

Maggie Watkinson Editor

Department of Health (2004) The NHS Knowledge and Skills Framework. Department of Health, London. Available at http://www.dh.gov.uk/assetRo ot/04/09/08/61/04090861.pdf (accessed 19.09.2005)

Skills for Health (2004) Diabetes
National Workforce Competence
Framework Guide. Skills for
Health, Bristol. Available at
www.skillsforhealth.org.uk/
view_framework.php?id=56
(accessed 19.09.2005)

UK Association of Diabetes Specialist Nurses and Royal College of Nursing (2005) An Integrated Career & Competency Framework for Diabetes Nursing. UK Association of Diabetes Specialist Nurses, Nuthall, and Royal College of Nursing, London. Available at http://www.diabetesnurse.org.uk/Downloads/Competency-Framework.pdf (accessed 19.09.2005)

Maggie Watkinson is Diabetes Clinical Nurse Specialist at Taunton and Somerset Hospital, Taunton.

Job descriptions: All change again

ow that most of us have been, or are being, assimilated in the Agenda for Change process (resistance is futile!) we might be led to believe that the tricky task of ensuring our job descriptions are accurate, inclusive and up to date is over.

However, this is unlikely to be the case. There are, of course, those who have not as yet discovered where they have been placed in the banding scheme and others who are in the process of appealing because they have been inappropriately banded. (An article on a successful appeal is scheduled to appear in the October issue of the Journal of Diabetes Nursing.) Informal discussions among specialist nurses of all types (not just diabetes nurses) seem to indicate that there are some inequities in banding and the topic is likely to engender further discussion and also a degree of angst for some time to come. It would certainly be interesting to ascertain how diabetes specialist nurses have been banded across the country, once the Agenda for Change process is complete.

In addition to these outstanding Agenda for Change issues we will also have the task in the near future of integrating competence-based into our job descriptions. For instance, the first phase of the national Diabetes Competence Framework has already been published (Skills for Health, 2004) and work has just begun on the second phase. This will address competences, which are National Occupational Standards for health care, related to type I diabetes, children with diabetes, the at-risk foot, managing complications, pregnancy and diabetes, psychology support and transition from paediatric to adult services.

A document titled An Integrated Career & Competency Framework for Diabetes Nursing has also recently been published (UK Association of Diabetes Specialist Nurses and Royal College of Nursing, 2005) and this describes competences specifically for diabetes nursing (a report on this document is scheduled to appear in the October issue of the Journal of Diabetes Nursing).

Although these frameworks have many other uses, and have been approached from

different perspectives, one of their uses is assisting with the writing of effective job descriptions by highlighting the competences required for a specific role.

As well as those that address diabetes care and diabetes nursing specifically, there is also the NHS Knowledge and Skills Framework (KSF) (Department of Health, 2004) to consider. It is a more general framework that has been in existence for some time but will probably become more and more visible in the future. The competence frameworks discussed above will dovetail neatly with the KSF and the language used is similar across all frameworks.

In summary, the KSF is a national initiative that defines the knowledge and skills that staff in the NHS need to deliver quality services, and has three strands. Two of these – the job evaluation and terms and conditions components – have already been utilised in the Agenda for Change process to compare different jobs in the NHS.

The third strand is the development review aspect; it is about ensuring that staff are effective in their jobs and developing and maintaining services of high quality. This particular aspect is the one that diabetes nurses are likely to become more familiar with shortly. There are 30 dimensions to the KSF, six of which are general and applicable to virtually everyone in the NHS and 24 of which are specific, applying to some jobs but not all. Within each of these dimensions there are four levels, with attendant indicators which will describe how knowledge and skills need to be applied to achieve that level.

Individual performance reviews will be carried out using the KSF dimensions, levels and indicators, and development plans will be devised as a result. It is consequently a vital document to become familiar with, particularly for those wishing to progress in their career and move up the Agenda for Change ladder.

So, with the KSF and more specific competence frameworks, it seems that job descriptions may still need to be fine-tuned in the future and may continue to be the flavour of the month.