The Scottish Government

Health Workforce Directorate Employment and Retention Division



Dear Colleague

CONSULTANTS DISTINCTION AWARDS: A GUIDE TO THE SCHEME IN SCOTLAND

Summary

- 1. This circular encloses a copy of the "Guide to the Consultants' Distinction Awards Scheme in Scotland (2009 Awards Round)."
- 2. NHS Boards, Special Health Boards and NHS National Services Scotland are asked to ensure that:
 - a copy of the guide is given to the Chairman, Medical Director and Director of Public Health.
 - copies are made freely available locally to all consultants and others with an interest in the scheme.

Action

3. The Guide can be downloaded from the following website:

www.sacda.scot.nhs.uk/

Yours sincerely

JACQUI JONES
Acting Deputy Director for Health Workforce
Employment and Retention

21 October 2008

Addresses

For action

Chief Executives, NHS Boards and Special Health Boards and NHS National Services Scotland (Common Services Agency)

Postgraduate Medical Deans

Deans of Dental Schools

Deans of Faculties of Medicine

For information (all without enclosure)

Chief Executive, NHS Health Scotland General Manager, State Hospital Board for Scotland Members Members, Scottish Partnership Forum Members, Scottish Terms and Conditions Committee

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SCOTTISH ADVISORY COMMITTEE ON DISTINCTION AWARDS

GUIDE TO THE NHS CONSULTANTS' DISTINCTION AWARDS SCHEME (SCOTLAND)

2009 AWARDS ROUND

This guide is available at: http://www.sacda.scot.nhs.uk/

CONTENTS

FOREWORD	·	5
MAIN CHAN	GES TO THE GUIDE FOR 2009	6
SECTION 1:	VALUES, NUMBERS, AGE LIMITS AND FUNDING	7
,	Value and Total Number of Awards	7
	MPT/PT Consultants	7
	Honorary NHS Contract Holders	7
	Number of Awards Available for Allocation Each Year	7
	Payment From 1 April 2009	8
	Funding of Awards	8
	Discretionary Points	8
SECTION 2:	ELIGIBILITY	9
-	The Nominal Roll	9
i	Notification of Changes: Responsibilities of NHS Employers & Universities	9
	Who is Eligible?	9
	Who is Not Eligible?	10
	Changes in Circumstances	10
	Change in Nature of Contract	11
	Change in Specialty	11
	Unpaid Leave	11
	Secondments	11
I	Prolonged Absence from NHS Service	11
	Re-employment after Retirement: Effect on Entitlement	11
(Consultants Formerly Employed on Trust Contracts	11
OFOTION	OTPLICTURE AND OPERATION OF THE COLUMN	40
SECTION 3:	STRUCTURE AND OPERATION OF THE SCHEME	13
;	SACDA Remit	13
;	SACDA Membership	13
;	SACDA — Method of Working	13
	Role of the Consultants at Regional Awards Meetings	13
I	Role of Employers' Representatives at Regional Awards Meetings	14
	SACDA Advisers	14
ı	Preliminary Meetings of Award Holders within the Regions (sometimes referred to as	
(Specialty Group Meetings) and Employers meetings	14
ı	Notification of Outcome of Nominations	15
ı	Publication of Award-Holders	15
ı	Monitoring the Distribution of Awards	15
SECTION 4:	NOMINATION ARRANGEMENTS	16
١٨	Vho can Nominate	16
	nvited Nominations for B and A awards only	16
	Royal Colleges and Faculties	16
	lational Employers	17
	IHS Employers of Consultants and Seconded Consultants	17
	Indergraduate and Postgraduate Deans	17
	The Professions in Scotland	17
	Other Organisations	17
	Self Nominations	18
	The Nomination Forms and their Completion	18

Completion of Forms	18
The Nomination Forms for B and A Awards Only	18
The Nomination Forms for A+ Awards – Self Nomination Only	18
Submitting Applications	19
Completion of Curricula Vitae (CV) Form	19
Inclusion of All Relevant Data and Verification Procedures	19
Relevance of Documentation from Previous Years' Considerations	19
Letters of Support	20
Special Reviews	20
The Purpose of Special Reviews	20
Forms and Timetable	20
Repeated Requests for Special Reviews	20
Notification of Outcome	20
Unsuccessful Nominations	20
SECTION 5: THE CRITERIA FOR AWARDS: WHAT SACDA LOOKS FOR	21
What SACDA Looks For	21
Length of NHS Service as a Consultant and Recency of Previous Award	22
Relevance of Discretionary Points Held	22
Training of Biodiction of Told	
SECTION 6: REVIEW OF AWARDS	23
5-Yearly Reviews	23
Process of 5-Yearly Reviews	23
The 5-Yearly Review Forms and their Completion	23
The SACDA CV Form	23
Inclusion of All Relevant Information	24
The SACDA 5-Yearly Review Citation Form	24
How A+, A and B Awards are Reviewed	24
Withdrawal of Awards	25
Early Warning	25
Effect of Downgrading or Withdrawal of an Award under the 5-Yearly or Supplementary	_0
Review Process	25
Ineligibility	25
Additional Review Provisions	25
SECTION 7: SACDA CALENDAR	26
SECTION 1. SACDA CALLINDAN	20
SECTION 8: ACCESSING INFORMATION AND FORMS	28

ANNEXES		Page
Annex A:	Criteria for Distinction Awards	29
Annex B:	Honorary NHS Contract Holders: Definition of NHS Work	30
Annex C:	Extracts from Old & New Consultant Contracts	31
Annex D:	Addresses of Secretariats	35
Annex E:	Additional Review Provisions	36
Annex F:	Flowcharts – Forms Required for:- B and A Nominations A+ - Self Nomination Route Only	38 39
	WHICH ANNEX TO USE	40
Annex G:	SACDA Curriculum Vitae (CV) Form: Guidance Notes on Completion and Form	41
Annex H:	SACDA Employer Citation Form: Guidance Notes on Completion and Form	47
Annex I:	SACDA Nomination Citation Form: Guidance Notes on Completion and Form	51
Annex J:	SACDA 5-Yearly Assessor Citation Form	55
Annex K	SACDA Additional Assessor Citation Form	57
Annex L	SACDA Supporting Statement for A+ Awards	59
Annex M:	SACDA Regional Advisers	61

FOREWORD

In our continuing efforts to make access to the Scheme and the review of applications as fair as possible, we are making three changes for 2009. Firstly, the electronic system will go live for all applications, nominations, and citations. Secondly, entry to the A+ competition will be entirely by self nomination. The third change is a revision of the traditional SACDA 'Regions'. It has been recognised for some time that the job patterns of consultants differ widely depending to a significant extent upon the place of work. For 2009, therefore, SACDA will review cases from the four principal centres in which teaching hospitals are located through the established 'Regions' and cases from the remaining Health Boards together as a fifth group. Details will be found within the Guide. These changes are in line with the thinking of the Review Group which, as is well known, has a main aim of evolving the SACDA Scheme to offer as equal an opportunity as possible for consultants to progress to higher awards.

The electronic system, SACDA Online, has been extensively trialled and will come into full operation with the publication of this Guide. A separate booklet of instructions for using the system has been prepared and will be made widely available. The most important first step is for intending users to register with SACDA Online. Up to date information and instructions can be found through the SACDA website. (http://www.sacda.scot.nhs.uk). In order to assist users, the most important changes in this Guide for 2009 compared with the previous edition have been identified in the table displayed on page six.

