

Title: KNOWLEDGE AND SKILLS FRAMEWORK JOINT DEVELOPMENT APPRAISAL POLICY

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Owner: Amanda Wilcock Associate Director of Community & Mental Health Services

Author: Lesley Cavanagh, Workforce Development Manager

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Please note that the intranet version 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.

Chief Executive: Jayne Brown CBE
Chairman: Kevin McAleese OBE



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Preface

This Policy is made between North Yorkshire and York Primary Care are (NYY PCT; 'the PCT') and the recognised staff side organisations, using the mechanism of the Joint Negotiation and Consultative Committee (JNCC) and the local Negotiating Committee (LNC). Throughout this document "the PCT" or "the Trust" should be taken to refer to both: NHS North Yorkshire and York (NHS NYY); and NHS North Yorkshire and York - Community and Mental Health Services (CMHS). This Policy will remain in force until superseded by a replacement Policy, or until terminated by either management or staff side, giving no less than six months notice. The purpose of the notice to terminate the Policy is to provide the opportunity or both parties to renegotiate a replacement Policy. Withdrawal by one party, giving no less than six months notice, will not of itself invalidate the agreement. If agreement cannot be reached on a revised policy, then the matter will be dealt with through the PCT's Grievance Procedure.

1.0 Introduction

The Knowledge and Skills Framework (KSF) is a competency based framework to be used during the appraisal process and is designed to:

- Identify the knowledge and skills that is needed to apply to a post
- Help guide development
- Provide a fair and objective framework, to base the appraisal and development
- Provide the basis of pay progression within the national pay structure

The KSF is made up of a number of dimensions, which reflect the knowledge and skills that need to be used within a post. The dimensions form the main components of the framework. Six dimensions have been identified as core to all NHS roles. These are:

- 1 Communication
- 2 Personal and People Development
- 3 Health, Safety and Security
- 4 Service Development
- 5 Quality
- 6 Equality and Diversity

These dimensions will apply to everyone's job. A further 24 specific dimensions have been identified – these relate to some jobs and not others (see the PCT's KSF Managers guide or the DOH's 'The Knowledge and Skills Framework (NHS KSF) and Development Review Guidance' for a synopsis of all the KSF dimensions).

Employees within the PCT need to apply the knowledge and skills from a number of dimensions to meet the requirements of their job. All posts have an NHS KSF Post Outline, detailing the knowledge and skills required for the post (see Appendix 1 for a Jargon Buster and Appendix 2 for an example of a KSF Post Outline). KSF Post Outlines apply to a role within the PCT, not to a specific individual.

Within each KSF dimension there are four levels (1 – 4). The level required for each role is also stipulated within the KSF Post Outline.

For guidance on writing, amending and approving a KSF Post Outline please refer to the 'The Knowledge and Skills Framework (NHS KSF) and the Development Review Process' – October 2004 document and guidance material.

All new members of PCT staff or individuals taking up a new role will be given the KSF Post Outline applicable to that role within the initial 8-week induction period.

In March 2003, the Department of Health (DOH) published 'The Knowledge and Skills Framework (NHS KSF) and Development Review Guidance – Working Draft. A subsequent revision of the document was made in October 2004.

The aim of this policy is to:

- Guide employee development using KSF as the main driver.
- Provide a transparent and objective framework on which to base employee review and development.
- Provide a fair basis for pay progression within the new national pay structure and encourage lifelong learning.
- Provide a consistent approach to ensure the talents and resources of employees are utilised to their fullest potential.
- Guarantee that each employee has an agreed PDP based on the KSF dimensions, on an annual basis.

2.0 Equality & Diversity Statement

The PCT recognises the diversity of the local community and those in its employment. Our aim therefore is to provide a safe environment free from discrimination and a place where all individuals are treated fairly, with dignity and appropriately to their need regardless of age, disability, race, nationality, ethnic or national origin, gender, religion, beliefs, sexual orientation, gender reassignment or employment status. The PCT recognises that equality impacts on all aspects of its day to day operations and has produced an Equality and Human Rights Strategy and Equal opportunities Policy to reflect this. All policies and procedures are assessed in accordance with the Equality Screening Toolkit, the results for which are monitored centrally.

3.0 Context

To ensure that this policy is viewed in context it should be read in conjunction with the Trust's policies relating to Statutory and Mandatory training, Induction, Workforce Development and HR Recruitment Policies.

Further guidance and other supporting documentation relating to KSF can be found on the PCT (NHS North Yorkshire and York) Learning Zone on the staff intranet site.

4.0 Scope and Definitions

This policy is to be used by reviewers who undertake appraisals and applies to all North Yorkshire and York PCT staff, except for Doctors, Dentists, Directors and any staff not covered by Agenda for Change terms and conditions.

Appraisals should be carried out regardless of the duration of employment within the organisation, for example in cases of temporary and contracted staff. The attached 6 month paperwork (Appendix 4) can be used as a guide, and adapted according to role and duration of employment. Workforce Development can advise further in specific cases.

5.0 Dissimination and Implementation

The policy will be available to all members of staff via the PCT Intranet. Old versions of the policy will be removed following the approval and ratification of the reviewed policy. Workforce Development team can be contacted for further advice.

6.0 Document Control including Archiving Arrangements

Documentation control will be undertaken by the Workforce Development department with regards to this Statutory and Mandatory Training policy. Electronic copies of all previous versions of the policy will be available within the Workforce Development department.

7.0 Consultation

The policy has been developed in conjunction with the Commissioning and Community Mental Health Services Workforce Learning & Development Group, Governance committee, JNCC, LNC, and Health & Safety/Governance Leads.

8.0 Freedom of Information Act 2000 Statement

Any information that belongs to the PCT may be subject to disclosure under the Freedom of Information Act 2000.

