



Royal College
of Nursing

Agenda for Change and nurses employed outside of the NHS



Foreword

Agenda for Change (AfC) is the new pay and careers modernisation package covering the million plus employees who work for the National Health Service across the UK. Implemented for all NHS staff from October 2004, not only will the changes impact on pay, grading, terms and conditions, they will also offer greater opportunities for personal development and an enhanced career pathway.

One in four RCN members works beyond the NHS and you too need and deserve fair pay and career development. The RCN is actively using AfC to help improve the working lives of members employed outside the NHS – in the independent health care sector, in higher education and in general practice.

We have already succeeded in gaining incentives to introduce AfC into the new General Medical Services (GMS) contract. Practices that compete for nurses with their local NHS will do better in recruitment and retention if they introduce AfC. We are actively working with independent sector health care employers to help them understand how the new system is intended to work and how it can help them recruit and retain nurses. We are already in discussion with higher education employers about the need to make academic nursing salaries competitive with those that the new system will be offering.

The RCN has been at the heart of NHS negotiations and we are satisfied that the new system is fair, transparent and UK-wide. Moreover, we believe that it provides the right rewards to recruit, retain, and operate. Now we are working hard to help ensure implementation gets off to the best possible start and we are doing this in partnership with employers, governments and other unions. Many members are coming forward to train as RCN representatives, gaining the skills and knowledge that will help to get the new system right from the beginning.

This RCN guidance has been developed for nurses and employers who provide health care outside NHS structures. Use it to understand the new system and its effect on you, whether you are a manager, employer or practitioner.

The goal is something we can all agree on: recruiting, retaining, developing and rewarding a quality nursing workforce that will continue to shape and deliver the care our patients and communities deserve.

Beverly Malone
RN, PhD, FAAN
RCN General Secretary

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About this guidance

This RCN guidance:

- outlines the AfC proposals and draws some comparisons with the existing pay, grading and conditions package for nurses. The terms and conditions of service outlined in this document are to be reviewed in 2004 as a result of early implementer experiences. This review may result in some elements of the package being revised and the RCN will update this guidance in light of any changes*
- considers the impact AfC will have on the different employment sectors
- provides a rationale for employers to pay nurses using AfC rates.

It also offers useful information for nurses and employers working within:

- independent hospitals
- independent schools
- charities
- the voluntary sector
- care homes
- occupational health
- the Ministry of Defence
- the Prison Service
- the Health Protection Agency (HPA)
- the National Care Standards Commission (NCSC) and its successor bodies, the Commission for Healthcare Audit and Inspection (CHAI) and the Commission for Social Care Inspection (CSCI)
- higher education
- GP practices.

* The most up-to-date version will always be available on the RCN website at www.rcn.org.uk

What is Agenda for Change?

AfC is a comprehensive pay and conditions package that has been negotiated and agreed between the Department of Health, the NHS Confederation and health service unions, including the RCN.

It encompasses:

- job evaluation
- pay structure, including a move from grades to new pay bands
- the role of the pay review bodies
- terms and conditions of service, including recruitment and retention
- career and pay progression, including the NHS Knowledge and Skills Framework (KSF).

Job evaluation

The job evaluation scheme has been developed specifically for the NHS by a group of employers and trade union representatives, supported by independent experts in the field.

Underpinned by the principle of equal pay for work of equal value, its aim is to ensure that all staff are rewarded fairly. In practice, this means that a post is graded, rather than an individual employee. A point score is determined that matches a particular job to a pay band, with jobs that score similarly being brought together into a common band.

The majority of NHS jobs will be assimilated into these new pay bands using nationally agreed 'job profiles' that have already been evaluated and slotted into an appropriate band. Each profile includes a rationale that describes the evaluation decision, factor by factor. More information on nursing profiles is available by visiting the RCN's website at: www.rcn.org.uk

Potentially, any working environment may have jobs that are not covered by national profiles and require further evaluation. In the NHS, these will be evaluated locally, using the national framework.

Where the RCN is recognised, we will be working with employers to ensure the most effective use of the framework. We will also be working with appropriate RCN forums to produce profiles of jobs that are distinctive within the independent and non-NHS public sector. These will also be made available via the RCN website.

