To Chief Executives:
Local Health Boards
NHS Trusts

cc. Regional Directors

26 June 2003

Dear Colleague

ARRANGEMENTS FOR CONSULTANT POSTS WITHIN ALLIED HEALTH PROFESSIONS - STAFF COVERED BY THE PROFESSIONS ALLIED TO MEDICINE PT “A” WHITLEY COUNCIL & SPEECH AND LANGUAGE THERAPISTS

SUMMARY

1. The plan for the NHS and its partners - “Improving Health in Wales” 2001 states that consultant posts within the Allied Health Professions will be introduced during 2003.

2. Details of the pay and conditions of service for such Consultants covered by the Professions Allied to Medicine PT “A” Whitley Council are set out in the attached pages and should be incorporated in the relevant handbooks. This letter will also form part of the terms and conditions of service for Consultant Speech and Language Therapists.

APPROVAL

3. Employers should implement this agreement, which has been approved by the Welsh Assembly Government, when making appointments. A copy of the formal approval is attached.

ACTION

4. Employers wishing to establish and appoint consultants within the Allied Health Professions must adhere to the attached guidance.
ENQUIRIES

5. Employers should direct enquiries about the implementation of this agreement and any queries on the pay arrangements to the NHS Wales Employment Policy Branch at the National Assembly for Wales, Cathays Park Cardiff CF10 3NQ (contact point Gwenda Davies on 029 2082 5231, email gwenda.davies@wales.gsi.gov.uk).

6. Employees should direct their personal enquiries to their employer.

FURTHER COPIES

7. Employers are asked to make their own arrangements for obtaining any extra copies that they may require. An electronic version of this letter can be obtained from the HOWIS website at www.howis.wales.nhs.uk

Yours sincerely

Hilary Neagle
Head of Human Resources
NHS Wales Department
ADVANCE LETTER PAM (PTA) W1/2003 and (SP)/ 2003

The National Assembly for Wales in exercise of powers conferred by Regulations 2 and 3 of the National Health Service (Remuneration and Conditions of Service) Regulations 1991 (SI 1991 No.481) hereby approves the agreement on pay and conditions of service for consultant posts within the Allied Health Professions.

Signed by the authority of the National Assembly for Wales

Hilary Neagle
Head of Human Resources
NHS Wales Department
PAY ARRANGEMENTS FOR CONSULTANT POSTS WITHIN ALLIED HEALTH PROFESSIONS

1. The plan for the NHS and its partners – “Improving Health in Wales” 2001 states that AHP Consultants will be introduced during 2003. This agreement sets out the pay and conditions of service arrangements for consultant posts established under the auspices of the PAMs PT “A” Whitley Council. Pay and conditions of service for Speech and Language Therapists are set out under their specific arrangements.

2. The establishment of all new AHP consultant posts must be approved by the recognised Approval Panel. (See Annex 4.)

3. A list of professions included is at Annex 3.

4. The arrangements contained in this agreement are interim to the outcome of and without prejudice to the discussions on a modernised NHS pay system.

5. It is recognised that there may be posts, which require individuals to take on extended roles or to deliver specialist clinical services, which exceed existing grading criteria and cannot be appropriately awarded or recognised under the current grading structure. It is anticipated that some of these roles will operate below the consultant level as determined by this agreement. In these circumstances employers should use grading agreements (AL PAM (PT ‘A’) 3/96) and (AL (SP) 2/2000) to develop both extended scope practitioner and or / clinical specialist posts if it is considered that the extended grading criteria do not adequately cover the scope and responsibilities, or appropriately reward or recognise the extended or specialist role.

6. It is envisaged that AHP consultant post holders may work with senior medical, nursing, local authority and education authority colleagues across hospital, community and primary care services in drawing up local care and referral protocols. Consultants will be experts in their clinical field. They will bring clinical leadership and strategic direction to their particular area of expertise by expanding and developing practice, and delivering improved outcomes for patients.