The overall aim of the Scheme for 2009, which is to recognise outstanding contributions to highest quality of patient care, research and development, teaching and training and to the NHS generally, over and above what could normally be expected for the individual consultant in his/her situation, remains the same. Because the number of awards is small (and outwith the control of SACDA) it is inevitable that more consultants may satisfy the criteria for an award than the number of awards available, hence, the process is competitive.

SACDA has the difficult task of deciding (on behalf of the Deputy First Minister and Cabinet Secretary for Health and Wellbeing) which consultants should be granted an award. No process which involves making judgement of this kind can be above disagreement and not all will understand how a decision has been arrived at — often because they do not have all the information which is available to SACDA.

SACDA will continue to operate without discrimination on grounds of age, gender, ethnicity, belief, type of contract, specialty or area of work, or other relevant factor. Anyone who feels this principle has been breached is invited to write in confidence to the Chairman or Medical Director.

SACDA operates a members' Code of Conduct consistent with the principles of Ethical Standards in Public Life (Scotland) Act 2000. SACDA will continue to operate a scoring system as outlined in its guide (published on the website at http://www.sacda.scot.nhs.uk) to assist in its decision making. SACDA recognises the limitations of such a system and in ALL cases the final decision is based on the judgement of the Committee. Some specialties and work patterns do not sit comfortably in a scoring system and a number of specialised or unique posts in the NHS are difficult to assess by this method; SACDA will give special attention to such cases.

SACDA consists of consultants nominated by the Medical Royal Colleges and the Scottish Consultants Committee, representatives of NHS employers and lay members nominated by the Deputy First Minister and Cabinet Secretary for Health and Wellbeing and is assisted in its work by a network of volunteer Regional Advisers. They facilitate the process, by providing information and general guidance to consultants in their Regions and by advising SACDA of local circumstances. Regional Advisers, however, do not have a part in the decision making itself. All involved in the scheme are committed to a fair, transparent and open process. All consultants and academic general practitioners in the NHS in Scotland are invited to take full advantage of this commitment.

Colin J Suckling Chairman

John L Reid Medical Director

MAIN CHANGES TO GUIDE FOR 2009

Page No.	Section	Change made	
6	1.2	Value of Awards from 1 April 2008	
6	1.3	Salary Range of Consultants from 1 April 2008	
9	2.1. &	Notification of Changes: Responsibilities of NHS Employers and	
	2.1.1	Universities. Use of SWISS to extract data for nominal roll.	
12	3.4	Method of working – New fifth region	
14	3.15	Notification of Outcome of awards - Use of SACDA Online to notify	
		everyone of outcome of awards in 2009.	
15	4.1	Who can nominate – B and A awards only. A+ nominations are made	
		only through the Self Nomination route.	
16	4.2.7	(New Paragraph) - Other Organisations. Notification of proposed	
		nominations must be sent to SACDA in order for that organisation to be	
		added to the list of nominating bodies on the system, including the	
		authorising head of organisation.	
17	4.4.1	Completion of Forms – via the new Online System. Link to separate	
		Guide on how to use the Online system.	
18	4.4.3	Nomination Forms for A+ - Self Nomination route only.	
18	4.4.4	Submitting applications via the Online system.	
19	4.5	Letters of Support Deadline.	
23	6.2.1	The SACDA CV Form - 5 Yearly Reviews.	
		Change of deadline date and Employers now able to view submitted	
		CVs online using the new SACDA Online system.	
24	6.2.5	5 Yearly Review Citation Form.	
26		Calendar for Awards Round 2009 – Changes to dates and timetables of	
		meetings.	
28		Accessing Information – links to Guide and new Online system.	
39		A+ Flowchart – Revised procedure	
40		(New Table) - Guidance on Which Annex to Use	
41		Guidance Notes on Completion of SACDA CV Form	
47		Guidance Notes on Completion of SACDA Employer Citation Form	
51		Guidance Notes on Completion of SACDA Nomination Citation Form	

SECTION 1: VALUES, NUMBERS, AGE LIMITS AND FUNDING

Value and Total Number of Awards

- 1.1 The value of awards is decided by Ministers in the light of the recommendations by the Review Body on Doctors' and Dentists' Remuneration. Awards are paid with salary and are pensionable. Expenditure on A+, A and B awards in Scotland in 2007/08 was approximately £25 million, including the national insurance and pension contributions payable on the awards.
- 1.2 The numbers, values and estimated percentages of A+, A and B awards in payment in Scotland at 30 September 2008 are set out in the table below:

GRADE	NUMBER OF AWARDS	% OF TOTAL CONSULTANT BODY	VALUE (1/4/08)
A+	50	1.2%	£74,768
Α	158	3.8%	£55,098
В	343	8.4%	£31,486
Total	551	13.5%	

1.3 The basic salary scale range for consultants as at 1 April 2008 is £60,944 - £79,001 (Old contract), New Contract £73,403 - £98,962. Distinction awards are paid in addition to consultants' basic salaries and subsume the value of any discretionary points held previously. Thus it is not possible to hold a distinction award in addition to discretionary points.

MPT/PT Consultants

1.4 Consultants who have opted to stay with the old consultants' contract and are employed on a maximum part-time (MPT) contract will be paid 10/11ths of the full value of the award. Consultants employed on other part-time arrangements under the old consultants' contract will be paid on a pro-rata basis. For example, a consultant with five notional half days will be paid 5/11ths of the full value of the award.

Consultants who work part-time under the new consultants' contract will be paid a proportion of an award on a pro-rata basis. For example, a consultant who undertakes the equivalent of 6 out of the possible 10 programmed activities per week will receive 60% of the value of an award.

Honorary NHS Contract Holders

1.5 For whole-time clinical academic consultants holding honorary (unpaid) NHS consultant contracts, there are special provisions governing the assessment of NHS work and the proportion of awards payable (see paragraph 2.2.1, and Annexes B and C as appropriate).

Number of Awards Available for Allocation Each Year

- 1.6 The number of awards available for allocation by SACDA each year depends on:
 - a. Resignations, retirements and deaths of existing award-holders;
 - b. Advancement of existing award-holders to a higher award, thus freeing the previously held lower award for re-allocation;
 - c. Movements of award holders to and from England, Wales and Northern Ireland;
 - d. Additions to the total numbers of awards decided in the light of recommendations by

the Review Body on Doctors' and Dentists' Remuneration. The SACDA Chairman and Medical Director give evidence to the Review Body on the numbers of awards, taking account of the increases in the numbers of consultants regarded as potential award-holders.

Payment From 1 April 2009

1.7 All awards granted in the 2009 awards round will be backdated so as to be payable from 1 April 2009. A consultant who retires or leaves the NHS prior to 1 April 2009 is not eligible for a new or increased award in the 2009 round.

Funding of Awards

1.8 All A+, A and B awards are funded from a central budget managed by the Directorate of Finance of the Scottish Government Health Directorate. Specific guidance on the details of the central funding arrangements is issued annually to Finance Directors of all NHS employers.

Discretionary Points

1.9 Discretionary Points and Distinction Awards are completely separate schemes and SACDA has no control over the former. The value of any previously awarded Discretionary Points is subsumed into the value of a Distinction Award.

