Job evaluation exercise failed to recognise specialist skills of community nurses

By Nick Lipley

COMMUNITY PSYCHIATRIC nurses have voiced fears that the new pay and grading system currently being negotiated will fail to take account of the diversity of their work.

The concerns, raised last week at the annual training conference of the Community Psychiatric Nurses Association (CPNA), are based on there being only one CPN role in the draft job evaluation scheme that will underpin the pay proposals. In total, 400 healthcare roles are being evaluated.

Newly elected CPNA chair Sharon Duncan told Nursing Standard: ‘The concern is that we have been overlooked and that there will be a need for local negotiations on all fronts.’ Ms Duncan claimed that the evaluation exercise had failed to take on board many aspects of community psychiatric nursing, such as adolescent psychiatry, working with asylum seekers and rehabilitation. She said the CPNA was preparing to submit three more CPN roles for evaluation.

RCN acting director of employment relations John Humphreys reassured CPNs that their concerns would be raised by the college at a meeting of the job evaluation working party next week. He said: ‘We are looking at any posts that the scheme does not currently cover. The situation is under active consideration.’ Mr Humphreys said the working party is in the process of reviewing the questionnaires returned as part of the scheme.

Leading mental health nurse Kevin Gournay, deputy head of the Institute of Psychiatry’s health services research department in London, also attended the CPNA conference, held at Heriot-Watt University near Edinburgh.

He said: ‘The most cynical view is that you will get the lowest common denominator approach to what CPNs do. I am afraid the result of the exercise will be a listing of where CPNs work with no recognition of the very specialist skills they have. You can’t just have one job evaluated. That would be facile.’

The concerns were raised as ministers reiterated their support for mental health nursing. In an address to the conference, health minister Malcolm Chisholm said: ‘One of the keys to delivering improved care away from hospitals is making best use of the skills and potential that CPNs and other mental health workers have to offer.’

£900,000 needed to resolve pay dispute

UNION LEADERS in Wales joined forces last week to call on politicians and managers to end a protracted dispute at an NHS trust over local pay.

Powys NHS Trust was one of the few to exercise its freedom to introduce a local pay system during the 1990s. As a result some nurses on local contracts are now paid £8,000 a year less for doing the same job as colleagues on national terms.

Trust managers and health minister Jane Hurt have agreed the system will have to go before the new pay and grading system currently being negotiated for all NHS nurses in the UK is introduced.

But neither the trust nor the Welsh Assembly is prepared to come up with the £900,000 needed to bring staff back onto nationally agreed contracts. Last week unions, including the RCN and Unison, issued a joint statement saying they have waited long enough.

RCN Welsh board secretary Liz Hewett said: ‘The fact that several unions have issued a joint statement shows the strength of feeling on this. This is an unacceptable situation for our members.’

A Welsh Assembly spokesperson statement said: ‘Powys NHS Trust is actively considering the best way of tackling the problems caused by staff being paid differently because they were employed on different terms and conditions of service.

‘The trust has been asked by assembly officials to prepare an action plan and rectify the current iniquities in the next financial year in consultation with the trade unions.’

Trust managers have said that a ‘firm decision’ on pay harmonisation would be made on May 10.