7. Each post will be structured around four core functions. These are:
   - Expert practice
   - Professional Leadership and Consultancy
   - Education Training and Development
   - Practice and Service Development, Research and Evaluation.

8. AHP Consultants will be recognised as leading clinical specialists in their field. The Expert Practice function of the post must comprise the most significant part of their role, with the remaining functions varying from post to post dependent on the service or speciality in which they are established. Further details on core functions are contained in Annex 2.

9. The title Consultant Practitioner will apply only to new posts established under this agreement within the NHS. It must not be conferred on individuals in recognition of innovative or excellent practice or for any other reason or be applied simply by re-designating the incumbents of existing
posts such as those who occupy posts titled for example “Advanced/ Specialist Practitioners”. The process for approving new consultant posts is set out in Annex 4.

In the NHS the title will apply only to individuals appointed to posts being established under the conditions of this agreement and through a process of fair and open competition. The process for appointing to Consultant posts is set out in Annex 6.

10. NHS bodies will determine where consultant practitioner posts should be established in the light of service needs and where appropriate in conjunction with social services local authority, education authorities and higher education institutions. Some posts will be single employer based, whilst others will be required to work across a number of different employers. This may include for example AHP's working part-time within the NHS and part-time within higher education institutions.

11. A pay range is attached at Annex 8. There are 12 points from £ 35,035 to £ 48,185 however this pay range does not apply to Speech and Language Therapy Consultant posts for which employers should use the spine points available in SP (W) (1) 2003 (see Annex 8). Speech and Language Therapy Consultant posts which meet the criteria for consultant posts included in Annex 2, do not require approval by the Joint Secretaries of the Whitley Council.

**ASSESSMENT OF JOB DEMAND**

12. Having identified and agreed need, opportunity and funding, the scope and nature of the consultant practitioner posts must be determined. An important part of the process will be the development of a detailed job description and person specification to ensure compliance with the core consultant requirements.

13. In determining starting pay and assigning posts to a pay range, the following factors must be taken into account;

- The complexity and demands of the expert practice element.
- The breadth and complexity of the consultancy and professional leadership function.
- The breadth, level and demands of the education training and development function.
- The level and complexities of responsibilities for strategic practice and service development, research and evaluation.
- The level of practice and expertise of colleagues, for whom the consultant provides professional / clinical leadership, consultancy, advice and clinical supervision.
- The extent to which the post covers new or uncharted territory and the complexity of, for example partnership, cross-boundary or inter-agency working or community development.
- The extent to which the post involves duties and or responsibilities at a regional or national level.

See Annex 2 for further guidance on the role and function of AHP Consultants.

**ASSIGNMENT TO PAYSSCALE**

14. Assignment to payscale- new posts

Employers submitting new AHP consultant post job descriptions for approval to the Approval Panel must include details of the pay range/band to be assigned to the post. The range would
normally cover five incremental points on the pay scale. Guidance on the assignment to pay scale and number of pay/incremental points for Speech and Language Therapists is contained within (AL (SP) 2/2000). The Approval Panel will consider the proposed pay range / bands within submissions, against the Job Description and Personal Specifications provided and in comparison with other established AHP consultant posts. The entry point for individual posts within this pay range/band will be assigned locally.

Professional Advisors who are involved in the Approval process should proffer a view on the specific job requirements and subsequently a specific post, in the context of other consultant posts in place across the service. Professional Advisors involved in the Approval process will not be making decisions on the appropriate incremental starting point for new consultant posts. Final decisions on starting points/incremental starting points will be made at a local level.

15. Assignment to payscale - review of established posts

This section refers to the review of established posts which have previously been approved by the Approval Panel, but following a period of time, have reached the stage where the post requires review.