SECTION 2: ELIGIBILITY

The Nominal Roll

2.1 The names of all consultants with contracts in the NHS in Scotland are listed in the Nominal Roll. The information listed in the Nominal Roll, apart from award level status, is maintained by NHS Employers through the SWISS database. To be eligible for an award the name must be included in the Roll.

Notification of Changes: Responsibilities of NHS Employers and Universities

- 2.1.1 The SACDA Secretariat accesses information on all award-holders and all eligible consultants by extracting data from the SWISS database maintained by NHS Employers.
- 2.1.2 Employers should, therefore, inform Information Services Division of:
 - Changes to a consultant's contract (for example, leavings, retirals, changes in specialty, secondments, unpaid leave, prolonged absence from the NHS, re-employment after retirement) regularly (at least monthly) to ensure that the data used by the Secretariat are accurate. It is especially important that changes are notified timeously to avoid potential difficulties in the continuation and allocation of awards.
- 2.1.3 In the case of clinical academic staff the accuracy of the Nominal Roll is ultimately dependent upon universities informing the appropriate NHS employers that honorary consultants' circumstances have changed or are about to change, and to do so well in advance of the end of each academic year (30 September).
- 2.1.4 The Secretariat will request that the NHS Boards submit, in writing, by the end of June 2009 notification of all those consultants and honorary consultants who will be, on or before 30 September 2009 terminating their contracts, or who are to become ineligible for awards through a change in their contracts. This information should be noted on ISD(M)27 forms or through the web based system.
- 2.1.5 The integrity of the scheme is dependent upon timeous notification of those data.

Who is Eligible?

2.2

- 2.2.1 Doctors and dentists who hold a medical or dental qualification, are fully registered, and are employed as a consultant by one of the following NHS employers: an NHS Board, a Special Health Board, a Special Hospital or other NHS Employer with nationwide responsibilities see para 4.2.3. Consultants on the old contract must have reached the maximum point on their salary scale. Consultants on the new contract must have reached point 5 on the salary scale. They remain eligible while in substantive (but not locum) employment up to age 65 (or in certain circumstances up to 70).
- 2.2.2 Clinical academic consultants (i.e. medical or dental consultants who are employed in Higher Education Institutions, or other organisations, in a research and/or teaching capacity) who also devote an assessable amount of time to NHS work which can be verified by the NHS employer holding the honorary contract. The definition of NHS work for this purpose is set out in Annex B. For whole-time clinical academic consultants there are special provisions regarding the proportion of award payable. These are set out in Annex C for consultants employed both under the old and new NHS Consultant Contract.
- 2.2.3 Consultants employed as Postgraduate Deans or Associate Postgraduate Deans in

medicine and dentistry are eligible on the basis of their work in such posts.

- 2.2.4 Undergraduate Deans, who hold an NHS clinical contract.
- 2.2.5 Consultants employed as part time Medical Directors who also undertake clinical sessions. Consultants employed as full time Medical Directors who were appointed prior to 31 October 2001(see HDL(2001)41 which refers).
- 2.2.6 Consultants working as clinicians with additional responsibilities, such as clinical directors, clinical co-ordinators or patient services directors in NHS Boards or operating divisions retain their eligibility for distinction awards, account being taken of their clinical work and of their contribution as clinical director, clinical co-ordinator or patient services director irrespective of any additional management responsibilities.
- 2.2.7 Academic general practitioners holding substantive contracts of employment as clinical academics at or above Senior Lecturer level (or equivalent) with a higher education institute and/or the Medical Research Council, and considered by the employer to be undertaking duties and responsibilities commensurate with consultant clinical academic staff, will be eligible for awards, provided that they:
 - are registered general practitioners,
 - work at least half time as an academic GP,
 - are practising clinicians providing some direct NHS services, and
 - undertake at least five programmed activities (or equivalent sessional time) beneficial to the NHS, including teaching and clinical research.
- 2.2.8 Consultants employed in the Scottish Government Health Directorate, NHS NSS and in the Scottish Prisons Service who retain NHS remuneration arrangements are also eligible for consideration by virtue of their overall contribution to the NHS.

Who is Not Eligible?

- 2.3 Consultants employed in the following categories are not eligible for distinction awards:
 - 2.3.1 Any consultant who leaves NHS Employment prior to 1 April 2009.
 - 2.3.2 Locum consultants
 - 2.3.3 Consultants employed in full-time general management positions, such as Chief Executives or General Managers. Where the position is a part-time one, and the individual continues to undertake clinical work as a consultant under a separate clinical contract, he or she will continue to be eligible in the same way as any other part-time consultant, with any award paid on a pro-rata basis.
 - 2.3.4 Consultants employed as Medical Directors with no clinical sessions and who were appointed after 31 October 2001 (see HDL(2001)41 which refers).

Changes in Circumstances

2.4 The following changes in circumstances may affect payment of, or eligibility for, awards. It is the responsibility of both award holder and NHS Employer to inform SACDA of such changes. Failure to do so may jeopardise the continuation of the award.

Change in nature of contract

2.4.1 Where an award holder changes substantially the nature of the contract held with the NHS employer or the number of sessions undertaken, continuation of the award will be subject to the approval of the Chairman and Medical Director of SACDA.

Change in Specialty

2.4.2 If an award-holder ceases to practise in the specialty for which the award was granted, the circumstances of the case will be subject to review by SACDA.

Unpaid Leave

2.4.3 The payment of an award shall cease during any period of unpaid leave. If the leave is for a period in excess of one year the question of the reinstatement of the award will be subject to review by SACDA.

Secondments

- 2.4.4 If a consultant is seconded full-time to a post with a non-NHS employer, he or she will not be eligible for consideration for an award during the period of secondment. Any existing award will be regarded by SACDA as suspended for the duration of the secondment and subject to review at the end of the secondment.
- 2.4.5 Where an award-holding consultant returns to clinical work after a period in a full-time general management position, the award will be reinstated, subject to approval of the Chairman and Medical Director of SACDA, provided the consultant returns to a similar post in the same specialty.

Prolonged Absence from NHS Service

2.4.6 If a consultant is absent from NHS service and does not practise within their specialty for more than one year, SACDA will review the award in the light of the circumstances of each case; prompt notification by employers is essential in such cases (see section 2.1).

Re-employment after Retirement: Effect on Entitlement

2.4.7 Award-holding consultants who, after retirement or partial retirement for pension purposes, are re-employed in a <u>substantive</u> (but not locum) NHS consultant appointment in the same specialty may continue to be paid for their distinction awards where they continue to meet the criteria for holding an award. This is subject to the provision that the continuation of the award must have been agreed and confirmed by the Chairman and Medical Director of SACDA. This will be subject to the normal provisions for pro-rata payment of the award where re-employment is on a part-time basis. Payment of an award may continue until age 70, subject to all awards granted in, or after, the 1989 awards round being confirmed at five-yearly intervals.