Pay structure

Under AfC there will be three pay spines in the NHS, each containing a series of bands. These will be broader than the current Whitley grades. Following job evaluation, every member of staff working within the NHS will be assigned to one of these pay bands. For nurses, this new system will replace clinical grading.

Each pay band will have several points and it is expected that staff will progress upwards by one pay point each year. By the time a nurse has reached the top of their particular band, they should be fully developed within their post, with their pay remaining at the top point for that band. Nurses who change jobs, taking on a post in a higher band, should progress upwards by one point each year until they reach the top of the new band.

Here are some examples of jobs and their corresponding pay bands:

- health care assistant with a level 3 vocational qualification – band 3
- newly qualified nurse – band 5
- specialist nurse, currently grade F – band 6
- ward manager or sister, currently grade G – band 7
- practice nurse with a relevant qualification – band 6
- school nurse with a relevant qualification – band 6.

AfC pay scales, annual salaries 2004/05

Band 1	Band 2	Band 3	Band 4	Band 5	Band 6	Band 7	Band 8				
								Range A	Range B	Range C	Range D
10,762	10,975*	11,668*	13,479*	15,877*	18,913*	22,057*	30,155*	34,417*	39,958*	47,949	
11,135	11,508	12,147*	14,278*	16,516*	19,819*	23,442*	31,114*	35,802*	41,982*	50,080	
11,508	11,827	12,733*	14,811*	17,049*	20,778*	24,827*	32,179*	37,187*	44,326*	52,425	
11,827	12,147	13,266	15,504	18,114	21,630	26,106	33,298	38,786	46,671	55,941	
	12,520	13,745	15,877	18,647	22,483	26,958	34,417	39,958	47,949	57,539	
	12,893	14,278	16,463	19,180	23,442	27,917	35,802	41,982	50,080	59,937	
	13,266	14,598	17,049	19,819	24,401	29,302	37,187	44,326	52,425	62,867	
	13,745	15,024	17,581	20,458	25,253	30,155	38,786	46,671	55,941	66,063	
	14,278	15,504	18,114	21,044	26,106	31,114	39,958	47,949	57,539	69,260	
		15,877	18,647	21,630	26,958	32,179					
				22,483	27,917	33,298					
				23,442	29,302	34,417					

* Pay rates in italics are special transitional points, which apply only during assimilation to the new system.

AfC pay scales, annual salaries 2005/06

Band 1	Band 2	Band 3	Band 4	Band 5	Band 6	Band 7	Band 8				
								Range A	Range B	Range C	Range D
11,109	11,329*	12,044*	13,914*	16,389*	19,523*	22,768*	31,127*	35,527*	41,246*	49,496*	
11,494	11,879	12,539*	14,739*	17,049*	20,458*	24,198*	32,117*	36,957*	43,336*	51,695*	
11,879	12,209	13,144*	15,289*	17,598*	21,448*	25,628*	33,217*	38,387*	45,756*	54,115*	
12,209	12,539	13,694	16,004	18,698	22,328	26,948	34,372	40,036	48,176	57,745	
	12,924	14,189	16,389	19,248	23,208	27,828	35,527	41,246	49,496	59,395	
	13,309	14,739	16,994	19,798	24,198	28,817	36,957	43,336	51,695	61,870	
	13,694	15,069	17,598	20,458	25,188	30,247	38,387	45,756	54,115	64,894	
	14,189	15,509	18,148	21,118	26,068	31,127	40,036	48,176	57,745	68,194	
	14,739	16,004	18,698	21,723	26,948	32,117	41,246	49,496	59,395	71,494	
		16,389	19,248	22,328	27,828	33,217					
				23,208	28,817	34,372					
				24,198	30,247	35,527					

* Pay rates in italics are special transitional points, which apply only during assimilation to the new system.

Pay Review Body (PRB)

The PRB has confirmed the three-year pay deal attached to AfC, beginning in April 2003, which will give a 3.225 per cent pay rise each year. Under AfC, there will also be an assimilation payment made to nurses who are transferring to the new system. On average, most nurses will receive around a 15.8 per cent pay increase over three years.

Terms and conditions

With its package of harmonised terms and conditions, AfC simplifies the current complex and cumbersome system that is based on national and local pay variations. In the future, regardless of their professional or industrial grouping, all NHS staff will be covered by the same terms and conditions.