Employers should decide on the review process for these established posts, to ensure the postholders personal pay range remains appropriate. Progression beyond the initial pay range may be agreed to ensure the post holder is rewarded for increasing skills, competencies and responsibilities. This will be appropriate only if the demands of the post change. Re-assessment of the post would normally be arranged by the employer but might also be requested by the post holder. Re-assessment of an established consultant post should embrace appropriate professional advice. Employers must ensure that they seek appropriate professional advice from a professional advisor who will be recommended by the relevant Professional Body. See Annex 7 for Professional Body contact details.

It should be noted that all matters of pay and pay progression for consultant posts remain the responsibility of local employers to resolve.

TERMS AND CONDITIONS

Post holders will be employed on a contract appropriate to their profession. The salary scale will reflect remuneration for a full time post (pro rata for part time posts). There will be no automatic entitlement to payments for additional hours, overtime or shifts. Conditions of service will be in accordance with relevant existing agreements of General Whitley Council, the Professions Allied to Medicine and related grades of staff (PT’A’) Council and the Pay Review Body. These provisions will also apply to Speech and Language Therapists in accordance with this Advance Letter.
CONSULTANT ALLIED HEALTH PROFESSIONAL (AHP)

1. Definition and Purpose

The consultant AHP is an expert in a specialist clinical field bringing innovation, influence to clinical leadership and strategic direction in the particular field for the benefit of patients. A consultant will exercise the highest degree of personal professional autonomy and will be recognised as a national clinical expert within his or her own speciality, service or field. A consultant will work beyond the level of practice of Senior Clinicians, Extended Scope Practitioners and Clinical Specialists. The consultant will play a pivotal role in the integration of research evidence into practice. Exceptional skills and advanced levels of clinical judgement, knowledge and experience will underpin and promote the delivery of the clinical governance agenda. This will be by enhancing quality in areas of assessment, diagnosis, management and evaluation, delivering improved outcomes for patients and extending the parameters of the specialism.

Consultant posts provide the opportunity to retain clinical excellence and mature skills within the service. They will sit within a range of models of practice and service configurations. Whilst the focus of the consultant posts will be the delivery and practice of clinical care, the development of more detailed job descriptions will be the responsibility of employers at a local level, tailored to meet local needs. This ensures that AHP’s can develop through a range of opportunities and routes, either as specialist or generalist practitioners through to consultant level in the acute, community and intermediate care settings.

2. Accountability, Autonomy & Responsibility

Consultant post holders will be prepared to work across a range of new service delivery structures and are expected to be in a position to influence decision making. As AHP’s, they are professionally autonomous, working within the ethical framework provided by their own professions, the rules of professional conduct ensuring they only practice in those areas in which they are safe and competent. As consultants their autonomy will be exercised to the very highest level, and as such they can be expected to have clinical responsibilities beyond their immediate management structure. Those commissioning consultant posts will need to ensure that appropriate mechanisms are in place to monitor accountability and responsibility issues.

Consultant practitioners will remain professionally accountable and legally liable for their actions and omissions as registered practitioners. It is vital that the boundaries of responsibility, autonomy, authority and accountability of the post are clearly defined and meet the criteria for approval of consultant posts. See Annex 4.

3. Support and Resources

Preliminary work to establish new posts must take account of the support infrastructure that will be required. This will include funding and resources to ensure there is access to local, regional and national peer support networks and mentorship as well as Continuing Professional Development activities at local, national and where appropriate international level. Consultants will need access to professional advisory structures.

Employers will need to ensure that appropriate mentoring and supervisory structures are in place to support levels of responsibility, autonomy and accountability appropriate to the consultant post.
In addition, consultants will require both office and clinical accommodation in appropriate locations, administrative and clerical support and IT resources. Dependent on the specific job description funding may be required to support access to research, research resources, research assistants, clinical equipment and travel.

