

## Agreement for the new EMT4 role and Paramedic Recruitment and Retention premia

### 1. Introduction of a new EMT4 role

A new role will be introduced within the LAS with effect from 1 October 2005 which recognises and builds on the experience gained by those staff in post for a specified period of time. A new job description will apply to this role demonstrating the enhanced roles and responsibilities and associated training requirements. This role has been banded under Agenda for Change at Band 5.

#### Criteria

Criteria for eligibility which will apply to all existing EMT3 staff undertaking full A&E duties (including existing White-base work staff) is:

As at 1 October 2005:

- 3 years service post millars
- Completion of all existing EMT3 training (accepting that few EMT3s would have already completed the recently introduced 5 day CPD so this is likely to be future attendance rather than completed)

PLUS

- "Sign up" to attending and then successfully completing training in enhanced patient assessment skills and clinical decision making.
- "Sign up" to attending and then successfully completing training in enhanced airway management and use of Laryngeal Mask Airway (LMA).

#### Pay arrangements

A recruitment and retention premium (long-term) will be applied to those staff who progress onto this new role. This will therefore be pensionable and count for the purposes of overtime, unsocial hours payments and any other payments linked to basic pay. Further details of this are given in the following excerpt from the proposal document to the South West London Strategic Health Authority and pan London Reference Group which was agreed by the group on 19 October 2005.

*"It is proposed that a RRP of £1925 (9.7%) is paid from the date of introduction of the new role and to subsequent appointees up until 31 March 2006. The premium will be reduced on an annual basis in line with progression up the pay band. The rationale for this is to attract staff to this role quickly and retain them for a period allowing the Trust to recruit and train to other levels (technician, paramedic, Emergency Care Practitioner)."*

The premium will result in the equivalent pay for all intents and purposes as spine point 22.

With effect from 1 April 2006 any new staff progressing on to the EMT4 role will do so under standard Agenda for Change rules on pay progression when moving onto a higher band (para 6.33).

## 2. Agenda for Change implementation for existing EMT3s

All existing EMT3s will be assimilated onto agenda for change terms and conditions on the banding determined by their existing job description at 1 October 2004. This will be Band 4, pay spine 18.

## 3. Paramedic

It is recognised that Agenda for Change is a significantly different pay system to that historically in place for ambulance staff and particularly for those paramedic staff who have taken up post after the implementation date of 1 October 2004 it has resulted in an unusual disparity in pay with colleagues in post on 1 October 2004. It is therefore agreed that a transitional recruitment and retention premium be applied to a selected group of paramedic staff who are affected by this disparity during the implementation of agenda for change.

The following excerpt from the proposal document to the Strategic Health Authority outlines the details. This proposal was agreed by the Pan London Reference Group on 19 October 2005

*" As the enhanced technician role is on a par (under agenda for change banding) with the paramedic role and recognizing the need to recruit and retain these new paramedic staff also, it is proposed that for those staff already committed to a paramedic role (appointed after 1 October 2004 and/or applied for a paramedic position before 1 October 2005) receive a retention premium of £3410 (17%) reducing annually in line with progression up the pay band. This is to bring them in line with paramedic colleagues assimilated onto agenda for change from 1 October 2004. Whilst the actual number of staff affected is low (approx 70), it is anticipated that a significant number of these paramedics would leave the service if this premium was not paid as they applied and undertook their training on the expectation that once qualified, they would receive the same level of remuneration as their colleagues. It is worth noting that ambulance staff received spot salary rates prior to Agenda for Change and this is therefore a very different system to that experienced historically by ambulance staff. New staff entering paramedic training will be aware of the starting salary and pay progression under agenda for change and it is therefore anticipated this would not be an issue for future recruitment. This will of course need to be monitored."*

The premium is classified as long-term for those posts affected and will result in the equivalent pay for all intents and purposes as spine point 24.

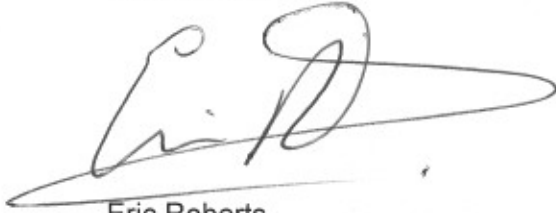
Those paramedic staff in post at 1 October 2004, have, under Agenda for Change, received an incremental increase to the maximum spine point (25) on 1 October 2005.

KSF

Whilst KSF outlines have not yet been developed for EMT4 or paramedic roles, it is anticipated that one KSF outline will apply to ambulance staff roles falling within the same pay band and would reflect the expectation of full paramedic training.



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