

A Unite representatives update on the NHS Job Evaluation Scheme/Agenda for Change (Annex 31)

Tuesday 28 April 2026

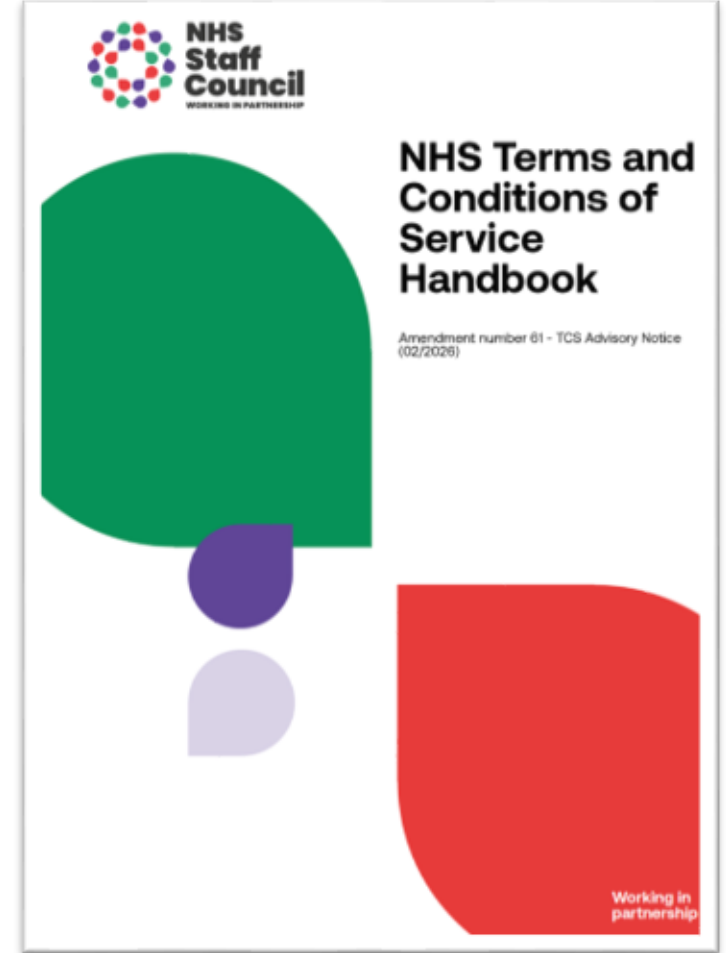


Introduction

On 1 April 2026, a new annex to the NHS Terms and Conditions of Service Handbook was published relating to the requirements of the NHS Job Evaluation Scheme (NHS JES).

The publication of this annex is one part of a programme of work asked for by trade unions and committed to by the government to restore confidence in and build local capacity to improve job evaluation practice across the NHS.

Today we'll be talking through Annex 31 and discuss how this could be used locally.



Why was annex 31 introduced?

- To **restore confidence** in the NHS Job Evaluation Scheme (NHSJES or JES).
- To ensure **equal pay for work of equal value**.
- To support employers and trade unions in applying JE **correctly and consistently**.
- This annex is part of a wider body of work which the government has committed to, to improve JE practice. Other work includes:
 - Mandatory data returns on JE
 - A new digital JE system (expected to roll out by April 2027)

Annex 31: NHS Job Evaluation Scheme Enabling Agreement



Why was annex 31 introduced?

“I want to be clear that my expectation is that the NHS JES is applied correctly and robustly throughout the whole of the NHS, underpinned by partnership working between employers and trade unions at a local level, to ensure that all staff are paid correctly for the work they are asked to deliver.”



The purpose of annex 31

The requirements outlined in annex 31 are intended to support employers, staff and their trade unions in the operation of this contractual obligation and in managing the risk of pay inequalities by detailing the actions necessary to ensure proper application of the scheme.

Employers are to ensure that their local policies and procedures are consistent with the requirements of this agreement and accord with the requirements of the NHS Job Evaluation Handbook and other guidance provided by the NHS Staff Council's job evaluation sub-group (JEG).