4. The role and functions

The posts will be structured around four core functions:

I) Expert clinical practice (Primary Function)
II) Professional Leadership (Supporting Function)
III) Practice and Service Development, Research and Evaluation (Supporting Function)
IV) Education and Professional Development (Supporting Function)

The primary function of expert clinical practice will be central to the role of the AHP Consultant. The three supporting functions are essential to the success of the role, but will be weighted within the job description according to the purpose of the post in conjunction with local need. The core functions of a Consultants post will exceed those functions expected of Senior Clinicians, Extended Scope Practitioners and Clinical Specialists. In drawing up job descriptions, local employers will need to ensure that AHP consultant post job descriptions reflect this difference.

4.1. Expert Clinical Practice (Primary Function)

The expert clinical practice element will involve the post holder working with patients, clients, or communities, providing an exceptionally high level of clinical expertise and will be recognised as making a distinguished contribution to his/her profession.

Indicative features of this function would include an Allied Health Professional who;

I) Has responsibility for and management of a complex caseload, which must include providing and managing an expert clinical advice service.
II) Has responsibility for delivering a whole system patient focused approach.
III) Demonstrates advanced knowledge, skills and experience within specific specialist or generalist areas of practice.
IV) Promotes and demonstrates best practice, most particularly facilitates the integration of the most up to date research theory into practice through an advanced level of clinical reasoning and decision making across a spectrum of practice.
V) Is responsible for ensuring there is adherence to the ethical and moral dimensions of practice.
VI) Exercises the highest degree of personal professional autonomy, involving highly complex facts or situations, which require analysis and interpretation of data, leading to the implementation of a diagnostic process, treatment or management strategy for the patient.
VII) Creates and develops protocols of care, and designs patient care pathways with the aim of providing best practice examples to others either within the region or nationally.
VIII) Is recognised as a national and /or international expert within their own speciality, service or field and ensures that locally endorsed standards are evidence based to reflect the very best available practice.
IX) Is responsible for facilitating and promoting a learning culture within the organisation, enabling others to develop to their full potential within the specialist field.

4.2. Professional Leadership

Indicative features of this function would include an Allied Health Professional who;

I) Is an effective leader and communicator who motivates and inspires others to deliver the optimum quality of care within the specialist field and beyond, including other staff groups and organisations.

II) Is an acknowledged source of expertise that develops innovative practice and service delivery models and ensures that they are applied throughout the organisation.

III) Is able to challenge current structures and identify organisational and professional barriers which limit/inhibit services and provide solutions to overcome these.

IV) Is able to process complex, sensitive or contentious information, leading to the development of strategic plans, which drive change from within and across the healthcare organisation and its partners.

V) Provides expert input into the development of quality initiatives, including influencing and delivering the clinical governance agenda.

4.3. Practice and service development, research and evaluation

Indicative features of this function would include an Allied Health Professional who;

I) Ensures that the high quality patient centred services are based on the best available evidence.

II) Leads and collaborates on the development of protocol driven services.

III) Contributes to strategic planning and leads local implementation of relevant national policy.

IV) Evaluates the provision of clinical services leading to the development and/or redesign.

V) Is responsible for identifying gaps in the evidence base.

VI) Is responsible for initiating and/or facilitating and/or undertaking in some circumstances research and development programmes, which enhance the evidence base and have an impact outside the organisation.

VII) Establishes research partnerships with Higher Education Institutes.

VIII) Is a major player in the development and provision of cross-disciplinary services.

4.4. Education and professional development

The nature of the AHP Consultant post requires a portfolio of career long learning, experience and typically formal education, and the AHP Consultant will be working at Masters level or equivalent.

Indicative features of this function would include an Allied Health Professional who;

I) Promotes and facilitates the development of a learning environment to enable others to achieve their potential, particularly by encouraging and supporting reflective practice so that the service is demonstrably one which continuously improves and develops.
II) Assists individuals, the team and the organisation in identifying their own particular learning needs

III) Provides learning opportunities for health professionals, student and others in the specialist field, including acting as a mentor or supervisor and providing a direct link to a HEI.

IV) Provides education in a specific field of expertise nationally and internationally by lecturing or through publishing research in professional journals.