9.0 Data Protection Act 1998 Statement

The Data Protection Act 1998 protects personal data, which includes information about staff, patients and carers. The NHS relies on maintaining the confidentiality and integrity of its data to maintain the trust of the community. Unlawful or unfair processing of personal data may result in the PCT being in breach of its data protection obligations.

10.0 Records Management

Records provide evidence and information about the business activities of the Trust and are corporate assets of the Trust. This policy should therefore be retained in line with the NHS Code on Practice Records Management. Compliance with this code will ensure that the Trust's records are complete, accurate and provide evidence of and information about the Trust's activities for as long as required.

11.0 Training and Awareness

All KSF related training is considered high priority for all staff. Training is available across all localities on the following areas:

- .KSF Awareness
- .Developing and using Post Outlines
- .e-KSF training
- .Undertaking a KSF Appraisal / Appraisal skills

All documentation relating to the KSF can be found within the KSF pages on the Staff Learning Zone on the PCT's intranet site.

12.0 Responsibilities

This policy will be implemented by managers within the North Yorkshire and York PCT, supported by the Workforce Development and Human Resources (HR) departments, in conjunction with the KSF Steering Group, which includes staff side and management representatives.

All employees are required by the NHS to have a KSF Post Outline for their job setting out the NHS KSF dimensions and levels that apply. This will be used at recruitment along with the Job Description and the Person Specification (as per the Recruitment and Selection Policy).

This policy describes how appraisals will be undertaken. All managers undertaking appraisals must have fully attended KSF training on undertaking KSF appraisals.

In line with the PCT's commitment to Improving Working Lives and the NHS Knowledge and Skills Framework (KSF) initiatives, the PCT aims to manage and develop all staff members by agreeing clear measurable objectives. These will be related to wider departmental and corporate objectives. Regular reviews of performance will be undertaken using the KSF. Future development and training needs will be discussed and agreed in a fair, open and objective manner.

13.0 What is the Joint Development Appraisal Process?

Both the reviewee and reviewer are responsible for how the individual is applying their knowledge and skills to meet the demands of the post, as described in the post outline.

The purpose of a Joint Development Appraisal is to assess the individual's application of knowledge and skills, fitness for practice and to discuss future work based and personal development objectives. (See appendix 3)

The appraisal process has four main stages:

1. A **joint development review** between the individual and the reviewer, discussing the individual's work/performance over the previous 12 months against the demands of the post, by using the KSF Post Outline and the objectives set at the previous appraisal. This will include how the individual is applying their learning.
2. Development of **new work objectives** for the forthcoming year based on the corporate and service needs of the PCT.
3. Producing an agreed **Personal Development Plan (PDP)**, identifying any learning and development needs from stages 1 and 2 and/or personal objectives and how these objectives will be met.
4. The individual's previous learning and development will be **evaluated** to ensure that the learning and development has been beneficial to the individual, the workplace, and the organisation.

The cycle then continues throughout the 12 month period with regular discussions, learning and evaluation.

13.1 6-Month Review Meeting

To ensure an individual is developing in line with their KSF Post Outline, a review after 6 months should be held using the six month review paperwork (see appendix 4). This is an opportunity to identify any areas where development, training or support is needed for the individual to meet the required expectations. Objectives should be reviewed at this time and any changes made as required to support and enable achievement at the next annual appraisal.

6-month review meetings can be held formally if the reviewer does not often meet with the individual, or the review meeting may be held informally if regular meetings are held with the individual to discuss their performance, work, objectives and development.

13.2 Who is involved in the appraisal process?

The appraisal process can involve up to three people:

- The reviewee
- The reviewer(s)
- The Reviewer's Line Manager, who would undertake a review of the appraisal if required.

13.3 Who can carry out appraisals?

Joint Development Appraisals can only be carried out by those with recognised line management / Professional Accountability responsibilities and who have had the correct level of training to fulfil this responsibility. As there is considerable work and responsibility attached to the role of a reviewer, we recommend that managers should not attempt to perform appraisals on more than 6 - 10 members of staff.

13.4 Gathering Evidence/Portfolios

It is the responsibility of each staff member to maintain and develop evidence, and to bring it to the appraisal meeting to discuss. All staff have access to a Portfolio guide, which provides support in gathering evidence over the year.

Individuals who collate evidence for professional registration, for personal studies or for vocational qualifications (i.e., NVQs), should check/adapt existing portfolios of evidence to ensure it can apply to the appraisal process too.

Information on collating evidence and types of evidence for the appraisal process can be found in the PCT's KSF Appraisal Guide.

13.5 Joint Development Appraisal Meeting

This meeting must take place annually. This meeting must be held a minimum of two months prior to the individual's incremental date.

A suitable time and place should be agreed for the appraisal. When confirming the time and place it is important to do as much planning as possible to ensure that appraisals do not have to be cancelled.

A record of the appraisal discussions must be recorded either via using the appraisal document at appendix 3 OR on e-KSF (see paragraph 14.1)

The outcome of this meeting should be:

- A record of any issues affecting the staff member's work, on which the reviewer has agreed to take action.
- A review of the staff member's work against the KSF Post Outline and gateway (if applicable) for the post. This may specify that the requirements have been met, or that further training and development is necessary prior to pay progression.
- The setting of work objectives for the next 12 months.
- A check of mandatory training, professional registration and CRB status.
- The creation of a PDP.

The record of the appraisal meeting must be agreed and signed off by both the reviewer and reviewee on the relevant pages of the appraisal document (appendix 3). All completed

appraisal dates MUST be recorded by the manager on the relevant months' Appraisal Report (which comes as part of the HR Manager Reports each month) and returned via email to the KSF Co-ordinator for electronic recording purposes.