This agreement outlines the principles that underpin the NHS JES. It details actions required and the rights and responsibilities of staff, their trade unions and employers in the operation of the scheme. It provides clarity on key process and operational issues.

This annex should be read in conjunction with the NHS JE Handbook.



The principles included in annex 31

- Equality
- Fairness
- Consistency of approach to and application of the JES
- Partnership working and joint ownership of all JE activity
- Transparency of approach and communications



The principles - Equality

The legal requirement to ensure equal pay for work of equal value is detailed in the Equality Act 2010. Responsibility for compliance with the law sits with each individual employer and cannot be delegated. In line with this, the JES was designed to be fair and non-discriminatory. It has been found to be legally sound (re. Hartley) but ONLY if it is applied according to the requirements outlined in its handbook. These requirements should therefore be seen as a complete package of work as deviation from any part of the scheme may lead to equal pay risk.

In addition, all staff should have equitable access to the provisions of the scheme regardless of their protected characteristics or occupation.



The principles - Fairness

All staff have the right to be paid correctly for the work they are required to do. In addition to having access to the scheme as above, this includes staff understanding and having confidence in the operation of the JES. Staff have the right to a re-evaluation of their job where it is agreed that the requirements of the role have changed significantly.

They also have the right for the job description for their role to be reviewed at least every three years.

The requirements of the JES should also be embedded in all workforce development, career pathway planning and service redesign plans, to ensure fair and consistent pay outcomes across staff groups.



The principles – Consistency of approach to and application of the JES

The JES has contractual status with the same legal standing as other terms and conditions of service. Consequently, it is essential that all processes and procedures of the scheme, as described in the NHS Job Evaluation Handbook, are followed consistently and that the guidance and advice issued by the NHS Staff Council is adhered to.

In order to ensure consistency of application, sufficient resource must be made available to operate the JES.



The principles – Partnership working and joint ownership of all JE activity

The JES is a shared responsibility held jointly by employers in the NHS and staff-side trade unions. Therefore, locally all JE processes should be undertaken in partnership by those trained in the JES and that there are mechanisms in place to monitor, review and document all JE activity on a regular basis.



The principles – Transparency of approach and communications

Nationally, all documentation relating to the operation of the JES is publicly available. At local level any job evaluation policy/process document will be agreed in partnership, will accord with the NHS Job Evaluation Handbook, and be promoted to all staff.



Rights and responsibilities in the operation of the NHS JES

- NHS Staff Council
 - Employers (should ensure that...)
 - Line managers (are expected to...)
 - Staff (have the right to...)
-
- All parties to local joint negotiating committees/partnership forums/etc (are expected to...)



Rights and responsibilities in the operation of the NHS JES – NHS Staff Council

The NHS Staff Council has responsibility for the scheme and will work in partnership to:

- consider feedback and intelligence on the operation of the NHS JES to assess service-wide risk, and take action as necessary
- maintain and update materials and resources for the NHS JES so that employers can effectively apply the Scheme to assign jobs to pay bands
- agree amendments or changes to the scheme should they be necessary.



Rights and responsibilities in the operation of the NHS JES – Employers

Employers should ensure that:

- they are aware of their legal requirements and manage their equal pay risk by ensuring JES is operated correctly
- there is an identifiable senior responsible officer (SRO) for JE with a reporting line to board level
- the board receives a regular report on job evaluation (application and outcomes) and issues are raised on the corporate risk register as appropriate
- responsibility for JE activity sits within a designated and resourced part of the HR/people function including a JE lead for staff side as well as a JE lead for the employer



Rights and responsibilities in the operation of the NHS JES – Employers (2)

Employers should ensure that (cont):

- they work constructively with local trade unions (TUs) to maintain sufficient staff side involvement in JE e.g. to identify new JE panellists, and that time off is granted for staff to attend JE training and to sit on panels – (Please note: JE panel work is not included in facilities time reporting)
- mandated data returns are submitted as required
- the end-to-end process for determining pay banding is no longer than 12 weeks unless mutually agreed (not including time taken for role holders and line managers to agree job information and/or job analysis questionnaires)
- all JE panels including consistency checking are conducted in partnership.