Consultants Formerly Employed on Trust Contracts

- 2.4.8 Consultants who were formerly employed by NHS Trusts under non-standard terms and conditions and who have chosen to remain on these non-standard terms and conditions rather than move to the new consultants' contract continue to be eligible for distinction awards.
- 2.4.9 Formerly Trusts were free as indicated in *NHS Trusts: a working guide* (NHS Management Executive, HMSO 1990) to agree contractually with individual consultants to offset the cash value of any distinction award in whole or part against a higher salary

or bonus, i.e. that any higher salary or bonus would be paid on condition that this additional remuneration would be offset against the cash value of any future distinction award. Where any such additional remuneration was less than the value of the distinction award gained, the consultant remained entitled to the difference. Where consultants have opted to stay on their former terms and conditions, these guidelines still apply.

SECTION 3: STRUCTURE AND OPERATION OF THE SCHEME

SACDA Remit

3.1 The Scottish Advisory Committee on Distinction Awards acts on behalf of the Scottish Ministers by taking the final decisions on which NHS consultants will receive awards and reviews the retention of awards on a regular (5 yearly) basis, using a system based on peer review with employer and lay input and the evidence submitted by consultants in their curricula vitae.

SACDA Membership

- 3.2 SACDA has 14 members, including the Chairman and Medical Director/Vice-Chairman. Members are appointed by Scottish Ministers and include four nominees from the Academy of Medical Royal Colleges and Faculties in Scotland; two nominees from the Scottish Consultants Committee representing the general body of consultants in Scotland; two NHS employers who are nominated in consultation with the Scottish Government Health Directorates; and two lay members who are appointed in accordance with the Office of the Commissioner for Public Appointments' Code of Practice. Members of SACDA are appointed as individuals, not as representatives of any specialty or employer. The Chief Medical Officer and the Chief Executive NHS Scotland are ex officio members. The Chief Dental Officer in Scotland and the Chairman and Medical Director of ACCEA for England and Wales are observers ex officio at the main yearly (final) meeting.
- 3.3 Details of individuals appointed to serve on the Committee may be obtained by writing to the Secretariat and are published in the SACDA Annual Report.

SACDA Method of Working

3.4 SACDA's operation has conventionally involved four "award regions", viz. Western, South Eastern, Eastern and North/NorthEastern and from the 2009 awards round, a fifth region consisting of Smaller and Special Health Boards will be in place.

Nominations of consultants from themselves (self-nomination, B & A awards only) and from individual colleagues are considered by SACDA in March and a short list prepared for each of the five "award-regions". Independent supporting statements will be sought for all those so short-listed. In addition, SACDA formally requests further nominations from employers and the body of award-holding consultants in each region and from Royal Colleges, Faculties and professional associations. Meetings of a sub-committee of SACDA, convened by the Chairman, are held in all five regions to prepare short lists for consideration by the full committee in July. These lists are based upon the results of independent scoring (of individual CV's and Citations) by members of SACDA coupled with discussion from employers and senior award holders at the regional meetings. In July SACDA meets privately to discuss A+ nominations and prepare for its final meeting in September.

Details of the conduct of the Regional meetings and of all SACDA meetings are given in the standing orders available on request from the Secretariat or from the SACDA website (http://www.sacda.scot.nhs.uk).

It is important to emphasise that SACDA does not itself make nominations.

Role of the Consultants at Regional Awards Meetings

3.5 The role of the award holding consultant members at Regional Awards meetings is, having taken soundings within their own and related specialties, and in other specialties, to advise on the award-worthiness of individual consultants for consideration by the SACDA sub-committee. The

SACDA Advisers (sections 3.8 and 3.9) are responsible for co-ordinating this aspect in preparing the Regional Awards meetings.

Role of Employers' Representatives at Regional Awards Meetings

- 3.6 The role of NHS employers' representatives at Regional Awards meetings is to represent, and act as a channel for, the views of employers generally within the region. They will need to have taken soundings amongst employers to ensure that employers are satisfied that the claims of individual consultants and honorary consultants are not being overlooked, and that employers' views about the award-worthiness of individual consultants nominated are known. As far as is possible they should aim to confirm the details given by a consultant nominated in his/her CV.
- 3.7 Medical Directors may deputise and speak for senior management at a regional meeting irrespective of whether or not they are consultants or hold a distinction award.

SACDA Advisers

- 3.8 SACDA Advisers are senior award-holders who are employed in the Region; they may be NHS consultants or honorary NHS consultants. They are appointed as Advisers for normally a three-year term (with the possibility for renewal/extension) by the SACDA Chairman after consultation with the Medical Director. They take a full part in the Regional A and B awards process in their Region, and are in attendance at the final meeting of SACDA, but they do NOT participate in the decision making itself.
- 3.9 If the awards scheme is to be operated fairly, the independence of Advisers must be respected. They must not be seen as advocates for particular specialties or individuals but can advise SACDA where individuals in specialty groups may have been overlooked. While it is a perfectly proper exercise of their function to give general advice about the awards scheme, and to assist consultants with questions of procedure (such as presentation of CV forms), they have to be careful to avoid becoming sounding boards for causes or grievance and should be visibly neutral in discussions at preliminary, regional and other meetings. An exception may be appropriate where no one is available to speak on behalf of a nominated consultant (perhaps because of the nature of the specialty) and where the absence of factual information may disadvantage his/her case. It is not normally appropriate for the Advisers to nominate individuals for A and B awards.

Preliminary Meetings of Award holders within the Regions (sometimes referred to as Specialty Group Meetings) and Employers Meetings

- 3.10 The purpose of meetings of local award holders is to consider nominations they would collectively wish to make. They have no power to influence or block nominations from other sources (including self nomination) which are considered separately by SACDA.
- 3.11 While SACDA is not directly involved in the conduct of preliminary meetings, whether conducted on an Area-wide or Region-wide basis or on a specialty basis within an Area or Region, it does have overall responsibility for the fairness and propriety of the process. It is for the award-holding consultants within each Area, with the help of the SACDA Advisers, to decide their procedures for identifying possible candidates for awards.
- 3.12 NHS employers of consultants and honorary consultants in each Area should decide their procedures. It will be for the Chairman of the NHS Board to co-ordinate the arrangements.
- 3.13 Whatever procedures are adopted locally, the guiding principle for the conduct of preliminary awards meetings should be that of compiling reliable information about the performance of consultants under consideration.

3.14 For such discussions to be unbiased and objective, the confidential nature of these meetings must be strictly respected.

Notification of Outcome of Nominations

3.15 SACDA makes its final decisions at its meeting at the end of the awards round at the end of September.

All nominated and self-nominated consultants, and those undergoing 5 year review, will be notified of the result shortly thereafter by SACDA, via the Online system, who will also inform the employer who will make the resulting adjustment in the salary.

Publication of Award-Holders

3.16 Names of new recipients and all award holders are published in the SACDA Annual Report issued by the Scottish Government to all NHS current Employers, to be made freely available locally to consultants and others with an interest in the scheme. It will also be published on the following website: http://www.sacda.scot.nhs.uk/

Monitoring the Distribution of Awards

3.17 SACDA monitors the geographic spread of awards and the distribution between specialties, gender and ethnic minorities and publishes such information in its Annual Report (section 8). It will ensure that the interests of consultants in groups with a relatively low proportion of awards and those working in special and unusual situations will be carefully considered.

SECTION 4: NOMINATION ARRANGEMENTS

4.1 Who can nominate

The following can nominate consultants for B and A awards only. Individuals wishing to apply for an A+ award must submit a Self Nomination.

