
Continuing fitness to practise Professional Liaison Group

Briefing on NHS KSF links to regulation and education

Executive summary and recommendations

Introduction

The attached paper is from Thelma Harvey (a member of the PLG), and provides the group with a briefing on the National Health Service (NHS) Knowledge and Skills Framework (KSF) and its links to regulation and education.

Decision

This paper is for discussion.

Background information

None

Resource implications

None

Financial implications

None

Appendices

None

Date of paper

30 April 2008

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Introduction

The Agenda for Change National Agreement covers all NHS staff except doctors, dentists and some board level and other senior managers. The Agreement marks a radical change to NHS pay and conditions and was reached through partnership working between management and trade unions and professional bodies. There are three key strands within the Agreement:

- job evaluation which is based on equal pay legislation and has enabled staff to move from the old pay systems and spines to a new integrated pay system
- the NHS Knowledge and Skills Framework (NHS KSF) and associated annual development review process which form the basis of career and pay progression. In most years pay progression will take the form of an annual increase in pay from one pay point within a pay band to the next. At two defined points in a pay band – known as ‘gateways’ – decisions are made about pay progression as well as development.
- harmonisation of terms and conditions

The NHS Staff Council has overall responsibility for the implementation and monitoring of the Agenda for Change (AfC) pay system.

The NHS KSF Group

The NHS KSF was developed in partnership by the KSF Development Group (KSFDG) and published in October 2004. As there will be a continuing need to monitor and evaluate the use of the KSF the group has been reconstituted as the Knowledge and Skills Framework Group (KSFG) and is a national technical sub-group of the NHS Staff Council. The KSFG will continue to work in partnership in accordance with principles set out in the introductory section to the Agenda for Change Final Agreement (January 2005). Its membership will include representatives of NHS organisations in England and from health departments in Scotland, Wales and Northern Ireland together with representatives of the NHS Joint Unions. The KSFG has joint chairs drawn from employer and Joint Union representatives.

The NHS KSF

The NHS KSF defines and describes the knowledge and skills which NHS staff need to **apply** in their work to deliver quality services. It provides a single, consistent, comprehensive and explicit framework on which to base review and development of all staff. The NHS KSF is made up 30 dimensions that identify broad functions required by the NHS to provide a good quality service to the public. Six of the dimensions are core which means that they apply to every post in the NHS. The other 24 dimensions are specific applying to some but not all jobs in the NHS. Each of the dimensions has four levels and related indicators that describe increasing complexity and demands in the application of knowledge and skills.

The NHS KSF has been developed in partnership and has the commitment of all staff groups. It will continue to be delivered in partnership and in this way will support:

- an individual's development in post – to ensure that the individual is effectively carrying out the job in which they are employed
- an individual's career development – to enable individuals to progress throughout their working lives bringing positive outcomes for the individual and for the NHS
- the development of services – to ensure that the way in which people are paid and rewarded in the NHS supports the development of services and that staff will continually develop as services change to meet the needs of patients and the public.

The NHS KSF will be implemented in three major ways in the service:

- 1 by the development of NHS KSF post outlines for all NHS posts so that NHS organisations, employers, managers and employees are all clear and have the same expectations of specific posts and how they contribute to the delivery of effective services for patients and the public
- 2 by using the NHS KSF post outlines as the basis of reviewing and developing individual staff members within posts introducing (at a minimum) a mandatory annual review of how effectively the individual is applying their knowledge and skills to meet the expectations of the post (as expressed in a KSF post outline), the development of a Personal Development Plan (PDP), support to learn and an evaluation of learning
- 3 by using the information contained within NHS KSF post outlines and their links to services to inform individuals' decisions in relation to career routes and pathways.

The implementation of AfC as a whole and the NHS KSF specifically across the NHS will help to ensure that services are patient-led and support their delivery. The fact that every member of NHS staff should be clear about the expectations of their post and be supported in their development, including an annual review of progress (linked to pay at the gateways), means that for the first time the NHS has a service-wide approach applicable to all AfC staff.

The six core dimensions within the NHS KSF have been agreed as being of vital importance to every post within the NHS. The core dimensions and their contribution to a quality based NHS are set out briefly below.

Core 1 Communication

This dimension reflects the fact that effective communication is a key aspect of all jobs in the NHS whether the communication is with patients, the public, between colleagues or with outside agencies.

- Core 2 Personal and people development This dimension stresses that ongoing personal development is a requirement of all posts in the NHS in order that services continue to meet the needs of patients, clients and the public. It emphasises that every NHS staff member should take an active part in learning and development year on year and review their own work.
- Core 3 health, safety and security This dimension emphasises that it is vital that everyone takes responsibility for promoting the health, safety and security of patients and clients, the public, colleagues and themselves. This will help ensure that all services and parts of the NHS contribute to health promotion, protection and improvement.
- Core 4 Service improvement This dimension embeds the ongoing improvement of services at the heart of every single post in the NHS. It stresses that every staff member has a role in implementing policies and strategies and in proactively identifying ways in which services can be improved for patients and the public.
- Core 5 Quality This dimension relates to maintaining high quality in all areas of work and practice including the important aspect of team working and effective use of resources. This dimension supports the use of different approaches to quality such as evidence-based practice, standards, guidelines, protocols, policies and systems.
- Core 6 Equality and diversity This dimension emphasises that it is the responsibility of everyone to act in ways that support equality and diversity and that it is related to the actions of everyone – users of services, the public in general, work colleagues, employees, people in other organisations. There are expectations that everyone will be treated with dignity and respect and at a minimum other people's perspectives will be acknowledged.