According to the RCN's membership survey of 2003 (RCN, 2004)*, pay and workload are still viewed very negatively, showing little or no change over the last five years. For example, three-quarters of nurses say they could be paid more for less effort if they left the profession. The RCN believes that the introduction of AfC will begin to change these perceptions.

Meanwhile recruiting and retaining skilled staff remain key issues for health care. The RCN survey found that more than one in 10 nurses are already planning to leave nursing, with 29 per cent saying they would leave the profession if they could. In the next two years almost a third of nurses are planning to leave their current employer. The data also shows that as careers progress, more nurses opt for jobs with flexible hours, with the numbers of nurses who work part-time now at 40 per cent – a rise of 5 per cent over the last decade.

AfC allows employers to respond locally to recruitment and retention challenges with the introduction of two new premiums. These are:

- **Long-term**

This allows up to 30 per cent extra on basic pay being paid to individuals in posts that are considered hard to recruit or where retention is difficult, as indicated by local labour market conditions. These payments are pensionable and protected.

- **Short-term**

This applies where conditions leading to a staffing shortage are expected to be short-term, with the need for an incentive likely to disappear in the near future. The rate is agreed locally and not included in any pension calculations.

Current cost of living supplements paid to nurses will be converted into recruitment and retention premiums. Either of these payments may also be awarded to staff who are employed to work on shifts considered to be difficult to recruit, being paid in addition to the nationally agreed shift payment system.

* Royal College of Nursing (2004) *Stepping stones: results from the RCN membership survey 2003*. London: RCN. Publication code 002 235, or available to download from www.rcn.org.uk

Here is a summary of the terms and conditions set out in AfC.

- **Hours of work**

All full-time NHS staff will have a working week of 37.5 hours, excluding meal breaks.

- **Overtime payments**

All staff in bands 1 – 7 will be eligible for overtime payments at time-and-a-half for work in excess of the standard 37.5 hours working week, with the exception of overtime worked on the eight public holidays which will be paid at double time.

- **Annual leave**

Length of service	Annual leave and general public holidays
On appointment	27 days and 8 days
After five years' service	29 days and 8 days
After 10 years' service	33 days and 8 days

Note: For part-time employees, the RCN understands that while annual leave is calculated on a pro-rata basis, public holidays are not. The RCN believes that part-time employees – regardless of their pattern of work or contracted hours – have an entitlement to eight days of public holidays, in addition to their annual leave entitlement. This position will be clarified within the terms and conditions review.

- **Sick leave**

Length of service	Entitlement
During first year	one month's full pay and two months' half pay
During second year	two months' full pay and two months' half pay
During third year	four months' full pay and four months' half pay
During fourth and fifth years	five months' full pay and five months' half pay
After five years	six months' full pay and six months' half pay

- **Shift payments**

To rationalise existing payments for shift working, unsocial hours and so forth, new pay supplements apply to working patterns that involve significant levels of work that take place at the following times:

For staff in pay bands 1-7

Any time worked before 7.00am or after 7.00pm, Monday to Friday

Any time worked on Saturdays, Sundays or Bank Holidays

For staff in pay band 8

Any time before 7.00am or after 10.00pm, Monday to Friday

Any time worked before 9.00am or after 1.00pm on Saturdays and Sundays, and any time worked on Bank Holidays

Supplements will be calculated on the basis of the average amount of work an individual is expected to undertake. The hours below are calculated on the basis of full-time hours and should be pro-rata for part-time workers.

Average hours worked in defined periods	Supplement as % of basic salary	
	Bands 1-7 by local agreement	Band 8
Up to 5		
More than 5 but not more than 9	9	9
More than 9 but not more than 13	13	10
More than 13 but not more than 17	17	10
More than 17 but not more than 21	21	10
More than 21	25	10

- **On-call**

Staff who must be available to provide on-call cover outside their normal working hours will receive a fixed pay supplement, calculated as follows.

Frequency of on-call	Supplement as % of basic pay
1 in 3 or more frequent	9.5
1 in 6 or more but less than 1 in 3	4.5
1 in 9 or more but less than 1 in 6	3.0
1 in 12 or more but less than 1 in 9	2.0
Less frequent than 1 in 12	by local agreement

Staff who are called into work during a period of on-call will receive recompense for the actual work done at the overtime rate.