13.6 Setting Work Objectives

Work objectives need to be discussed and agreed with the individual, to give the staff member a focus and direction for the forthcoming 12 months. The PCT's organisational objectives, and subsequent directorate business plans and team objectives should be cascaded down to an individual level.

It is recommended that an individual has a minimum of two and a maximum of 6 – 8 work objectives. Work objectives can vary from specific projects or implementing new systems to maintaining current levels of customer service, dependent on the level of responsibility within the organisation.

Discussion must be held to decide how the objectives can be achieved, what constraints may prevent achievement of the plan and how both the reviewee and reviewer can evaluate that the objective has actually been achieved.

13.7 Producing a Personal Development Plan (PDP)

The creation of the Personal Development Plan (PDP) follows the assessment of performance using the KSF Post Outline and setting of work objectives, to ensure any issues and development areas highlighted in those stages are actioned within the individual's PDP. A PDP should focus on ensuring that the member of staff makes progress towards fulfilling the KSF Post Outline for the post and can effectively meet the demands of their current post. It should also include any interest in future career development, with a good balance between the individual's interests and wishes, and the needs of the organisation and department.

There needs to be a commitment by both the reviewer and reviewee to achieve the PDP within the agreed period of time; usually, but not always, by the next appraisal meeting. If due to unforeseeable circumstances, the goals are not achieved within the agreed period, then it can (in exceptional circumstances) be possible to carry over part of the PDP to a later period, although this should be seen as the exception rather than the norm. Once agreed, the PDP is the responsibility of the individual to achieve and attain. Reviewers should encourage and support the period review of PDPs to ensure that the post holder has the resources to support them and to make any necessary amendments.

13.8 Prioritisation of Personal Development Objectives

The reviewer should prioritise personal development objectives by taking into consideration the following:

- The need to ensure that the staff member is competent in their area of work.
- Statutory and mandatory requirements that apply to the post and that must be met for employment or for registration.
- The amount of support that is available to the individual on an on-going basis.
- The level of competence across the team.
- Any specific work objectives that the individual needs to meet in their post.

Personal development objectives are to be classified as one of the following:

- Mandatory
- Essential to role
- Desirable to individual
- Desirable to organisation

13.9 Learning and Development Options

The learning and development stage is crucial as it is through learning that staff members develop their knowledge and skills, and the ability to apply these to the demands of their work. This will enable staff members to meet the requirements of their PDP and therefore their KSF Post Outline. Learning can also form an important part of personal and career development.

Reviewees and reviewers will need to jointly identify the following in order to make decisions during the appraisal process and creation of a realistic PDP:

- The statutory and mandatory training requirements for their post (see appendix 3 for the statutory and mandatory training checklist).
- The learning and development opportunities that are available and the most effective way of ensuring the individuals learning needs are met.
- Development opportunities that meet individual learning styles and needs. This may include shadowing; personal study, secondments etc, as well as formal learning programmes (see the PCT's KSF Managers Guide for suggested forms of learning and development).
- The cost (direct and indirect) of the learning and development opportunities (reviewers who are not budget holders must seek authorisation for funding).
- Resources to fund different learning and development opportunities and how to access them.
- Practical issues such as location and timing of learning and development opportunities, travel and access routes, waiting lists and the amount of time to access such opportunities.
- The benefits of individuals gaining formal recognition or accreditation for specific aspects of their learning and development, through work-based qualifications or through academic routes.

13.1.0 Recording Outcomes of Learning and Development Activities

Records of learning activities that the individual has undertaken, is useful evidence. This may include handouts or certificates from formal training provision, output from on-job projects or reflection from experiential learning. Reviewees are encouraged to log the completion of planned or unplanned learning and development activities within their evidence portfolio or on their PDP within e-KSF.

13.1.1 Evaluating Learning and Development Activities

It is important that the learning and development that staff members undertake is evaluated. It helps individuals to reflect on their learning and also feeds information into the organisation on the learning and development that individuals find effective in meeting different learning needs and interests. It also allows for any issues or problems with particular training courses or methods to be addressed.

This evaluation is not the end of the process, but should take both the reviewee and the reviewer back to Stage 1 (see section 13.0) of the appraisal process. The evaluation

outcomes should form the basis of the next appraisal and PDP. Once the cycle has been completed, the information gathered in the earlier stages can be used in the next planning and development stage. There will be more information on which to base decisions and both the reviewee and their reviewer will have a better understanding of the learning and development that is suitable and effective for that individual.

14.0 The Electronic Tool for the KSF (e-KSF)

e-KSF is a web-based system that helps individuals to plan, develop, monitor and update the appraisal documentation online. e-KSF allows all members of staff the opportunity to track their progress against the KSF, to recall work objectives, maintain a PDP and record their reflection/evaluation of learning and development activities. It also enables individuals to view other KSF post outlines in the PCT to see where their career could develop in the future.

14.1 Access to e-KSF

All staff are made aware of e-KSF during the KSF Appraisal training. Staff will receive a username and password from the e-KSF Administrator upon request. Once a password is received, access to the site is via www.e-ksf.org

The only people in the PCT who can see the detail of appraisals are the staff member and direct reviewer. The Workforce Development team will monitor and report on depersonalised information (for example how many people in a team have completed PDPs, or have a certain KSF dimension in their outline) but individual data will not be revealed to anyone else in the NHS apart from the direct reviewer.

e-KSF uses the latest Internet security to ensure that data is kept private at all times.

14.2 The Interface between the Electronic Staff Record (ESR) and e-KSF

The Department of Health and the Welsh Assembly Government have funded a project to link both the ESR and e-KSF to allow the transfer of data with each other and thus provide a more efficient and complete people development solution for NHS organisations in England and Wales.

The link allows the transfer of information concerning new starters/leavers onto the e-KSF system with appraisal dates, and gateway outcomes passed back to the ESR.