The 24 specific dimensions relate to the range of different functions that need to be carried out in the NHS for the service to operate effectively as a whole. As well as the dimensions that relate to different aspects of health and wellbeing, there are a number of dimensions that relate to information and knowledge, learning and development, estates and facilities, and general functions (such as different aspects of management, development and innovation, capacity and capability, and marketing and public relations).

In relation to health professionals employed in the NHS the health and wellbeing dimensions and the management dimensions are the most directly relevant but learning and development may also be relevant in some posts. Each of the levels and dimensions related to health and wellbeing embeds the expectation that NHS staff will:

“respect people’s dignity, wishes and beliefs; involve them in shared decision making; and obtain their consent”.

With the implementation of AfC and the modernisation of pay and conditions for the vast majority of NHS staff, the NHS now has a tool to change the way in which the NHS works. AfC has tackled many of the barriers which have created rigidity and inflexibility in the system in the past (e.g. hierarchies, restrictions of movement across paybands, different working hours and conditions, unfair access to training and development). Through the core dimensions particularly and the KSF as a whole, it will embed shared values and a change culture into the NHS for every member of staff. It will give greater support to front-line staff by creating a culture where continuing learning and development is the norm receiving full management support. Due to the different configuration of the NHS in each of the four UK countries, and the increasing development of combined services, the NHS KSF has been tested and developed with social care staff as well as health care staff, ensuring that it will work across the interface of health and social care. Early implementers of AfC used the NHS KSF and the associated development review process with social care staff as well as with NHS employees even though such staff will not be using AfC as a whole.

The NHS KSF and regulation

At present there are three main ways in which the NHS KSF and associated development review process relates to the work of regulatory bodies.

- 1 *Linking standards / competences to the content of the NHS KSF*
All of the regulatory bodies that have clear standards of proficiency / competences have agreed that they will work with the KSFG to do this work and this is now an on-going process.
- 2 *Continuing professional development*
With the implementation of AfC, and specifically the KSF and development review process, every member of NHS staff will have support for their ongoing development in post and throughout their careers. Questions have been raised as to how this learning and development supports regulatory requirements for CPD and some work

has been undertaken on linking the documentation associated with both systems. Overall the two systems should be mutually supportive although further work will need to be done to enable practitioners to bring both together effectively. It would be beneficial if staff could use the same information for both systems.

3 *Reviewing and assessing competence*

As AfC introduces a mandatory development review for every member of NHS staff at least annually, there are clear links to clinical governance as there will be clarity about how individuals are applying their knowledge and skills and the identification of development needs. Discussions with the Nursing and Midwifery Council have identified that there are potential links - and also potential confusions - between regulatory lack of competence procedures and the development review process. It is thought that the development of clear guidance on the links between the two systems might be beneficial.

In addition, it is possible that:

- 4 links could be established between the NHS KSF development review process and the introduction of revalidation requirements for health and social care practitioners, similar to the approach that has been developed with the GMC and doctor's appraisal. (This could pose a problem in that links between the NHS KSF and registration did not form part of the AfC negotiation.)

The NHS KSF, education and training and revalidation

From October 2006 The NHS KSF will be used as the mandatory framework that identifies the broad functions that are needed by the NHS, how individuals need to apply their knowledge and skills within those functions, and will be used at least annually to inform individuals' learning and development, and thus has clear links to education and training.

The implementation of the NHS KSF and associated development review process for all staff will mean that organisations will have records of individuals' current application of knowledge and skills, learning needs, and knowledge and skill gaps for effective service delivery. This will allow organisations to identify the learning and development needed by their staff. They will have clearer ideas of the learning and development that needs to be commissioned and be in a better position to argue for more suitable education and training provision.

The KSFG has recognised the need to link the NHS KSF to other national / UK externally quality assured standards / competences (e.g. regulatory body competences, national occupational standards, national workforce competences) as these are also used to inform education and training. These will be made available through the e-ksf (the computerised tool which allows individuals and organisations to record the use of the KSF in the development

of post outlines and throughout the learning cycle of staff development). Those that have been linked to the NHS KSF, or are in the process of being linked are:

- the Standards of Proficiency / competences of healthcare regulators including:
 - the Nursing and Midwifery Council
 - the Health Professions Council
 - the General Optical Council
 - the General Chiropractic Council
 - the General Osteopathic Council
- national occupational standards / workforce competences developed by the Sector Skills Council for the healthcare sector - Skills for Health including:
 - cancer services
 - children's services
 - coronary heart disease
 - diabetes
 - health and social care
 - health informatics
 - mental health
 - older people services
 - public health
- national occupational standards developed by other Sector Skills Council such as those from Skills for Care, Automotive Skills, Construction Skills.

Currently the KSFG is very aware of the range of possibilities that the NHS KSF affords in relation to education and training and its use in CPD for healthcare professionals. It also recognises that evidence presented as part of a NHS KSF development review could form part of the evidence needed for revalidation by regulatory bodies but would need to be assured that this would not compromise the partnership process. More work is needed to explore the feasibility of using the NHS KSF for any aspect of revalidation of registered healthcare professionals in the UK.

TH 02/02/08