- **London allowance**

Allowances are calculated on basic pay – plus the value of any long-term recruitment and retention premium – but subject to a minimum and maximum level of extra pay as follows:

From 1 April 2004

	% of basic pay	Minimum	Maximum
Inner London	20	£3,197	£5,328
Outer London	15	£2,664	£3,729
Fringe	5	£799	£1,385

From 1 April 2005

	% of basic pay	Minimum	Maximum
Inner London	20	£3,300	£5,500
Outer London	15	£2,750	£3,849
Fringe	5	£825	£1,430

Career and pay progression

According to the RCN’s membership survey of 2003, nurses’ concerns are around a lack of career prospects and opportunities to develop, with three-fifths saying that it will be difficult to progress from their current grade.

Under AfC, every member of staff will have an annual development review, which will include appraisal and assessment against the new NHS Knowledge and Skills Framework (KSF). This scheme supports the development of personal development plans, with links to continuing professional development.

The KSF is designed to:

- identify the knowledge and skills that each individual needs to apply in their post
- help guide the development of individuals
- provide a fair and objective framework on which to base review and development for all staff
- provide the basis of pay progression in the service.

In most years pay progression will take the form of an annual increase in pay from one pay point in a pay band to the next, unless there are serious concerns about how the individual is undertaking the current role. The expectation is that most staff will progress through defined points in a pay band (known as gateways). Access to higher pay points will depend on demonstrating the application of knowledge and skills to a defined level.

Gateways occur at two points. The foundation gateway relates to the knowledge and skills that need to be applied by newly appointed staff, along with planned development for up to 12 months. The second gateway relates to the knowledge and skills that need to be applied and demonstrated by someone fully developed in a post.

For most nursing staff, the second gateway will be before the first of the final three incremental points. Here, the individual's development will be assessed and measured against the personal development plan established at the foundation gateway. Staff will then be expected to move through the gateway to the last incremental points for their pay band. Incremental progression between the first foundation point and the final gateway will be automatic. For nursing staff, this ensures that continuing professional development and competency are placed on a firm and recognised setting within the NHS.

If you are a member of the RCN and would like help to develop your portfolio – including logging your achievements, learning and evidence – visit the RCN's Learning Zone at: www.rcn.org.uk

What are the implications for the independent sector?

While the NHS remains the major employer of nurses within the UK, there is significant growth in the independent health care sector. This means that there is increasing competition for nurses, with every employer needing to remain competitive with the NHS.

In part, this requires them to use NHS terms and conditions as a benchmark for what they are able to provide for their prospective employees. Increasingly, nurses are looking critically at what an employer has to offer, not only in terms of their working life, but also in terms of their lives outside work. For example, as the RCN's membership survey of 2003 clearly shows, family-friendly or flexible working arrangements are becoming an important component of a nurse's employment package. A survey of RCN members in 2001/02 indicates that nurses working in the independent sector are more likely (27%) to cite pay as a reason for changing employers compared with nurses working in the NHS (12%).

As the job evaluation system has been developed on equal pay principles, AfC offers employers protection against equal pay claims. Employers outside the NHS can access a comprehensive system of pay and conditions, at minimal expense, that has been developed specifically for health care providers.

The RCN's role

The independent sector is complex, encompassing everything from small care homes to large acute hospitals. As a result, the sector has developed pay rates and conditions that reflect both the nature of the environment and the demands of the wider labour market.

Independent sector providers have always been aware of NHS pay rates and conditions and while some have chosen to pay below those rates, others are paying more. The RCN will continue to recommend that pay within the independent sector should be based on NHS rates. This is founded on the belief that wherever nurses work, they should receive the same rate for a job of equal value.

Where the RCN has achieved formal recognition, we are working with employers to help them gain a more detailed understanding of the AfC package, including where their own nursing jobs fit against national profiles.

In addition, the RCN understands the impact that fees paid by local authorities to care homes have on an employer's ability to adopt AfC. At the RCN's Congress in 2003, members voted unanimously for the RCN to lobby government to recognise this and increase the fees paid to care homes.