Optimum data security is maintained during this transfer by Think Associates (e-KSF) and McKesson (ESR).

15.0 Impact of KSF Appraisal meetings on an individual's pay

At defined points within a pay band; known as 'gateways', pay progression is directly related to the employees' application of knowledge and skills within their post. This is assessed during the JDR meeting using the process outlined in section 13.

In most years normal pay progression will take the form of an annual increase in pay from one pay point within a pay band to the next point, with an expectation that they would occur continuously except in cases involving capability or disciplinary issues.

15.1 Pay Gateways

There are two gateways in each of the nine pay bands. These are called the foundation gateway, and the second gateway.

There will be no national or local quotas for pay progression. All post holders who apply the necessary knowledge and skills to meet the KSF Post Outline for their post and the relevant gateway, will progress through these gateways and pay points.

Currently these gateways are not in operation within the PCT and are classed as “open” until such time that it is deemed appropriate at board level that sufficient resourcing is available to fundamentally support the full implementation of KSF for all staff. Adequate notification will be given via PCT communication streams to inform the date of the closure of the gateways.

15.2 Foundation Gateway

The purpose of the foundation gateway is to check that the individual can meet the basic demands of their post within the first 12 months of employment in that role. The knowledge and skills for that must be applied during this foundation period are shown in the KSF Post Outline as a subset (see appendix 2) of the full KSF Post Outline.

The KSF Post Outline must be given to the individual during their induction period. Both the reviewee and reviewer must be able to demonstrate that the individual meets the subset KSF Post Outline within 12 months of being appointed and this is assessed at the first appraisal meeting.

The foundation gateway applies to all new employees or to existing staff moving roles, regardless of the pay point to which the individual is appointed (with the exception of the pay point immediately below the second gateway and any pay points above this; see section 15.3).

15.3 Second Gateway

The second gateway is set at a fixed point towards the top of each pay band, as dictated by the NHS KSF National Agreement (see table below).

Pay band	Position of Second Gateway Pay Point	
Pay band 1	Before final point	2 – 3
Pay band 2	Before first of last two points	6 – 7
Pay band 3	Before first of last two points	10 – 11
Pay band 4	Before first of last two points	15 – 16
Pay band 5	Before first of last three points	21 – 22
Pay band 6	Before first of last three points	27 – 28
Pay band 7	Before first of last three points	32 – 33
Pay band 8A	Before final point	38 – 39
Pay band 8B	Before final point	42 – 43
Pay band 8C	Before final point	46 – 47
Pay band 8D	Before final point	50 – 51

Pay band 9	Before final point	54 – 55
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To pass through a second gateway, the individual must evidence that the knowledge and skills as shown in the full KSF Post Outline for their post, is applied. This will show that the individual is fully developed for the current role. Passing through the second gateway is discussed and evidenced at the individual's annual appraisal meeting held prior to the relevant incremental date (as above). If the individual has been on track in previous years, there should be no problem with the individual going through the second gateway. Once an individual passes through the second gateway they will progress to the top of the pay band provided they continue to apply the knowledge and skills required to meet the full KSF Post Outline

15.4 Gateway Decisions

Important decisions are made at appraisal meetings that occur prior to an individual going through a pay gateway. There are three possible outcomes of an appraisal meeting at the time of an individual's gateway:

1. Application of KSF and therefore Pay Progression:

The reviewee must have provided enough evidence to show that they have met the requirements of the KSF Post Outline at that gateway (see the PCT's KSF Managers guide for details of evidence). This decision must be recorded on e-KSF or on the JDR documentation and pay progression will take place automatically – there is no need to inform HR/payroll of the decision.

2. KSF is not met by the individual and Pay Increment is deferred:

If the reviewee does not provide enough evidence to show they meet the requirements of the KSF Post Outline at that gateway and it can be demonstrated that the reviewee did not pursue the necessary training and development outlined in their PDP, a decision to defer progression to the next increment on the pay band must be made. See section 15.5 for the next stage of this procedure.

3. KSF is not met because of organisational fault, resulting in Pay Progression:

If the reviewee was unable to meet the requirements of the KSF Post Outline due to management action or inaction, or an organisational fault (i.e., financial constraints, inadequate managerial support as agreed in PDP, release from workplace due to limited human resources, course schedules etc), the individual will automatically progress onto the next point on the pay band.

In these circumstances, the reviewer must follow steps 2 and 3 in section 15.5, excluding completion of a gateway achievement form.

NB: If there has been an agreement to add dimensions to the individual's KSF Post Outline to support the reviewee's future development and career prospects, or the reviewee has developed extra skills that are not required in that post, these are not to be used when making gateway decisions. Only the requirements for the post outlined in the original KSF Post Outline may be used.

15.5 Deferral of Pay Progression at a Gateway

Pay progression to the next increment on the pay band will be deferred until such time that the individual can demonstrate achievement of the subset or full KSF Post Outline as appropriate. The gateway deferral form to halt pay at the current increment should be

forwarded to HR/payroll by the reviewer/departmental manager immediately. After first discussing this option with Human Resources, the following actions should be taken:

1. Arrange and undertake a further formal meeting with the reviewee
Agree a short term action plan including:

- The reason for deferment;
- The KSF dimension/s and levels still to achieve;
- Learning and development to be undertaken with consideration of provision of reasonable resources;
- A review date within three months of initial appraisal meeting

Hold the review meeting (within three months of original appraisal meeting) and determine if the individual is now applying the necessary knowledge and skills relevant to their role, as specified in the KSF Post Outline.

2. If the reviewer confirms that the individual is applying the level of knowledge and skills specified in the KSF Post Outline, pay progression will resume from that date. The reviewer must complete a gateway achievement form (see Appendix 3) and return it to the HR/payroll Department to re-commence pay progression. The individual's annual incremental date will remain unchanged.