- 4.1.1 Individual consultants, who may nominate a colleague or themselves
- 4.1.2 NHS employers
- 4.1.3 Postgraduate Deans
- 4.1.4 Undergraduate Deans of Medical and Dental Schools
- 4.1.5 Royal Colleges and Faculties
- 4.1.6 Other relevant professional bodies
- 4.1.7 Local senior award-holders

4.2 Invited nominations for B and A awards only

4.2.1 Royal Colleges and Faculties

The Royal College of Physicians of Edinburgh

The Royal College of Physicians and Surgeons of Glasgow

The Royal College of Surgeons of Edinburgh

The Scottish Dental Faculties

4.2.2 Also – the following Colleges/Faculties, usually through their Scottish Council/Committee:

Royal College of Anaesthetists

Royal College of General Practitioners

Royal College of Obstetricians and Gynaecologists

Royal College of Ophthalmologists

Royal College of Pathologists

Royal College of Psychiatrists

Royal College of Radiologists

Royal College of Paediatrics and Child Health

Royal College of Physicians of London

Royal College of Surgeons of England

Faculty of Dental Surgery, Royal College of Surgeons of England

Faculty of Occupational Medicine of the Royal College of Physicians, London

Faculty of Public Health Medicine of the Royal Colleges of Physicians of the United Kingdom

College of Emergency Medicine

Nominations from Royal Colleges and Faculties, or where preparation of nominations is delegated to a specialty group in Scotland, must be ranked in numerical order, via the Online system, of priority within Scotland and within that specialty group.

National Employers

4.2.3 NHS National Services Scotland¹

Quality Improvement Scotland

Medical Research Council

Mental Welfare Commission

Scottish Ambulance Service

NHS Education for Scotland

Health Scotland

Special Hospital Board for Scotland (State Hospital, Carstairs)

Nominations must be ranked in numerical order, via the Online system, of priority within Scotland.

NHS Employers of Consultants and Seconded Consultants

4.2.4 Chairmen of the NHS Boards are asked to submit a list of nominations along with the employer citations for the Health Board area. Copies of these nominations will be transmitted to SACDA and to the Advisers for the appropriate Region.

NHS Employers should consider whether any consultants employed by them but seconded elsewhere in the NHS, after consultation with the management of the unit of secondment, should be considered for an award.

Nominations must be ranked in numerical order of priority, via the Online system, and authorised by the Chairman or Chief Executive of the NHS Board.

Undergraduate and Postgraduate Deans

4.2.5 Deans of Medical Schools
Deans of Dental Schools
Postgraduate Deans.

The Professions in Scotland

4.2.6 Committees representing the medical and dental professions in Scotland, the Overseas Doctors' Association and the Medical Women's Federation.

Other Organisations

- 4.2.7 It is also open to specialist societies and other groupings of consultants, other than those listed above to submit nominations. Should any other organisation, not listed above, wish to submit nominations they must contact the Secretariat via email (Committee@shsc.csa.scot.nhs.uk) prior to registering on the SACDA Online system with the following details:
 - Name of organisation
 - Name of the Head of the organisation who will be authorising the citations
 - Names of consultants asked to complete nomination citations, if other than the Head of the organisation

This will allow the Administrator to input their details into the system in preparation for submission of nominations.

¹ NHS National Services Scotland is the operating name of the Common Services Agency for the Scottish Health Service

4.3 Self-nominations

Individual consultants who wish to nominate themselves should submit a completed CV form using the SACDA Online system to the SACDA Secretariat by 30 January 2009 and must ensure that they advise the NHS employer(s) holding their contract or honorary contract of their intention to self nominate.

4.4 The nomination forms and their completion

Completion of Forms

4.4.1 All forms must be submitted using the SACDA Online system at https://awards.sacda.scot.nhs.uk/index.php

Completion of certain fields is mandatory

A strict limit has been imposed on the number of characters that may be entered onto these forms. The font size has been fixed at 11 point. Each box on the form is limited to a fixed number of words per box. For the CV, Criteria 2-5 are limited to 350 words per box, and Criteria 1 and 6 and the Summary are limited to 400 words. You should also save the form as draft before you submit it and ensure that the form prints out on no more than 4 A4 pages. For the Nomination Citation and Employer Citation, the Overall Assessment is limited to 200 words and all other boxes are limited to 150 words. For the Assessment Citation, Question 1 is limited to 300 words and the Summary is limited to 500 words. The forms will not be able to be saved if the number of words is greater than this. Please try to be as concise as possible.

A separate Guide on how to use the system is available on the SACDA website or by contacting the Secretariat.

The Nomination Forms for B and A awards Only

- 4.4.2 Copies of the forms required are set out in Annexes G to I and summarised in flowcharts in Annex F. All nominations shall consist of:
 - In all cases a SACDA Curriculum Vitae (CV) Form (Annex G);
 - SACDA Employer Citation Form (Annex H). Where a consultant holds a contract with more than one NHS employer a separate citation form should be submitted from each employer.
 - SACDA Nomination Citation Form (Annex I), excepting self nominations and employer nominations;

The Nomination Forms for A+ awards – Self Nomination Only

4.4.3 As with B and A awards A+ nominations must include a SACDA Curriculum Vitae (CV) form (Annex G) and a SACDA Employer Citation Form (Annex H).

In addition to this a SACDA Supporting Statement (Annex L) may be submitted. This form is **only** applicable for A+ nominations. Where a colleague or professional body wishes to lend support for an individual who has Self Nominated for an A+ award only, they must use this form. Ranking of these forms is not required.

No nomination will be accepted, from whatever source, without these forms, fully completed and appropriately authorised.

The SACDA Secretariat will NOT pursue incomplete applications.

Submitting Applications

4.4.4 The closing dates for submitting applications and citations will be notified in the system help. **Online submission will end at midnight on that date.** CVs will can not be submitted after that time. Other forms may be submitted after the deadline date but will only be considered under exceptional circumstances. However, if the system is unavailable for technical reasons immediately prior to the deadline, the deadline will be extended to allow further time for submission.

Completion of Curricula Vitae (CV) Form

- 4.4.5 Timeous submission of the CV form must be adhered to, in order to allow completion and submission of an Employer Citation Form to the SACDA Secretariat by the relevant date. It is the responsibility of the NHS employer to submit the Employer Citation Form timeously to the Secretariat without which the nomination will not be considered.
- 4.4.6 Consultants may be asked to provide a completed CV Form to accompany a nomination put forward on their behalf by an organisation or individual during a particular awards round. The consultant must ensure that only one version of the CV Form is prepared for any particular awards round, and that this is not amended for any separate nominations put forward during that awards round.
- 4.4.7 In the interests of fairness to all consultants, strict adherence to the rubrics and instructions associated with CV forms is regarded by SACDA as very important.

Inclusion of All Relevant Data and Verification Procedures

- 4.4.8 SACDA Members rely heavily on the contents of CV Forms and Citation Forms for their initial assessments. Consultants should take care in completing the CV Forms that they fully and fairly reflect their work and wider contributions to the NHS. If significant data, or the detailed information requested (such as the dates of various duties), are omitted from the CV the case for an award may be substantially undermined.
- 4.4.9 SACDA will check all CVs and will audit a proportion of CVs which may involve assessment by external reviewers. Where it is apparent that information is misleading this could have an adverse effect on the committee's award decisions.
- 4.4.10 SACDA takes into account any past or current disciplinary matters. Openness in regard to such matters is advisable.
- 4.4.11 Consultants who move to appointments in Scotland from consultant appointments in England, Wales and Northern Ireland should note that the ACCEA Secretariat does not transfer personal information about them to SACDA. Such consultants are requested to complete a CV using SACDA Online so that SACDA can place each consultant appropriately within the SACDA Scheme.