The public sector

Currently, nurses working for the Ministry of Defence and the Prison Service are employed on NHS terms and conditions. The RCN expects AfC to be applied to these groups over a period of time and is working with employers to ensure it is fully implemented.

The picture is more complex for nurses employed by the Health Protection Agency (HPA), the National Care Standards Commission (NCSC) and its successor bodies, the Commission for Healthcare Audit and Inspection (CHAI) and the Commission for Social Care Inspection (CSCI). Currently, staff are employed under a mixture of NHS, Department of Health, local government and locally developed pay and conditions of service.

In the longer term, rather than maintaining three or more different models of pay and conditions of service, these employers have indicated a wish to establish their own. In any future negotiations, the RCN will be advocating the application of AfC.

Higher education

Higher education is facing difficult times. From the available data, it's clear that nurse lecturers feel workload is a major issue affecting retention. In addition, they do not feel valued in terms of the role they perform and are unhappy with the quality of teaching they are able to offer. For example, in 2001 an RCN snapshot survey showed that lecturers regularly worked extra hours and had little time for student supervision or their own professional development. Research also reveals that 70 per cent of nurse lecturers report a significant increase in class sizes and this growth is associated with an increase in teaching related administration.

Already academic salaries trail behind NHS rates of pay and may appear even less appealing in light of the increasing workload pressures in universities. The challenge for higher education is that more attractive terms and conditions in the NHS may further adversely affect the recruitment and retention of nurse lecturers. For example, new career progression opportunities – including guaranteed continuing professional development – may ensure that recruitment becomes as big an issue as retention in this sector.

The RCN is working with the relevant unions, including the National Association of Teachers in Further and Higher Education (NATFHE), to raise the profile of recruitment and retention, lobbying for solutions at UK-wide and university levels.

General practice

Practice nurses have consistently signalled their desire to be employed under AfC. Their strongly held view is that, while they may be employed by independent contractors, invariably they work closely with NHS staff to ensure that targets are met. In other words, practice nurses are an integral part of the NHS family.

The new General Medical Services (GMS) contract makes additional funding available to practices that pay staff AfC rates. Within the contract, AfC is described as part of a best-practice framework and is linked to financial rewards for those GPs who implement it.

In addition, practice nurse profiles have been developed. The majority of practice nurses will slot into band 6 of the new pay system, where many specialist nurse roles are placed. However, practice nurses with no post-basic qualifications relevant to general practice who are working as part of a larger team, under the supervision of a band 6 or 7 experienced practice nurse or nurse practitioner, may find themselves within band 5. Primary health care nurse consultants employed by the primary care trust (PCT) will be within band 8.

The RCN is working with the Department of Health, employer groups, the Royal College of General Practitioners (RCGP), the British Medical Association (BMA) and other organisations to ensure that GPs are fully aware of the benefits AfC will bring to their practice and patient care. More detailed RCN guidance for practice staff will become available.

Conclusion

The RCN strongly recommends that:

- wherever nurses work, they should receive the same rate of pay for a job of equal value
- independent sector pay rates should be based on those within the NHS
- every employer should consider the impact of AfC on their ability to recruit and retain nursing staff
- employers outside the NHS should use AfC as a benchmark for their own terms and conditions of employment.

Further information

Visit the Department of Health's website at: www.dh.gov.uk for more information including:

- a job evaluation handbook
- job profiles
- guidance on the NHS Knowledge and Skills Framework (KSF)
- a staff booklet.

You may also find the following RCN publications useful. All are available to members by calling RCN Direct on: 0845 772 6100. Alternatively, some of these publications can be downloaded from the RCN website at www.rcn.org.uk

- *Nurses employed outside the NHS – recommended pay, terms and conditions 2003 – 2004* (publication code: 002 047)
- *Nurses in the independent sector. Results from the RCN membership surveys 2001/02.* (Web only publication available at www.rcn.org.uk)
- *Practice nurses and nurse practitioners – recommended pay, terms and conditions 2003 – 2004* (publication code: 002 034)
- *Shifting patterns: a guide to employee friendly working* (publication code: 001 500)
- *Stepping stones: results from the RCN membership survey 2003* (publication code: 002 235)

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