3. If reasonable time and resources has been provided and the individual at this stage is still unable to meet their KSF Post Outline, it is recommended that the reviewer seeks guidance from the appropriate Human Resource representative in order to instigate the capability/disciplinary procedure where appropriate.

On rare occasions the individual may be unable to apply their learning in order to achieve their full KSF Post Outline. Good management practices and effective use of the annual appraisal process should ensure the individual has been informed of the issues related to their performance as they occur. Therefore problems with performance should be dealt with well in advance of the appraisal meeting and Second Gateway or several months ahead of the foundation gateway, thus giving the individual adequate opportunity to achieve the required standard.

The reviewer and reviewee should both keep a copy of the appraisal outcomes and any decisions that have been made, or be clear how to access this information via e-KSF.

15.6 Appeals/disagreements at a Joint Development Appraisal

Every effort must be made to ensure that reviewers and reviewees are able to resolve differences of opinion during the review without recourse to formal procedures.

If there is a disagreement over the appraisal, there are three options:

The reviewee can approach a third party to act as a mediator. The third party may be a senior member of staff (i.e., Reviewer's Line Manager), a Staff Side Representative or a colleague.

If they are not able to reach a satisfactory outcome through mediation, the reviewee has the right to request a second review before a final decision is made. In this case the reviewer's line manager (as identified on the appraisal documentation) must undertake an impartial review of the appraisal decision in conjunction with an identified Staff Side Representative if requested. The reviewer's line manager has the right to request further information from both parties to substantiate their respective views. Any decision must be based on objective reasoning and will be non discriminatory

- If the individual is still unhappy with the outcome they can raise the issue under the Grievance Procedure (see local HR Policies).

Where disputes occur which are related to pay gateways, if the appeal is upheld the associated pay will be backdated to the date of their increment.

16.0 Extenuating Circumstances

16.1 Maternity Leave/Adoption Leave

During Maternity and Adoption leave, service is considered to be continuous. Therefore members of staff taking Maternity or Adoption Leave which coincides with their pay gateway, should not be penalised.

An individual taking Maternity Leave or Adoption Leave coinciding with their Foundation Gateway will return to their post after their maternity/adoption leave with the same amount of time remaining to achieve the subset KSF Post Outline for their post. E.g., a member of staff taking maternity leave 4 months into the post would have 8 months on return from maternity/adoption leave, to achieve and pass through the foundation gateway. The individual's pay would be uplifted to the next increment on the date their annual incremental is due and achievement of the KSF Post Outline will be assessed in retrospect.

If a member of staff takes Maternity or Adoption Leave that spans their Second gateway, their pay will be uplifted as if the gateway had been achieved. An appraisal meeting must take place upon their return and an appropriate action plan put in place if required.

If the individual is being performance managed at the time of their maternity/adoption leave commencing, it may be possible to withhold the pay increment until the individual returns to work. The Capability/Disciplinary Policy will give further guidance on this matter.

16.2 Paternity Leave/Parental Leave/Carers Leave

As this period of leave is relatively short, managers are encouraged to ascertain whether a gateway may occur during the absence and plan ahead to undertake the appraisal before the leave of absence occurs. If this is not possible it would be expected that unless the individual is undergoing active performance management, they would pass through the gateway and receive the pay progression. An appraisal meeting must be held as soon as the individual returns from leave.

16.3 Sabbaticals/Career Breaks

Sabbaticals/Career breaks are by definition the choice of the individual therefore if a member of staff chooses to take a sabbatical/career break at any stage during their career their pay progression would be 'frozen' at the pay point they have achieved at their last working day. As a reviewer please ensure Human Resources and payroll are made aware of such 'breaks'. The member of staff therefore returns to work at the same pay point they left on. An appraisal meeting must be undertaken within a few weeks of the individual's return, to agree work objectives and any development needs in line with their KSF Post Outline.

16.4 Long Term Sickness

Where a period of long-term sickness stretches across either a foundation gateway or a Second gateway the individual will pass through the gateway and their pay will be uplifted accordingly. Either immediately before or at the time of returning to work it is essential that a supportive interview be conducted in light of Occupational Health advice as to the

timescale for undertaking the appraisal. This will also apply to staff that are on alternative duties as a result of long-term sickness or injury.

In instances where:

- The individual is confident that they are performing to the required KSF levels, the appraisal can be held as soon as practical.
- In instances where the individual does not feel ready and/or able to perform to the required standard, an appraisal should take place to identify what support and/or development they require to assist them in achieving their competence. In these circumstances, despite the pay increment being made, the individual must be given a reasonable length of time to reach the required standard, which does not place them under undue stress or pressure. These appraisals must be treated with the utmost sensitivity and support in order to aid the individual as opposed to pressurise them.

This will be applicable irrespective of whether the individual is returning to full time work immediately or over a staged period of time.

If, prior to the absence, the member of staff is being actively performance managed and there are clear concerns that the KSF Post Outline may not be achieved, the pay increase may be withheld. Advice should be sought from a HR representative at this point.

16.5 Secondments

Secondments within the NHS are similar to that of Maternity, Paternity and Adoption leave in that service is considered to be continuous. Therefore members of staff taking a secondment, which coincides with a Gateway, should not be penalised. If a member of staff is on a secondment when their second gateway is due they will be deemed to progress through their gateway and their salary on their return to their substantive post will reflect this. An appraisal meeting should take place in retrospect upon their return.

A seconded post will be no different from any other post that comes under Agenda for Change. There will be a KSF Post Outline for the post and appraisals and gateways will take place at the normal times from the individual starting the secondment (where they have been seconded for a period long enough for these conditions to apply).