Relevance of Documentation from Previous Years' Considerations

4.4.12 Previous years' CV and Citation forms or letters of support are not reconsidered or recirculated, and each round's documentation is self-contained.

4.5 **Letters of support**

Individuals, usually consultant colleagues, sometimes wish to write in support of a consultant's case for an award. Such letters should be addressed to the SACDA Medical Director and

received by the Secretariat by 30 January 2009. They may add to, but do not replace, formal nomination. However, lobbying campaigns on behalf of individual nominations are likely to be counter-productive and should be discouraged.

4.6 Special Reviews

The Purpose of Special Reviews

4.6.1 There is, as yet, no formal system of appeal against the non-receipt of an award. Any consultant who feels he or she may have been overlooked should Self Nominate. If a consultant believes that there are special circumstances of which SACDA may have been unaware, and wishes a Special Review he or she may write to the Chairman or Medical Director. Special Reviews are only intended to be used on the rare occasions where, for instance, personality differences or personal bias may be thought to be operating against a consultant or health problems exist. It is understood that a consultant may not wish to place such matters on his or her CV form; they may be conveyed in a confidential letter to the Medical Director. The SACDA Chairman and Medical Director will consult as necessary on whether a request for a Special Review will be accepted. Their decision is final.

Forms and Timetable

4.6.2 Requests for a Special Review must be supported by a CV Form and an Employer Citation Form submitted to the Secretariat **by 30 January 2009** using the SACDA Online system. These forms may be supported with a letter addressed in Confidence to the SACDA Medical Director stating the reasons behind the request for a Special review.

Repeated Requests for Special Reviews

4.6.3 Special Reviews will not normally be granted less than three years after one has been undertaken, and only then if new and relevant factors which have come to notice since the previous review can be clearly demonstrated. Consultants have the option of self-nomination if they wish to receive consideration after a shorter period.

Notification of Outcome

4.6.4 The consultant will be informed of the action taken and the outcome of a Special Review by the SACDA Chairman at the conclusion of the awards round.

4.7 Unsuccessful Nominations

4.7.1 A consultant nominated for an award whose nomination is unsuccessful may write to the SACDA Medical Director and ask for the reasons why he or she was unsuccessful. It should be recognised that the very limited number of awards available in any one year against the number of nominations received means that this will be because others have been judged to have a stronger case. However, failure to achieve an award should not imply that a consultant's performance has been less than satisfactory.

SECTION 5: THE CRITERIA FOR AWARDS: WHAT SACDA LOOKS FOR

The Criteria

The Criteria for awards are set out in Annex A.

ESSENTIAL POINTS THAT ASSIST SACDA'S APPROACH TO ITS DECISIONS

- 5.1 The essential points of these criteria that assist SACDA's approach to its decisions, and that consultants will wish to bear in mind if they are being nominated for an award or are looking at the decisions of SACDA, are:-
 - awards are given for outstanding professional work especially that which shows benefit to the wider NHS.
 - they are not seniority payments or rewards for long service
 - they are for performance over and above what would normally be expected for the position concerned
 - in application of the criteria the differing opportunities and expectations for consultants employed in different types of posts or organisations will be recognised
 - they are not restricted to, for example, academic or research contributions, but recognise the consultant's total contribution to service to patients, teaching and management and development of the service
 - a record of achievement is expected across a range of most of the areas listed in the criteria; success in only one of these areas will not normally be sufficient
 - full participation in the annual appraisal exercise in the previous year is essential.
 - for the small number of awards available at A and A+ level, a very high standard is required.

What SACDA Looks For

- 5.2 Consultants working in teaching hospitals will generally be expected to undertake teaching and to have reasonable academic productivity. In the case of honorary contract holders the academic activity will naturally be expected to be strong in itself, over and above that normally expected if it is to be a factor in consideration for an award. Consultants in teaching hospitals, because they tend to be more numerous and have other contractual responsibilities alongside their NHS service contribution, may have less opportunity to take part in local service management. However, leadership in the specialty, both within and outside the local employer's catchment area, will generally be expected.
- 5.3 Consultants working in other NHS hospitals or for other types of NHS employer may satisfy the criteria very differently. Again, local leadership and leadership of the specialty within and outside the employer's own area will generally be looked for. Many consultants who work in such hospitals undertake considerable teaching work and this will be given due weight. Many also undertake substantial and valuable research. The criterion relating to achievement of service goals (see criterion in Annex A (6)) may also be of particular relevance in the non-teaching hospital environment. SACDA will also seek to ensure that consultants in less "visible" specialties and employment situations, who nonetheless make a notable contribution

to the NHS and to medical advance, are given full consideration. SACDA will have regard to the opportunities for work over and above what is usual in the different environments in which consultants work.

Those recommended for an A award will need to show continuing satisfaction of the criteria, at a higher level than for a B award. They might normally be expected, for example, to be the Chairman or Vice-Chairman of local and regional and/or national specialist, management, advisory or executive committees, and to be showing substantial leadership in service, teaching and (if appropriate) research. At A+ level outstanding professional leadership is expected and normally with national or international recognition of the contribution to the NHS.

Length of NHS Service as a Consultant and Recency of Previous Award

- There is no lower age limit at which consultants may be given an award. However, consultants will normally have a number of year's experience in the NHS before they can expect to be considered. SACDA would normally expect candidates for a B award to have 10 years experience in their discipline and grade while those being nominated for an A award will normally have gained an additional 5 years. Those nominated for an A+ award will normally have served 5 years more. These are not hard and fast rules each case is considered on merit.
- It is normally expected that at least three years should elapse before any serious consideration can be given to the possibility of upgrading an award from B level to A, or from A to A+.

Relevance of Discretionary Points Held

There is no link between the number or date of receipt of locally awarded discretionary points and eligibility for distinction awards. To be considered for a distinction award it is not regarded as essential that a consultant should hold any discretionary points - though usually nominees will be in receipt of at least some, since they reflect local satisfaction with a consultant's performance.

SECTION 6: REVIEW OF AWARDS

5-YEARLY REVIEWS

6.1 **Process of 5-yearly reviews**

- 6.1.1 All awards or increased awards granted from the 1989 awards round onwards are subject to review to ensure that each holder continues to meet the criteria appropriate for a distinction award (Annex A). However, those consultants who have left the NHS or who declare in writing that they will have done so (for whatever reason) before the fifth anniversary of their award i.e. 1 April 2009, or those consultants who have, in the interval, advanced to a higher award (and who will be subject to a five-yearly review there from) are not subject to review.
- 6.1.2 SACDA will seek professional opinions in writing and the views of employers are also sought. Any action which represents a departure from the standards of professional and personal conduct required under the guidance issued by the GMC and GDC must be reported to and evaluated by SACDA.
- 6.1.3 Although reviews are carried out routinely at five-yearly intervals, SACDA also has the option to review the case of an individual consultant again within 5 years where they have a reservation as to whether the criteria (Annex A) continue to be satisfactorily met.
- 6.1.4 The review will be undertaken during the fourth year of receipt or renewal of an award, so that any decision to downgrade or withdraw an award can be put into effect five years from the date on which the award was first paid or last reviewed.
- 6.1.5 Normally full participation in an annual appraisal exercise, in the previous year, will be required.