V) Undertakes some teaching or research and as a result can demonstrably ensure and enhance the links between practice, professional bodies, and academic and research institutes.

VI) Contributes to educational policy for both pre and post qualifying practitioners.
PROFESSIONS COVERED BY THE PAMs PTA COUNCIL

Art Therapists
Dietitians
Drama Therapists
Music Therapists
Occupational Therapists
Orthoptists
Physiotherapists
Podiatrists
Radiographers

PROFESSIONS COVERED BY THE SCIENTIFIC AND PROFESSIONAL STAFFS WHITLEY COUNCIL

Speech and Language Therapists
PROCESS FOR APPROVING CONSULTANT POSTS WITHIN ALLIED HEALTH PROFESSIONS

AHP CONSULTANT POST APPROVAL PANEL

1. The Welsh Assembly Government will arrange AHP Consultant Post Approval Panels. These Approval Panels must approve the establishment of all new AHP consultant posts.

2. The panels will be chaired by a Health Professions Wales representative and will include appropriate personnel nominated by Professional Bodies, Professional Organisations and NHS Wales, as follows:

A minimum of:

- professional advisor/s nominated by the appropriate Professional Bodies (See Annex 7.)
- clinical advisor/s from within clinical speciality - nominated by appropriate Professional Body (See Annex 7.)
- an AHP Higher Education Provider representative nominated by the appropriate Higher Education Institute.
- lay member - nominated by The Association of Community Health Councils
- Senior manager from NHS Wales nominated by Chief Executives Group for NHS Trusts and/or Local Health Boards (as appropriate).
- Human Resources Director nominated by All Wales Human Resources Directors Group
- Profession specific Trade Union Representative

In addition, Approval Panels for AHP Consultant posts will include Welsh Assembly Government representative/s nominated by the Chief Scientific Adviser.

3. An Approval Panel member should not participate in the approval process for posts which have been submitted by their employing organisation.

4. The Approval Panel will establish and agree a timetable of Panel meeting dates for each year.

5. Details of Approval Panel dates and locations will be circulated to Chief Executives NHS Wales and Human Resource Directors NHS Wales.

THE AHP CONSULTANT POST SUBMISSION PROFORMA

6. Employers wishing to establish AHP Consultant posts must provide all of the information referred to in the AHP Consultant Post Submission Proforma. For this purpose, a proforma is attached at Annex 5. Submissions must be prepared with full compliance to the proforma criteria and forwarded to the Approval Panel.
Annex 5

APPROVAL PROFORMA FOR CONSULTANT POSTS WITHIN ALLIED HEALTH PROFESSIONS

Employers must provide all the information referred to in this proforma when submitting proposals for consultant posts within the following Allied Health Professions:

♦ Arts Therapy
♦ Dietetics
♦ Drama Therapy
♦ Music Therapy
♦ Occupational Therapy
♦ Orthoptics
♦ Physiotherapy
♦ Podiatry
♦ Radiography
♦ Speech and Language Therapy

1. Submission from
   Guidance Note:-
   Insert here the name and contact details of the service provider(s) ensuring all collaborative partners are included.

2. Title of Post
   Guidance Note:-
   Insert here the proposed title of the post

3. Work Base
   Guidance Note:-
   Insert here the proposed accommodation arrangements and work base(s) / location(s) for the post, referring to collaborative arrangements where required.

4. Outline of Post or Role Descriptor
   Guidance Notes:-
   The AHP Consultant will be an expert in their clinical field. They will bring clinical leadership and strategic direction to their particular area of expertise by expanding and developing practice, and delivering improved outcomes for patients. The expert practice function of the post must comprise the most significant part of their role with the remaining functions varying from post to post, dependant on the service or speciality in which they are established. The Outline of Post or Role Descriptor should be specific to the intended area of practice and should comprise a concise statement of around 50 to 100 words.
5. Details of Lines of Accountability
Guidance Note:-
Include information on levels of responsibility, supervisory arrangements, risk management and monitoring arrangements. Describe how the post links with other consultant networks.

