

Chapter 1 : Health in Wales | Work, Volunteering and Work Experience Questions

Work experience in the NHS is a fantastic way to gain insight into a particular career. It can also be a valuable way of getting some confidence and experience of caring for people. Whether it is a short or long-term placement, full or part time, or on a structured or informal basis, work experience can help you choose the right career.

Our workforce is extremely diverse and multicultural - just like our patients. And we often look beyond the UK and Europe to attract the best talent. Applications are particularly welcome from professionally-qualified healthcare staff from outside the UK. Here are the main things to be aware of if you are applying for a job with the NHS from overseas. This sets out the requirements you will need to have to be considered for the role. Make sure you have the relevant experience and qualifications before applying for a job. Only applicants who demonstrate clearly in their application form that they meet the essential criteria for the post will be considered for interview. For very popular posts, employers may only consider those applicants who also meet the desired criteria outlined on the person specification. International recruitment of healthcare professionals NHS Jobs follows the code of practice for the international recruitment of healthcare professionals. Professional registration If you are applying for a post that requires professional registration, you will need to register with the appropriate regulatory body. If you are registered in your home country, but do not have UK registration, some NHS employers may be able to help with this. Detailed information on what you need to do can be found on the NHS Careers website. This system simplifies routes to employment and education in the UK to five tiers. If you come from outside the EEA, you need to gain points to qualify for a specific tier before you can apply to work in the UK. This tier is now closed to all new applicants applying from outside the UK. Anyone who already holds a Tier 1 general or the previous highly skilled migrant programme visa HSMP is able to extend their stay based on the rules and criteria that were in place at the time they were first granted leave to remain in this category. This category is not available as a route of entry to the UK. All students will need a visa to enter the UK, which also allows you to work part time during term time and full time during vacations. The temporary worker category of tier 5 allows NHS organisations to employ you if you are from outside the EEA for up to 24 months as part of a government-authorized exchange programme. The youth mobility category of tier 5 replaces the working holidaymaker visa.

Chapter 2 : Step Into The NHS :: Work Experience

The NHS Experience is an accessible and engaging guide for all those journeying through the NHS, whether as patients, carers or professionals. It draws on the experience of staff and families at Great Ormond Street Hospital to provide good practice guidance for both users and providers of health care.

The pay calculator works out the individual journey a member of staff will go on in their particular band. It takes in to account the structural reform of the pay structure, the increases to pay points, and the progression of the individual through pay step points, to give an overall individual picture for every pay point. This methodology was agreed with the NHS trade unions. For simplicity, the pay calculator shows the total pay during any given year of the deal, but in reality, as now, pay will change at two points during the year, once on 1 April through the cost of living increase and any reform to the pay scales, and once on the individual's pay step date if they progress to the next pay point. This will be added to the terms and conditions handbook. In the meantime, under current arrangements, there are a variety of locally-determined approaches to apprentice pay which affect how the pay deal will apply to them. Where apprentices are on a national pay point, they will continue to progress and follow the individual journey for that pay point as set out in the framework agreement. Where apprentices are on a percentage of a national pay point under the terms of annex 21 their pay will move up proportionately in line with that pay point. Where apprentices are subject to local arrangements outside of the NHS Terms and Conditions, the NHS Staff Council advice is that the nationally-agreed headline pay uplifts be applied to those local arrangements for example, those percentage pay increases referenced in the framework agreement as being applicable to staff at the top of each pay band. NEW added September No, employers should continue to follow the provisions in section 6. NEW added September In limited circumstances it is possible for staff promoted before other staff to leapfrog them to move to a higher pay point than the member of staff promoted after them. This is an unintended consequence of some of the transition arrangements and can easily be remedied. Employers are advised to take common-sense steps to address the issue as described below. Leapfrogging can occur where an individual has been promoted, or begins acting-up, between 1 April and 1 July. Their employer followed paragraph 6. They would also receive backpay on their band 1 pay point, from 1 April up to the time they were promoted. This means that the person promoted earlier is on a lower pay point than the person promoted after them. The only circumstances we are aware of when this can happen are when someone is promoted between 1 April and 1 July, from either of the pay points on band 1 in to band 2, and from the top point of band 2 in to band 3. NEW added September Years of experience is a way of describing pay points in the transitional pay structure, which works for most staff and pay journeys. However in some circumstances, particularly for staff who have been promoted, the years of experience can be confusing. Under previous arrangements, spine points identified the different pay points within each band. Because of structural reform to all pay bands and with overlapping points being removed, it is no longer possible to use the same spine point naming convention. Therefore the years of experience column has been introduced. This is designed to represent the minimum number of years it would have previously taken to reach the equivalent spine point under the previous structure. On transition to the new pay system, staff have been automatically assimilated to the correct pay point, based on the spine point they were in at 31 March. For example, years of experience and pay point may not align in the following circumstances: If a member of staff has previously been subject to an increment freeze for example band 8 and 9 staff in, so their spine point did not increase that year. If staff have not progressed to the next pay point previously as a result of not meeting local progression criteria. If staff have previously started higher than the minimum point in the band in this case it will appear as if they do not have enough years of experience for their pay point. If staff are promoted into a band, starting higher than the minimum point in the band due to the pay on promotion clause in section 6 of the handbook. All employers will be expected to implement the new pay progression system from 1 April. Implementation progress will be monitored by NHS Improvement. NHS Employers will develop material to support organisations in implementing the system. The framework document sets out the agreement covering the three years from 2017. This will be achieved by ensuring staff are