6.1.6 **Deferment of 5yr Renewal Decision. (Supplementary Review)**

Where SACDA considers that a decision to renew an award is marginal or unclear it may decide to defer the decision for one or more award rounds pending further submission of CV/Citations.

6.1.7 Change of retirement date

Where a consultant notifies SACDA of their intention to retire before the anniversary of their award and subsequently wishes to extend their employment, they must inform the Chairman and Medical Director of SACDA immediately. Consultants would usually be expected to submit an updated CV which would be incorporated in the 5 year review process (or next years review process). The existing award would be continued in the interim until the review process was complete unless preliminary review by the Chairman and Medical Director raised significant issues of continued eligibility.

6.2 The 5-yearly review forms and their completion

The SACDA CV Form

6.2.1 In November the SACDA Medical Director will invite every consultant whose award is due for review to submit a completed CV Form via the SACDA Online system to the Secretariat by 30 January 2009. The NHS Employer that holds the NHS contract as a consultant or honorary NHS consultant will be able to view this submission via the SACDA Online system.

Inclusion of All Relevant Information

- 6.2.2 Consultants should ensure the SACDA CV Form fully and fairly reflects their work and wider contributions to the NHS, and especially new work undertaken since the award was granted or last reviewed.
- 6.2.3 SACDA recognises that a consultant's job pattern may have changed since the original award or any previous 5-yearly review. Nevertheless a successful outcome of a review will require that evidence of a continued distinguished contribution to the NHS at the appropriate level is presented.

The case for continuing an award will be substantially undermined if significant data, or if the detailed information requested (such as the dates of various duties), are omitted from the form. If consultants do not give such attention to completing the SACDA CV form, a further and more detailed review the following year is likely — or the award may be downgraded or withdrawn.

6.2.4 SACDA has a responsibility to take into account any past or current matters of a disciplinary kind, adverse Court decisions concerning a consultant, or adverse conduct or performance decisions of the GMC or GDC. Consultants are urged to be open in such matters, and an appropriate statement should be made in the personal statement section of the SACDA CV form, or confidentially in a letter to the Medical Director.

The SACDA 5-Yearly Review Citation Form

6.2.5 The Chief Executives of NHS Boards who hold the NHS contracts of consultants will be asked to complete an Employer Citation Form (Annex H) setting out their views on the cases for the renewal of A+, A and B awards from their local perspective (with particular reference to 6.2.2 above). They will be asked to submit the Employer Citations Forms to the Secretariat via the SACDA Online system by 13 February 2009. If renewal is **not** supported by the employer the reasons must be clearly stated.

6.3 How B, A and A+ Awards are reviewed

- 6.3.1 In all cases, two or more independent professional Citations (See Annex J) from current award-holders will be sought by SACDA.
- 6.3.2 During each Regional Awards Meeting the names of all award-holders who are in the course of review will be announced to the meeting. Any relevant information which those attending the meeting consider to be useful to SACDA can be presented at that stage, or should be sent under confidential cover to the Medical Director within two weeks of the meeting.
 - A+, A and B awards will be reviewed by SACDA Chairman and Medical Director and they may seek such further written information as considered necessary to assist the SACDA in making a decision. Should there be any cases where they have a reservation as to whether the criteria (Annex A) are continuing to be satisfactorily met they will refer these to a meeting of the SACDA Committee.
- 6.3.3 When SACDA is satisfied that an award should be renewed, the Secretariat will notify the NHS authority that holds the consultant's or honorary consultant's contract that the award is confirmed under the normal 5-yearly review cycle.

6.4 Withdrawal of Awards

6.4.1 If a preliminary decision be taken by SACDA to withdraw or downgrade an award the consultant's NHS employer will be informed of this. The consultant will be advised of the preliminary decision and the reasons for it by the SACDA Chairman and a copy of all citations and all other written information received relating to the review will be sent to the consultant. He or she then has the opportunity to put his or her case, in writing, to SACDA for discussion before a final decision is made by the Committee as to whether the award be retained or withdrawn/downgraded.

Early Warning

6.4.2 SACDA may decide to issue a warning to an individual who continues to satisfy the criteria to hold an award but where there is an indication in the supporting paperwork that the level of contribution may be decreasing and that in any subsequent review there may not be sufficient evidence to justify continuation of an award.

Effect of Downgrading or Withdrawal of an Award under the 5 Yearly or Supplementary Review Process

A system of salary protection will be applied if an award is downgraded or withdrawn. The consultant's salary, including the distinction award previously held, will be "frozen" until the maximum of the consultant salary scale (plus the value of any lower award if the original award was downgraded) has caught up with his or her "marktime" earnings. The maximum of the salary scale will be deemed to include any discretionary points previously held by the consultant. A consultant affected in this way will continue to be eligible for reinstatement of his or her award, or for an increased award, if his or her performance subsequently improves.

Ineligibility

6.4.4 In the event of a consultant's circumstances rendering him/her <u>ineligible</u> for an award the NHS Employer must ensure that SACDA is informed and that payment of the award ceases immediately.

6.5 Additional Review Provisions

The provisions for an exceptional additional review are given in Annex E.

SECTION 7: SACDA CALENDAR

CALENDAR FOR AWARDS ROUND 2009

October 2008

- All 2008 nominees and consultants subject to 5 year review are notified in writing of the outcome
 of the awards round. Letters are also sent to Chief Executives of NHS authorities to ensure
 payment of awards granted is made.
- The Scottish Government publishes the new Guide to the NHS Consultants' Distinction Awards Scheme.
- The SACDA Online application system is open for completion of forms.

November 2008

- Letters requesting nominations are sent out to recognised nominating bodies. The nominal roll is published on the SACDA website with awards granted by SACDA in 2008. All relevant forms are available via the SACDA Online system.
- SACDA Secretariat writes to all consultants whose awards are due for 5-yearly Review (for 2009, awards granted in 1990, 1995, 2000 and in 2005) except those detailed as exceptions in the Guide. Deadline for submission of forms by the consultants is 30 January 2009.
- SACDA will inform all relevant NHS authorities of consultants subject to 5-yearly Review.
 Deadline for submission of Employer Citations by NHS authorities is 13 February 2009.

30 January 2009

- Deadline for submission of all CVs to Secretariat including 5 yearly reviews.
- Deadline for the receipt by the Secretariat of all local nominations and citations emanating from:
 - the preliminary/specialty meetings held by senior award-holders
 - NHS authorities
 - the Royal Colleges and Faculties,
 - other nominating bodies/professional organisations
 - Self and colleague nominations.
- Deadline for the submission of requests for Special Reviews, accompanying CV Form and Employers Citation.

February 2009

 SACDA Secretariat will issue letters to internal and external assessors, selected by the Medical Director, requesting they give an assessment of those consultants under 5-yearly review.

13 February 2009

- Deadline for receipt of Employers Citation Forms for all other sources of nomination (not including NHS Employer nominations).
- Deadline for receipt of Employer Citation Forms in respect to consultants subject to 5 yearly review.