16.6 Acting up

Refer to the Agenda for Change: NHS Terms and Conditions of Service Handbook sections 6.31 – 6.33. Individuals are encouraged to work towards the foundation gateway of the post in which they are acting up into. If, in exceptional circumstances, the temporary acting up will last more than twelve months, then the individual will be expected to have an appraisal meeting to determine pay progression through the foundation gateway of that post.

Upon commencement of an acting up role, the reviewer must ensure the individual understands the KSF Post Outline for their temporary role.

16.7 Movement to other NHS Jobs

If an individual moves to another post on the same pay band then they will be expected to apply the necessary knowledge and skills for that post as described in the NHS KSF Post Outline. A foundation gateway will not be applicable as the person is in the same pay band, however the appraisal process must still be followed for future years and the second gateway.

If an individual moves to a post in a different pay band then a foundation gateway will be applicable. Please follow the appraisal process as outlined in section 13.0.

16.8 Appointment to a pay band on the pay point immediately below the second gateway (from outside the NHS)

There may be circumstances where an individual is appointed to a pay band on the pay point immediately below the second gateway and the individual has not moved from another job in the NHS (e.g., working for the NHS again after a lengthy career break). In these circumstances the individual would not be subject to the foundation gateway but would be expected to demonstrate the knowledge and skills required for the second gateway by the end of their first year. Care must be taken when appointing to this point, as time must be invested from both the reviewer and reviewee within the first 10 - 12 months, to ensure the individual is competent against the full KSF Post Outline for their role.

16.9 Preceptorship

Preceptorship has been defined as:

'a defined period of time in which two people (a nurse with a student nurse) work together so that the less experienced person can learn and apply knowledge and skills in the practice setting with the help of the more experienced person.'

Any member of staff joining Pay Band 5 as a new entrant will have accelerated progression through the first two pay points of the band, in six monthly steps (i.e., the individual will move up one pay point after six months and a further point after twelve months) providing those responsible for the relevant standards in the PCT (normally the manager) are satisfied with the standard of practice at six months and that they have demonstrated the required knowledge and skills for their foundation gateway by the end of the first year.

17.0 Career Planning

17.1 Reaching the Top of a Pay Band

When the reviewee reaches the top of the pay band and has therefore progressed through the second gateway meeting the full KSF Post Outline for the post, the points in section 15.3 should be followed. The individual has the option to maintain and update their skills relevant to their current post and remain in that position, or they may wish to consider future career aspirations. Passing through the second gateway and reaching the top of a pay band in terms of competency DOES NOT guarantee or indicate a move to the next pay band unless a vacancy becomes available and the individual is successful in the recruitment process.

17.2 Career Progression

If the reviewee achieves full development within their existing role before the second gateway, the following steps should be taken:

- Set activities within their PDP to ensure maintenance of existing knowledge and skills at the level determined in the full KSF Post Outline for their substantive post.

- Consider reviewee's career aspirations and identify career options.

If their identified future career pathway is within the NHS, they can obtain a KSF Post Outline for the desired post via the e-KSF website. You may then wish to:

- Map reviewee against the subset outline for another post.

- Identify additional dimensions, levels or indicators to be added to current post KSF Post Outline.

The PDP should include:

- Activities to maintain existing skills for post.
- Activities to meet additional dimensions and levels added for the consideration of a future career pathway.

This should enable the reviewee to apply competitively for a post that meets their career aspirations when one becomes vacant.

18.0 Monitoring

The Workforce Development team will provide a centralised administrative function using the Oracle Learning Management (OLM) system and e-KSF for all KSF related activity such as:

- KSF Appraisal activity
- The use of the KSF and development reviews;
- Post Outline repository
- Information on training attendance
- The progression of staff through pay gateways

Information will be gathered to enable analysis by occupational group, age, ethnicity, disability and gender, including both full and part time staff.

Employers and staff side representatives, in partnership, will use the results of the monitoring exercise to ensure best practice is being followed. Also, these results will be used to monitor the effectiveness of the system and identify and improve any problems arising.

Where common problems arise for a group of staff in an organisation, managers and staff representatives working in partnership should review the problem in order to try to identify a common solution, which can be applied to as many of the cases as possible.

The PCT and Department of Health will monitor the PCT's application of e-KSF to ensure career development and pay progression is occurring regularly on a non-discriminatory basis.

19.0 Review

This policy will be reviewed in 1 year's time. Earlier review may be required in response to exceptional circumstances, organisational change or relevant changes in legislation or guidance.

20.0 Discipline

Breaches of this policy will be investigated and may result in the matter being treated as disciplinary offence under the PCT's disciplinary procedure.

Appendix 1 Jargon Buster

KNOWLEDGE AND SKILLS FRAMEWORK (KSF):

A framework designed to identify the knowledge and skills required for every role within the NHS and to help guide individuals' development, linking to pay progression.

PERSONAL DEVELOPMENT PLAN (PDP):

This is an agreed plan emergent from the Joint Development Appraisal process focusing on learning and development activities that are to be undertaken to ensure the individual possesses the knowledge and skills that apply to their role.

DIMENSIONS:

A category of knowledge or skill required in a post, similar to competencies. 6 dimensions have been defined as core to the NHS and these will occur in everyone's job. A further 16 specific dimensions have been identified and these will relate to some jobs but not all jobs.

LEVEL DESCRIPTORS:

A further breakdown of the dimensions. The levels range from 1 to 4, each level building on the preceding level and increasing in complexity.

INDICATORS:

These are the actual competencies that individuals need to meet to give a clearer understanding of the knowledge and skills that are required to be applied to that post.

EXAMPLES OF APPLICATION:

Examples of application show how each dimension, level and indicator may be applied to the role. They make the generic descriptions more relevant to an individual and the role.