supported to develop their skills and competences. Through delivering this, the greatest possible contribution to patient care can be made. In , agreement was reached that allowed employers to link pay progression to their appraisal processes so that it is no longer automatic. By establishing this link, the importance of good appraisals, line management and staff development will be strengthened allowing greater staff engagement and a tighter focus on the training and skills staff need to deliver the best patient care. Employers should plan and budget on the basis that all staff are expected to progress on time. The exception will be where an individual has not met the criteria for progressing to the next step point. Employers should work jointly with local staff sides to develop policies which ensure that staff receive the training and support they need to meet appraisal requirements. Joint national guidance will be produced to cover situations where progression may be delayed. The expectation would be that new appointees start at the bottom of their pay band, as now. Further guidance on the new pay progression system will be issued by the NHS Staff Council should the deal be agreed. The new pay structure ends automatic annual progression. No, there is no intention to define how appraisal works at a local level, we recognise that there are many organisations with good appraisal processes. The Staff Council will produce further guidance and employers may wish to use implementation of the deal to review or refresh their approach to appraisal in partnership with their local staff sides. Clearly, the law prevents anyone from being treated less favourably in certain circumstances, for example if they are on maternity leave. The new pay progression framework is designed to ensure staff progress to the next pay step point only when they have met the required standards, which includes local personal or organisational objectives, including behaviours. All staff must of course have the knowledge and skills they need to carry out their role. Employers remain free to use the existing national KSF or their own local frameworks. The intention of minimum periods at each pay point was a critical element of the design of the new pay structure. Allowing people to progress more quickly would undermine the principles of the pay system and place additional unfunded costs on to the employer. NHS Improvement will be monitoring this. Yes, the progression framework deliberately has the flexibility to allow local systems to continue where they are already working well. The new progression framework includes expectations about how local appraisals are managed, for example, regular conversations throughout the year and national standards that all staff must meet. The new progression system is linked to individual standards, part of which is the appraisal process. Individuals may have objectives related to the wider organisation as part of their individual appraisal objectives. The system also allows any local standards agreed in partnership to be included in the process. Pay progression is not automatic under existing Agenda for Change arrangements. Since employers have been able to introduce arrangements that allow progression to be withheld if staff do not meet required standards. These pay points will be removed in April , April , and April Staff who are already on a pay point at the time it is to be removed will be immediately moved to the next available point, even where this does not coincide with their existing incremental date. These staff will not receive an increase on their incremental date, because they will have received their pay increase early. In the subsequent two years it will affect more pay points. Staff will retain their existing incremental date throughout transition. On their incremental date, if they have not already benefited from deletion of a pay point it is expected that all staff will move to the next pay point reflecting their additional complete year of experience. Where employers have arrangements in place as a result of the changes, progression can be withheld where staff are not meeting the required standards. These movements happen as part of the pay restructuring process. It is expected that during transition employees will progress to the next pay point, subject to any required standards that are in place within their employer. The expectation is that all staff will meet the required standards and therefore be able to progress. For example, if you are on pay point 14 in Band 4, your journey would be as follows: If you are on an intermediate point by the end of the deal, your onward pay progression will be determined by the new pay progression system which is described in outline in the Framework document, with operational details agreed in partnership within your organisation.

Chapter 3 : NHS Jobs - Applying from Overseas

The Department has today published the NHS Patient Experience Framework, which outline the areas most important to

patients' experience of NHS services. Improving patient experience is a key aim.

Chapter 4 : Cal Thomas: The NHS: Dogma vs. experience

The NHS Health Check programme is one of the largest current prevention initiatives in England, and many studies reporting patients' experiences of this have been published.

Chapter 5 : NHS Jobs, Careers & Recruitment - totaljobs

Disentangling the effect of expectations, experience and satisfaction is a major problem when patients' views are used to measure trends in performance in a particular hospital or other healthcare facility.

Chapter 6 : NHS England » Peer Leadership Academy opens for applications

Gaining experience This page describes the various ways you can gain the experience you need to prepare you for a career in health. It explains the benefits of gaining experience, how you can make the most of it and how to go about finding opportunities.

Chapter 7 : Gaining experience | Health Careers

An editorial in The Daily Telegraph says, "The NHS is cursed by a devotion to dogma." People have come to expect "free" care and the cost of "free" is breaking the system.

Chapter 8 : Questions and answers - NHS Employers

The NHS needs to radically change the way it helps doctors and nurses who experience trauma in their daily work, the Health Secretary has said. Matt Hancock said significant improvements in.

Chapter 9 : Step Into The NHS :: NHS Jobs

In October the NHS National Quality Board (NQB) agreed on a working definition of patient experience to guide the measurement of patient experience across the NHS.