Chapter 5: Conclusions

In light of this research, it can be concluded that pay equity and job evaluation in the scenario of NHS are cases that require extensive research and development. The research has also disclosed the fact that if job evaluations are performed without the establishment of appropriate systems, it shall only serve to contribute red tapes to the scenario and fail to promote pay equity. Furthermore, the critical literature review has allowed the research to conclude on the note that the NHS job evaluation system requires broad modifications and may require a complete overhaul if First Steps of the Journey: Job Evaluation for Agenda for Change by Angela Watts and Simon Green, and Job Evaluation for Clinical Nursing by Implementing the NHS JE System by Emin Khaya and Nurtel Oral were to be given consideration. By reading the Literature Review and the Secondary Research, it can be clearly seen that the following conclusions to the research questions detailed above have been reached.

5.1 Implementation of Job Evaluation to Achieve Pay Equity

The secondary research regarding the effectiveness of job evaluation establishing pay equity in the National Health Service has found that the National Health Service has improved its system of pay quite considerably when compared to the last 50 years. The new system does not seem to serve the staff employed at the National Health Service; rather it simply seems to be an image for the company to attract investors.

It is understood that the current job evaluation scheme within the National Health Service is the result of trial and error and its establishment has brought a greater deal of equality regarding compensation within the organization. However, there is evidence of the use of such system for job evaluation toward the establishment of confidence in the Health Service, on the part of the shareholders rather than on its employees (Chang 2007) that has created a detrimental
effect on the image of the organization. It is not surprising then to see surveys which [detailed] previous researches conducted, showing only 25 percent of individuals being dissatisfied with their company’s job evaluation techniques (Armstrong and Baron 1995, p. 279-84). In contrast, other surveys conducted in hospitals show a number of nurses being dissatisfied with their job experience.

Previous studies also show a direct correlation between quality of health and job satisfaction among individuals in the field of healthcare (Humphrey, et al. 2003). The relative decrease in performance levels of the NHS, as seen in the secondary research provided, as well as studies regarding the general dissatisfaction of nurses in this sector may not show how the NHS has not established pay equity (Newman, Maylor and Chansarkar 2002). However, studies showing a discrimination in compensation toward foreigners and other issues that exhibit a correlation between job satisfaction and pay grade present how the organization has failed in establishing pay equity.

The ongoing pay increases and major changes within the organization toward delivery of quality healthcare rather than looking after its financial concerns is a step in the right direction. In addition, it has shown improvement in pay equity within the organization. It has illustrated how such issues – which were prevalent within the National Health Service decades ago – have begun to improve these days, where there have been several legislations passed by the parliament of the United Kingdom. Despite all these measures, it seems that the NHS has not provided individuals with pay equity within their organizations. The incessant discrimination and unequal pay within gender roles indicate a certain kind of behavior that the NHS has no right to possess.
5.2 Promotion of Job Equity under Public Private Partnerships

The secondary research collected has shown that the responsibilities regarding job equity within the private sector of organizations is not the function of the National Health Service, rather it is the exclusive function of the private companies themselves. The relation between the private sector and public sector transpires on service for funds which does not involve job equality within organizations. The secondary research data shows how the National Health Service does not directly affect the employment decisions of its private contractors.

5.3 Pay Equity Improving Working Conditions

From the research data collected, it may be concluded that the establishment of pay equity within the National Health Service has improved working conditions in the public sector but it should be noted that it is not the only factor which is a determinant in this case. The continued pursuit for the shareholder confidence rather than quality of healthcare by the National Health Service has led to a decline in recruitment of healthcare professionals and to the actual quality of healthcare. It has also led to problems within the organization in retaining nurses whose shortage will further affect the quality of healthcare in the coming years (Newman, Maylor and Chansarkar, 2002).

Other factors such as the elimination of discrimination and harassment of staff, along with better management of resources and a greater drive toward establishing a quality system of care, are far more important in this case in accordance with the personal survey given above which are in the process of being addressed by the public sector. However, the infectivity of such measures toward the establishment of proper pay equity and hence of better working conditions, may be one of the primary reasons for the numerous problems currently faced by the National Health Service.
It must be said, however, that the National Health Service has not reached its goals of pay equity within its organization despite the establishment of job evaluation schemes.

5.4 Recommendations

- The National Health Service must establish a job evaluation system which is not only centralized to the organization but takes other factors—such as cumulative workload, geographical position, and the employees’ working environment—into consideration.
- The National Health Service must pass proposals within its organization that work toward the principles of job equity as well as stop discrimination and harassment of ethnic and disabled people. It should conduct studies within its organization to gauge the factors behind any incidents of discrimination or harassment, and endeavor to find lasting solutions for them.
- The NHS must realize that a public-private partnership does not absolve them of the responsibility for actions taken within the private sector. It is their responsibility to ensure that standards are met and the satisfaction of individuals working both in the public and private sector is taken into account.
- The increasing reliance on a strategic outlook rather than one which focuses on delivering quality healthcare to its constituents has brought the drop in healthcare quality and general dissatisfaction among patients and employees in the NHS. Their focus must change toward establishing quality protocols while ensuring financial viability.
- The National Health Service can end its reliance on private organizations to take on the responsibilities of its work load and establish new avenues where they can meet their own organizational needs.
• The NHS can conduct research within its own organization and take the opinion of various doctors and nurses on how to improve working conditions and quality of healthcare without sacrificing excessive funds to accomplish this objective.

• The NHS can establish training programs within its organizations for individuals in nursing and managing positions, with the cost of such programs being paid by the organization itself.

• It is essential for the NHS to shift its focus away from the shareholders and move toward its patients and delivery of quality healthcare, with greater emphasis on primary prevention.

• The NHS should tailor their performance evaluations according to variables which can affect the performance of various institutions such as hygiene, geographical position, socioeconomic standing, number of staff, availability of equipment, and others.