KSF POST OUTLINE:

A combination of core and specific dimensions with levels and examples of applications set, form a KSF outline for a role. There must be a subset and a full outline for every post.

SUBSET OUTLINE:

The minimum knowledge and skills required to do the job safely within the first 12 months of an individual commencing that role. It is necessary to demonstrate that the subset outline can be met at the Foundation Gateway.

FOUNDATION GATEWAY:

The first point on the pay band where the KSF is linked to pay progression. The minimum knowledge and skills as defined in the subset outline must be met in order to pass through this gateway, 12 months after commencing the role.

FULL OUTLINE:

The knowledge and skills required when you are fully developed within the post. These must be met in order to progress through the Second Gateway.

SECOND GATEWAY:

The second point on the pay band where the KSF is linked to pay progression. This varies depending on which band you are in, being either 1, 2 or 3 incremental points before the top of the pay band.

REVIEWER'S LINE MANAGER:

This is agreed between the reviewer and reviewee and is used should there be disagreements during the Joint Development Appraisal process.

Appendix 2



North Yorkshire and York
Community and Mental Health Services



North Yorkshire and York

NHS KNOWLEDGE AND SKILLS FRAMEWORK

FULL KSF POST OUTLINE

Title of Post: **Post Reference:**

NHS KSF DIMENSIONS	Required?	Level for post				Examples of Application
		1	2	3	4	
CORE DIMENSIONS						
1 Communication	Y					•
2 Personal and people development	Y					•
3 Health, safety and security	Y					•
4 Service improvement	Y					•
5 Quality	Y					•
6 Equality and diversity	Y					•
HWB1 Promotion of health/wellbeing and prevention of adverse effects						•
HWB2 Assessment and care planning to meet health/wellbeing needs						•
HWB3 Protection of health and wellbeing						•
HWB4 Enablement to address health and wellbeing needs						•
HWB5 Provision of care to meet health and wellbeing needs						•
HWB6 Assessment and treatment planning						•
HWB7 Interventions and Treatments						•
HWB8 Biomedical investigation and intervention						•
HWB9 Equipment and devices to meet health and wellbeing needs						•
HWB10 Products to meet health and wellbeing needs						•

THE NHS KSF JOINT DEVELOPMENT APPRAISAL PROCESS

PLANNING INFORMATION

Individual's Full name	
Individual's Post title and Pay Band	
Full Name of Reviewer	
Job Title of Reviewer	
Name of Reviewer's Line Manager (in case of queries)	

Reviewing period: (the past year)	From:					To:				
Is this a KSF gateway review? If so, which?	YES		NO		FOUNDATION		SECOND			
Individual's Incremental date (if applicable)										
Planned date of 6-month progress meeting										
Is the Job description, Person specification and KSF Outline up-to-date for this role:										

<p>General Review of last years work and performance. By Individual:</p> <p>By Reviewer:</p>

<p>General Comment on this appraisal. By Individual:</p> <p>By Reviewer:</p>

Joint Development Appraisal (Must be completed in partnership by individual and manager)

Form should be retained in staff personal file.

From KSF Post Outline			
Core Dimensions	Level Required	Level Achieved	Evidence for Decision
Communication			
Personal & People Development			
Health, Safety & Security			
Service Development			
Quality			
Equality & Diversity			

Specific Dimensions (delete as appropriate)	Level Required	Level Achieved	Evidence for Decision
HWB1 Promotion and Prevention			
HWB2 Assessment & Care Planning			
HWB3 Protection of Health			
HWB4 Enablement to address needs			
HWB5 Provision of Care			
HWB6 Assessment & Treatment Planning			
HWB7 Interventions and Services			
HWB8 Biomedical Investigations and			

Interventions			
HWB9 Equipment and Devices			
HWB10 Products to meet needs			
EF1 Systems, Vehicles & Equipment			
EF2 Environment & Buildings			
EF3 Transport & Logistics			
IK1 Information Processing			
IK2 Collection & Analysis			
IK3 Knowledge & Information Resources			
G1 Learning & Development			
G2 Development & Innovation			
G3 Procurement & Commissioning			
G4 Financial Management			
G5 Services & Project Management			
G6 People Management			
G7 Capacity & Capability			
G8 Public Relations & Marketing			

If Gateway Year – has Gateway been achieved

Yes/No

Reviewer's Signature

Reviewee's signature

.....

.....



WORK OBJECTIVE SETTING



Performance Objective:	Does this relate to a Corporate/Organisational or Team/Service objective?	Constraints Identified	Action Plan and Evaluation Process	TO BE COMPLETED THE FOLLOWING YEAR: Objective Achieved / Not achieved? Comments:

STATUTORY AND MANDATORY TRAINING RECORD/CHECKS (see training policy)