Rights and responsibilities in the operation of the NHS JES – Line managers

Line managers are expected to:

- understand the requirements of the NHS JES both strategically and operationally
- release staff to undertake JE training and panel work
- work with staff to keep the job descriptions for roles under their management up to date/relevant – ideally annually but at least every three years
- make clear when job requirements are changing substantively and ensure they are reflected in job documentation, (this may be different to temporary activities provided to support career development).



Rights and responsibilities in the operation of the NHS JES – Staff

Staff have the right to:

- be paid correctly for the work they are required to do
- have an up-to-date job description that reflects the full requirements of their role (see also section 31.6) and that is reviewed at least every three years.
- have a re-evaluation of their job where it is agreed the requirements of the role have changed significantly
- have sight of the JE report for their job on request
- challenge the outcome of a panel within three months of a decision being communicated to them.



Rights and responsibilities in the operation of the NHS JES – All parties to JNCs, etc

All parties to local joint negotiating committee (JNCs) /partnership forums (or equivalent), including trade union representatives and employers are expected to work constructively in partnership to ensure organisational commitment and capacity on JE including by:

- receiving reports on JE activity and performance including training and resources
- ensuring that regular monitoring and review of local policies and procedures is undertaken to ensure compliance with the JE handbook and to identify where and how policies can be improved



Rights and responsibilities in the operation of the NHS JES – All parties to JNCs, etc (2)

All parties to local joint negotiating committee (JNCs) /partnership forums (or equivalent), including trade union representatives and employers are expected to work constructively in partnership to ensure organisational commitment and capacity on JE including by (cont):

- ensuring that all staff have equity of access to the scheme
- ensuring there is provision for staff to seek informed advice and support from trade union representatives
- ensuring there is an agreed dispute resolution process for example, an agreed process when staff and their line manager can't agree job documentation.



Annex 31 FAQs

Q1. What should be included in board reports on JE?	+
Q2. How does the JES align with workforce development and service redesign?	+
Q3. What is meant by "sufficient resource"?	+
Q4. Where can information about JE training be found?	+
Q5. What does equity of access to the scheme look like in practical terms?	+
Q6. How should the 12 week time period for the end to end process be measured? (does it include failed matching and then JAQ? does it include appeal or does that restart the clock?)	+
Q7. What should a local JE policy cover?	+
Q8. What is meant by monitoring JE activity?	+
Q9. What kind of reports should JNCs receive on JE activity?	+
Q10. What support is there for line managers to understand the requirements of the JES relevant to their role?	+

Q11. What if staff can't be released to sit on JE panels?	+
Q12. Is there any guidance on good practice in relation to revising job descriptions?	+
Q13. Who is the appropriate line manager to sign off a job description?	+
Q14. How can career development of staff be supported in a way that aligns with the job evaluation scheme?	+
Q15. What does "changed significantly" mean?	+
Q16. How can staff get more involved in job evaluation?	+
Q17. What happens if there is a disagreement about a job description?	+
Q18. What happens if there is no JE report for a job?	+
Q19. How long should it take to agree new job documentation?	+



Annex 31 Summary



Annex 31 aims to support “correct and robust” application of and confidence in the scheme. It sets out the principles that underpin the NHS JES and details the rights and responsibilities of employers and staff in its operation. It outlines a number of specific requirements including, keeping job descriptions accurate and reviewed at least every three years, and ensuring sufficient capacity, resource and awareness to operate the scheme correctly.

Work to agree annex 31 has been led by the NHS Staff Council and has seen employer and trade union representatives work together in partnership to address this important issue.

Ref: <https://www.nhsemployers.org/articles/new-annex-31-nhs-tcs-handbook>



Questions?

