  
If yes, provide details. If not please justify:
Staff-side representatives

| Notes: |

10a. For Clinical Guidance, have you documented the level of evidence and grade of recommendations, where relevant, within the guidance and given references (For summary of evidence grading, see Procedure Appendix)  
(Tick as appropriate)
YES  NO  If not, please justify:

| Notes: |

11. Does this guidance have additional resource implications for the Trust?  
(Tick as appropriate) YES  NO  If yes, please specify and indicate how addressed:

| Notes: |

12. How will this guidance be implemented/disseminated within the trust?  
(Tick as many as appropriate)
Training ☐ Technology Change ☐

Department/Ward Base Education ☐ If other ☐ please specify

Provide details of implementation plan if the document is new and or complex.

13. Are the monitoring arrangements defined clearly?
   (Tick as appropriate) YES ☐ NO ☐

14. Does submitted guidance conflict with NICE or NSF?
   (Tick as appropriate) YES ☐ NO ☐ If yes, please justify:

Signatures below indicate that the appropriate officers take responsibility for the clinical content, financial resources and performance management of this guidance:

**Principal Author(s)**

Maria Stevens – HR Business Partner

Print Name: ______________________
Signature: ______________________
Date: ______________________

**Departmental Manager(s) or Executive Director(s) if more than one department involved**

Lesley Houfe – Interim Head of HR

Print Name: ______________________
Signature: ______________________
Date: ______________________

**FOR ASSESSOR USE ONLY**

Overall Assessment

Appraised by: ______________________
Date: ______________________

Assessors recommendation to Committee/ CGG:
Approval ☐ Rejection ☐ (See comments below)
Committee/ CGG to discuss ☐

**FOR OFFICE USE ONLY**

Date Considered by PMG

Outcome

Approved ☐ Differed ☐ Rejected ☐

Added to Intranet

By: ______________________
Date: ______________________
Issued to: ______________________

Date Staff notified by trust news: ______________________