Staff Group	Description	Frequency	Date up-date required:	Method*
Group 1 Applicable to ALL NHS NY&Y staff - regardless of whether their role is clinical or non-clinical	Induction (Corporate)	Once only		CBLS
	Equality & Diversity	Once only		CBLS
	Fire	Annually		CBLS
	Infection Control (incl. Hand Hygiene)	Every 3 Years		CBLS
	Health, Safety, Security and Incident Reporting	Every 3 Years		CBLS
	Information Governance Level 1	Annually		CBLS
	Manual Handling – Non Patient Handlers – Theory	Every 2 Years		CBLS
	Mental Health Legislation (inc MCA, DOLS & Mental Health Act ov.)	Once only		CBLS
	Safeguarding Adults (Awareness)	Every 3 Years		CBLS
	Safeguarding Children Level 1	Every 3 Years		CBLS
Group 2 Applicable to: NHS NY&Y staff who have direct contact with patients - regardless of whether their role is clinical or non-clinical	Basic Life Support (Resuscitation)	Annually		
	Conflict Resolution	Every 3 Years		
	Fire – On Site training	Every 2 Years		
	Infection Prevention and Control Course *	Annually		
	Information Governance – Level 2	Annually		
	Manual Handling – Patient Handling (Practical)	Annually		
	Manual Handling – Patient Handling (Theory)	Every 2 Years		
	Mental Capacity Act & DOLS Level 2	Every 2 Years		
	Personal Safety & Security	Once only		E-Learning
	Safeguarding Children Level 2	Every 3 Years		
Group 3 Applicable to NHS NY&Y staff with a specialist role - regardless of whether their role is clinical or non-clinical	Blood Transfusion Process	Annually		
	Breakaway	Annually		
	Care Programme Approach – Overview	Every 3 Years		
	Care Programme Approach – Level 2	Every 3 Years		
	Control and Restraint (Adult or Elderly)	Annually		
	Fire Warden Training	Every 2 Years		
	Food Hygiene Level 3	Once only		
	Information Governance Level 3	Annually		
	Investigation of Incidents, Complaints & Claim	Once only		
	Lone Worker	Every 3 Years		
	Manual Handling (Specialist) & Patient Handling (Theory)	Annually		
	Medical Devices	Once only		
	Medicines Management (non-medical Prescribing)	Once only		
	Mental Capacity Act & DOLS Level 3	Annually		
	Mental Health Act Level 3	Annually		
	Mental Health Risk Assessment	Every 3 Years		
	PSTS (Theory)	Once only		
	Risk Assessment	Every 3 years		
	Safeguarding Children Level 3	Annually		
	Safeguarding Children Level 4	Annually		
	Safeguarding Adults Level 1 (Alerter)	Every 3 Years		
	Safeguarding Adults Level 2 (Responder)	Every 3 Years		
	Safeguarding Adults Level 3 (Investigator)	TBC by NYCC		
Safeguarding Adults Level 4 (Chairing)	TBC by NYCC			
Vaccination & Immunisation	Every 2 Years			
Other Resuscitation e.g Intermediate Life Support in the Community, DNAR, Driver Technician, Dental	Annually			
Completion of the Blood Transfusion Competency Assessment? Yes/No	Every 3 Years			
Completion of Safeguarding Children Competency Assessment Tool? Yes/No	Every 3 Years			

* Please indicate whether training has been undertaken via Face to Face / E-Learning / Workbooks

For further guidance on Statutory and Mandatory training please see the information within the Staff Learning Zone found on the North Yorkshire & York intranet site or call 01653 605 715.

PROFESSIONAL REGISTRATION STATUS (if applicable) Checked: Yes/No Expiry Date:

Personal Development Plan

What are your development objectives for the next 12 months?	Category*	KSF Dimension linked to	What training or development will you undertake to achieve this objective?	What evidence will you look for to show you have achieved your objective?	When will your objectives be completed and revised?

Signed: Reviewee Date Reviewer Date

* Category: Please indicate whether the objective meets a statutory/mandatory, organisational or personal/career development need

For the attention of the Reviewer: Post-Appraisal Check list

Once the appraisal has been completed and the paperwork signed by both the reviewee and reviewer, please ensure that the follow steps have been taken:

1. Register completion of Annual Appraisals with Workforce Development

It is essential that you register the appraisal completion date so that the organisation can monitor and report that staff have had their appraisals.

To register, you need to record the completion date of any appraisals that have taken place that month on the [Appraisals Return spreadsheet that is sent to the manager registered to receive reports for your cost centre](#). The report, including the dates, needs to be returned by email to faye.pickard@nyypct.nhs.uk in the Workforce Development team. Please note that you do not need to send the form back if no appraisals have taken place that month.

To [register](#) to receive these reports please complete the HR 25 form [available here](#). Please return to the Workforce Information Team at Carrick House, Thurston Road, Northallerton, North Yorkshire, DL6 2NA

Deleted: HR Manager Report which is emailed to those staff who have signed up to receive them on a monthly basis

Deleted: sign up

Deleted: attached

2. Optional – Complete the Team Appraisal Tracker

The tracker attached to this paperwork is designed to help Managers and Team Leaders to track which staff are due appraisals and when. This does not need to be returned to Workforce Development but is designed to help the planning process and ensure that staff are up to date with their appraisals. Managers should retain this document and use a new copy every year.

3. File the paperwork confidentially

The signed and completed appraisal paperwork must be retained by the manager within the individuals' personal file, with a photocopy for the individual to keep.

If you have any questions regarding your appraisal or KSF, please contact Workforce Development on 01653 605716. *Thank you*

Appendix 4

THE NHS APPRAISAL AND KSF JOINT DEVELOPMENT 6 MONTHLY REVIEW

(To be used for New Starters, temporary staff and as a record of the 6 Monthly Review Meeting)

Individual's Full Name		If a New Starter, has Induction been completed? Y/N
Post Title		Have Statutory & Mandatory Training Requirements been identified? Y/N (Please see intranet for further guidance) Have Statutory & Mandatory Training Requirements been undertaken? Y/N
Full Name of Reviewer		
Date of Last Appraisal/ Review if applicable		

General Comment on progress made since last appraisal / commencement in Post

By Individual	
By Reviewer	

Outstanding / Additional / Amended Work Objectives

Performance Objective	Does this relate to Corporate / Organisational Team / Service Objective?	Constraints Identified	Action Plan

Outstanding / Additional / Amended Personal Development Plan

Development Objectives	Category i.e Stat / mand/ org/ personal	KSF Dimension Linked to	Action plan	Evidence	Completion by:

Date of planned Appraisal / Review.....

Signed:

Reviewee:..... Date:..... Reviewer:..... Date:.....

Please retain in individuals personal record for future reference