6. Description of links to Higher Education Institution(s) / Professional Bodies
Guidance Note:-
Include here information on how the post links with Higher Education Institutions and Professional Bodies to promote Continuous Professional Development and to meet the research/teaching components of the post.

7. Description of infrastructure and staffing report
Guidance Note:-
Include here where appropriate, information on admin and clerical support, information technology support and Continuous Professional Development support. Include description of infrastructure and staffing.

8. Anticipated Pay Band/Range
Guidance Note:-
Include here the proposed pay range/band.

9. Details of funding for the post and all support
Guidance Note:-
Include here details of funding for the post and all support costs appropriate to the job description. Examples of support costs might include: CPD, IT, Research Assistant, admin and clerical, equipment, accommodation and travel expenses (the latter will depend on whether the post involves regional, national or international travel).

Links to Corporate/National Agenda

10. Details of how the need for this post has been assessed
Guidance Note:-
Include here the background to the post and the thinking behind the need for the post.

11. The anticipated link to National Priorities
Guidance Note:-
Submissions must indicate how the post will help to meet National Priorities. The National Priorities are related to: Improving Health, Saving Lives, Fast and Convenient Services, Caring for Vulnerable Groups and Modernising Strategies. This section may include reference to Professional Body Strategic Frameworks, NHS Wales Strategies such as – Health Promotion Strategy (Promoting Health and Well-being), Human Resource Strategy (Delivering for Patients), Better Health Better Wales, Mental Health Strategy, Primary Care Strategy. National priorities will change over time and these changing priorities should be considered when drawing up submissions.
12. Added value to patient/client/community outcomes
Guidance Note:-
Include here a description of how this post will bring added value to patient, client, and community outcomes as opposed to any other category of staff. Describe how the post will bring added value over and above what is presently available. Reference should be made to the post in relation to Local Health Improvement Programmes.

13. Key Objectives of the Post
Guidance Note:-
Include here the key objectives of the post.

14. Meeting the objectives of collaborating organizations
Guidance Note:-
Include here a description of how this post links to the objectives of any collaborating organisations. Give evidence of multi-agency working where appropriate.

15. Evaluation of Objectives
Guidance Note:-
Indicate here how achievement of the objectives will be evaluated and when this evaluation will take place. This might include reference to audit/outcome tools / performance management.

16. Role Differentiation
Guidance Note:-
Indicate here how this post will differ in terms of duties, responsibilities and anticipated contribution to service need/priorities from any other current roles (e.g. extended scope practitioner, specialist practitioner, advanced practitioner).

17. Job Description
Guidance Note:-
Include a Job Description with this submission. Ensure the Job Description includes a statement of internal relationships and levels of accountability, both managerially and professionally. The Job Description must also give clear and precise information on how the post will be structured around the four core functions of: 1) Expert practice 2) Professional Leadership and Consultancy 3) Education Training and Development 4) Practice and Service Development, Research and Evaluation. The functions of the post should be listed under these headings.

18. Person Specification
Guidance Note:-
A person specification should be attached to this submission. This person specification should refer to specific expectations for example-

- a reputation of professional excellence and a track record of practice development
- recognised as an expert and innovator in the field of practice concerned
- a requirement to contribute to the national and/or international evidence base of the practice area and to the development of new knowledge
- Information Technology skills

The position requires evidence of a portfolio of career - long learning, experience and formal education, understanding of research or research experience. These job requirements should be reflected in the person specifications.
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<th>Organisational Chart</th>
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<td>Guidance Note:--</td>
<td>An Organisational Chart should be attached to this submission, which shows clearly, the Organisational structures of the employing organisation, and collaborating organisations where appropriate.</td>
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<td>Information on the proposed appointment process and an appointment timetable should be included here.</td>
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<td>Guidance Note:--</td>
<td>Signatures of support should be included here and should reflect all collaborative arrangements where appropriate. This will include a signature from appropriate Chief Executive NHS Trusts in Wales, Allied Health Professions Manager/Therapy Manager/Director and where appropriate, signatures of Senior Representative from AHP Higher Education Institute/ collaborating organisation(s).</td>
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PROCESS FOR APPOINTING TO CONSULTANT POSTS WITHIN ALLIED HEALTH PROFESSIONS

