Role profile

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| Role title | FIXED TERM PENSIONS OFFICER |
| Department and directorate | PENSIONS |
| Job family level | Grade 6 |
| Reports to (job title and name) | PENSIONS MANAGER |
| Direct reports (job title and name) | N/A |

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| Summary – purpose of the role |
| Describe as concisely as possible the overall purpose of the job and including the core duties/responsibilities required to be performed in the role (eg, to provide a full range of administrative support services to the department including x,y,z) |

* To provide a high level of service
* To respond timely to enquiries received by post/email/telephone/personal visit by members, other BMA departments and 3rd parties
* To respond to queries from BMA colleagues
* To liaise with 3rd parties in pursuance of cases
* To assist the department to promote and protect members pensions interests
* Co-ordination of specific work assignments, including research projects, which may require the gathering of information and/or input from external contributors for internal or external publication such as factsheets and online updates
* Acquire and retain a broad up to date understanding of the current activities of significance within the BMA Pensions Department
* Provide general support to ensure the department can meet its core objectives.



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| Skill (level and breadth of application) |

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| What relevant experience is necessary to undertake this role? What specialist, technical or professional qualifications are required to be able to perform the job?  How far does the role extend out across the organisation, eg confined to own team, involves co-ordination with another department or requires regular negotiation with many other parts of the organisation. Why is this necessary? Describe the range of issues that are involved in this, eg resolving people’s IT problems, collecting information on key research items or advising members on a particular issue. |

* Excellent written and verbal communication skills. Communicating with colleagues, committee members, BMA members and a variety of 3rd parties. To communicate BMA policy and advise on pertinent issues
* Interpersonal skills – building relationships with colleagues, members and other external 3rd parties to progress the work of the department.
* Ability to prioritise and manage own workload effectively including the organisation and planning of work
* Flexibility – ability to respond effectively to the often unpredictable nature and intensity of the work
* Knowledge of the NHSPS/Public Sector pension schemes essential, as well as knowledge of the broader pensions field
* Providing pensions guidance to other departments/regional services and colleagues
* Team working – sharing knowledge and information, identifying areas for cross departmental working
* Accuracy and an eye for detail, particularly relevant to factsheets and on-line web updates

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| Intellectual demands (complexity and challenge) |
| What sorts of problems, situations or issues are typically dealt with? Give any illustrative examples. How are the problems, situations or issues dealt with (eg undertaking original research and analysis or seeking specialist advice)?  To what extent are standard procedures and processes followed when undertaking typical tasks, and how is personal initiative used when solving problems? To what extent is creativity used in solving the problems (eg adopting different approaches, trying things that have not been done before within the organisation or improving/changing previous approaches). |

* Need to be aware of any limitations in ability to pursue own case but largely autonomous to take cases forward
* Reference to other colleagues expected in dealing with more complex cases
* Responding to queries on a daily basis – both routine and non-routine queries. Collating a response drawing on a number of information sources, including own expertise. Ability to research subjects where necessary.

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| Judgement (independence and level and impact limitations) |
| What are the typical decisions that are made in the job without reference to any higher authority? What informs/constrains the decisions (eg expenditure limits, have to follow clearly laid down procedures or working within broad objectives). What influence upon policy, procedures or resources is there (eg giving advice to others)?  Who (or what) is next to be affected by the decisions that are made – for example, supervisor sees them before they leave the team or the whole department sees and has to respond to the change that is made. Give typical example(s) of the consequences of the decisions (eg what impact does the decision-making have on the performance of the team/section/department/organisation)? |

Judgement (independence and level and impact limitations)

* Ability to identify issues that may affect wider groups/policy decision and to bring it to the department’s attention
* Ability to work off own initiative in progressing case work with third parties
* Works with limited day to day supervision allowing individual to set own priorities and timeframes
* Identifying areas for improvement and suggesting solutions for decision by line manager

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| Use of resources (supervision of resources and influence) |
| What responsibility is there for managing people, equipment, budgets, resources, customer’s welfare or confidential information? If this is a staff management role describe what is involved, eg staff reporting, staff development, appraisal, leading a department or the allocation of work.  How does the role fit within the organisation, eg support role, team member, team leader, specialist policy adviser, or leading major areas of core business? |

* Has to manage own case work – dealing with confidential/sensitive information
* Within department PO is an active team member providing support to PPO, PM

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| Communication (level, internal and external demands and significance) |
| What people are typically contacted (regardless of the medium) inside the Association, eg immediate colleagues, senior managers or administrators? Committee members are the only members classed as internal communication. Normal noncommittee membership and doctors are external (see below)  Who is in regularly contact with the role holder outside of the Association, eg members who are not committee members, suppliers, members of the public? Approximately what percentage of the time is spent on external communications?  What is the purpose of these contacts, eg conveying information, gathering data? |

* Majority of time is spent in external communication with members and 3rd parties
* Purpose of contact is to pursue members case
* Regular contact with line manager and own department. First point of contact for queries from members
* Regular contact with Pension Agencies seeking advice and sharing information
* Regular communication with askBMA and Regional Services – contact from advisors seeking advice from PO. Some advice given straight away otherwise taken away for further research. Sharing information and guidance
* Occasional communication other BMA departments provide guidance to progress projects

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| Physical demands & coordination (physical effort and mental strain) |
| Are there any unusual physical or mental demands of the role; for example, lifting heavy objects, standing for long periods, using VDUs extensively or high levels of concentration? |

Physical demands & coordination (physical effort and mental strain)

Most BMA roles will be

* Normal co-ordination or physical demands associated with an office environment, limited requirement to engage in lifting/carrying/other exertion.
* High level use of VDU equipment

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| Working conditions and emotional demands) |
| What are the environmental conditions in which the work is conducted, the social and emotional demands faced by the role and the pressures resulting from these? |

Most BMA roles will be

* The job is for homeworking. The role contains minimal personal risk.
* Occasional visits to other areas to attend meetings
* Dealings with aggressive/depressed/terminally ill members and their families

Values and behaviours

The post-holder is expected to execute their role in line with our five organisational values. These are currently being translated into behavioural indicators that will form part of our new performance management process.

The following examples illustrate how we are using our values to inform how we act: We are leaders because:

* We strive to always improve
* We take responsibility for our actions
* We collaborate with each other and work as one BMA for the good of our members
* We are proactive and prepared to guide our members and each other

We are experts because:

* We understand our members
* We draw on our collective experience and knowledge to solve problems
* We use our insights and research to make decisions
* We provide accurate, credible, relevant and engaging information
* We recognise our strengths and act upon them

We are committed because:

* We listen to our members and put them at the heart of everything we do
* We are respectful, inclusive, open and honest with our members and each other
* We approach everything we do with confidence and sensitivity

We are reliable because:

* We deliver on what we say we will do
* We are accessible and approachable
* We build trust by being consistent and supportive
* We are positive and decisive whatever the situation

We are challenging because:

* We fight, ethically and fearlessly, for the interests of all our members

We work as a brave, assertive and effective champion for high quality health services and the advancement of the profession