1. When the Approval Panel has formally approved a new consultant post, the employer/s will adhere to the following process for appointing to Consultant posts;

2. Employers must establish a Consultant Post Appointment Panel to undertake the selection and interview process. The panel will include;
   - Professional Advisor(s) / External Assessor(s) nominated by the appropriate Professional Body (See Annex 7 for Professional Body contact details)
   - Senior clinical professional/s from the employer/stakeholder/collaborating organisation
   - HR representative from the employer organisation
   - Appointing Officer from within the employing organisation/s
   - Other representatives relevant to the specific appointment e.g. AHP Higher Education Institute, Local Authority, Education Authority.

3. The advertising and employment arrangements for consultant posts should be consistent with fairness and equal opportunities practice in accordance with the agreements of the General Whitley Council.
PROFESSIONAL BODY CONTACT DETAILS

- **Society of Chiropody and Podiatry** 1 Fellmongers Path, Tower Bridge Road, London. SE1 3KY  
  Phone: 020 7234 8635 / Fax: 020 7234 3381

- **British Dietetic Association** 5th Floor, Charles House, 148/9 Great Charles Street, Birmingham. 
  B3 3HT  
  Phone: 0121 200 8080 / Fax: 0121 200 8081

- **College of Occupational Therapists** 106-114 Borough High Street, London. SE1 1LB  
  Phone: 020 73 576480  
  Fax: 0207 450 2299

- **The Society of Radiographers** 207 Providence Square, Mill Street, London SE1 2EW  
  Phone; 020 7740 7200 / Fax; 020 7740 7204

- **The Chartered Society of Physiotherapy** 14, Bedford Row, London WC1 R 4ED  
  Phone; 020 7306 6666 / Fax; 020 7306 6611

- **The Association of Professional Music Therapists** 26, Hamlyn Road, Glastonbury, Somerset 
  BA6 8HT  
  Phone; 01458 843919 Fax; 01458 834919

- **British Association of Art Therapists** 5 Tavistock Place, London WC1 H 9SN  
  Phone; 020 7383 3774 / Fax; 0207 387 5513

- **The British Association of Drama Therapists** 41 Broomhouse Lane, London SW6 3DP  
  Phone; 0207 731 0160 / Fax; 0207 731 0160

- **British Orthoptic Society** Tavistock House North, Tavistock Square, London WC1H 9HX  
  Phone; 0207 387 7992 / Fax; 0207 383 2584

- **Royal College of Speech and Language Therapists** 2 White Hart Yard, London SE1 1NX  
  Phone: 0207 378 1200/Fax: 0207 403 7254
Annex 8

Pay Range for PAMS/AHP Consultant Posts for Professions covered by the PAMs PTA Council with effect from 1 April 2003

| Point 1    | 35,035 |
| Point 2    | 36,115 |
| Point 3    | 37,220 |
| Point 4    | 38,335 |
| Point 5    | 39,445 |
| Point 6    | 40,570 |
| Point 7    | 41,735 |
| Point 8    | 42,945 |
| Point 9    | 44,180 |
| Point 10   | 45,470 |
| Point 11   | 46,785 |
| Point 12   | 48,185 |
| Point 13   | 49,590 |
| Point 14   | 50,995 |
| Point 15   | 52,430 |

Pay Range for Consultant posts within Speech and Language Therapy (Scientific and Professional Staffs Whitley Council) with effect from 1 April 2003

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Individual posts in Band 5 will be assigned a Personal Payscale of any eight consecutive points within the range 41-53 on the spine.