March 2009

- Publication of the SACDA Annual Report.
- 25 March 2009 SACDA short-listing meeting.
- 27 March 2009 Deadline for the return of 5-yearly Review Internal/External Assessments.
- SACDA will issue letters to assessors, selected by the Medical Director, requesting they give an
 assessment of consultants who Self Nominated (B and A awards) and were short-listed at the
 25 March meeting.

April-June 2009

- Regional Awards Meetings held throughout April to June.
- 10 April 2009 Deadline for the return of Additional Assessor Citation Forms

22 July 2009

 First National Meeting of SACDA. Preliminary Decisions are taken on consultants to receive B, A and A+ awards and any Special Reviews and the 5-yearly Reviews are considered. Meeting of SACDA attended by Committee members only.

23 September 2009

Final meeting of SACDA. Final decisions taken on the final list of recommendations for B, A and A+ awards, 5-yearly and any supplementary reviews. The SACDA Advisers have the opportunity to review activities of the current round of consultations and to discuss any relevant issues with the Chairman and other members of SACDA present. The Chief Dental Officer (Scotland), Chairman and Medical Director of ACCEA are invited to attend as observers.

PROPOSED TIMETABLE FOR MEETINGS 2009

MEETING	DATE	VENUE
Short-Listing Meeting	Wednesday	Scottish Health Service Centre, Edinburgh
(Self/Colleague Nominations)	25 March	
Western B Awards (Regional)	Monday	The Royal College of Physicians & Surgeons of
Western A Awards (Regional)	20 April Thursday 7 May	Glasgow The Royal College of Physicians & Surgeons of Glasgow
Smaller & Special Health Boards (B & A Awards)	Wednesday 20 May	Scottish Health Service Centre, Edinburgh
Eastern B & A Awards (Regional)	Tuesday 2 June	Ninewells Hospital, Dundee
North/North Eastern B & A Awards (Regional)	Wednesday 3 June	Aberdeen Medico-Chirurgical Society
South-Eastern B Awards (Regional)	Thursday 18 June	Royal College of Physicians of Edinburgh
South-Eastern A Awards (Regional)	Thursday 25 June	Royal College of Physicians of Edinburgh
SACDA Preliminary Meeting	Wednesday 22 July	Scottish Health Service Centre, Edinburgh
SACDA Final Meeting	Thursday 24 September	The Royal College of Physicians & Surgeons of Glasgow

SECTION 8: ACCESSING INFORMATION AND FORMS

Anyone, including members of the public may obtain copies of the Guide and the SACDA Annual Report by requesting copies in writing or by fax from:

Ms Kirsteen Thompson
Directorate of Human Resources
Scottish Government Health Directorates
GFR
St. Andrews House
EDINBURGH
EH1 3DG

Fax 0131 244 3778

Accessing Information and Forms via the Internet and the NHS Web

A copy of the Guide for the Awards Round 2009 will be available on the SACDA website at: http://www.sacda.scot.nhs.uk/

All forms relating to the Scheme are only available electronically using the SACDA Online system at the following website:

https://awards.sacda.scot.nhs.uk/index.php

SACDA's Freedom of Information publication scheme, Code of Conduct and Scoring System are also available at:

http://www.sacda.scot.nhs.uk/

CRITERIA FOR DISTINCTION AWARDS

Awards are *not* seniority payments, nor are they given to holders of particular types of post as of right. All doctors and dentists are expected to display, and maintain, very high standard of conduct and professional competence, taking account of guidance issued by the GMC and GDC where appropriate. To warrant consideration for an award, SACDA will look for performance over and above what is normally expected in respect of service to patients, teaching and the management and development of the service. In general SACDA will expect a record of achievement across a range of the criteria listed below from consultants nominated for awards; special achievement in only one or two of these areas will not normally be sufficient.

- (1) professional excellence, which for most consultants will be founded on the sustained quality of the service they provide to patient care, overall contribution to the NHS and recognition of leadership;
- research, innovation and improvement in the service. The expectations will vary for different groups eg Health Board, teaching or district hospital, honorary or NHS contract and will relate to the differing opportunities in these various environments and within different contract arrangements.
- outstanding administrative or management effort, including effective implementation of innovations, involving activities often of national significance, which will again be related to opportunity and normal expectations. For example, honorary NHS contract holders (e.g. clinical academic staff, research workers), whose duties include a small NHS management content will often not contribute substantially in this area. On the other hand consultants working in community and management-based specialties such as public health medicine and dental public health are expected to secure measurable achievement in service development as part of their normal work;
- (4) outstanding contribution to clinical audit, clinical governance, the effective promulgation of evidence based medicine, and external evaluation and audit;
- (5) teaching and training; for example, special effort to train junior staff, or taking a leading role in undergraduate teaching or postgraduate medical education, especially if undertaken in addition to ordinary duties. Contribution by consultants to the training of other NHS staff, and also to public education and health promotion will also be relevant;
- (6) outstanding commitment to the achievement of service goals, successful implementation of developments in practice, and the sustained delivery of high quality patient care in hard-pressed service areas.

Those recommended for an A award will need to show continuing satisfaction of the criteria, at a higher level than for a B award. They might normally be expected, for example, to be the Chairman or Vice-Chairman of local and regional and/or national specialist, management, advisory or executive committees, and to be showing substantial leadership in service, teaching and (if appropriate) research.

For the small number of awards available at A and A+ level, a very high standard is required. Awards might be recommended for those who are evident leaders in a clinical or scientific field, those with outstanding clinical and managerial skills, those who contribute new ideas of proven worth, those who effectively implement innovations, those who are generally accepted as leaders of the profession in their region and in the country as a whole and those with a national or international reputation.

Further guidance on what SACDA looks for in nominations is given in Section 5 of the Guide to the Awards scheme and in the Guide to the Scoring System.

HONORARY NHS CONTRACT HOLDERS: DEFINITION OF NHS WORK

NHS work is defined as follows:-

- the direct care of individual patients or work specifically related to the diagnosis and treatment of individual patients. This should include time spent in the out-patient department, wards and operating theatres or in undertaking procedures including radiological and pathological examinations intended to assist the diagnosis and promote the treatment of a particular patient.
- 2. NHS based activities of wider benefit to patient care in the NHS as a whole, including work carried out in the local setting which has application nationally.
- 3. NHS based research which can be specifically related to the diagnosis or treatment of patients or of wider benefit to patient care in the NHS as a whole.
- 4. NHS-based activities associated with the provision and development of public health medicine and dental public health in the NHS.
- 5. NHS activities involving administration and management.
- 6. A contract based **solely** on teaching duties will not normally count as NHS work. SACDA recognises, however, that there are a few consultants whose work in undergraduate and/or postgraduate medical education is such that it represents a major contribution to the NHS.

It is expected that the relevant NHS employer should verify the amount of time devoted to NHS work as defined above.

CLINICAL ACADEMIC CONSULTANTS

The following extract from the old Consultant Contract details the position for those who have chosen not to move to the new Contract and the proportion of a distinction award payable to those individuals.

Teaching and Research

- 78. Where a consultant holds appointments with one employing authority or more and with the Medical Research Council and/or a University, which together constitute whole-time employment (excluding any notional half-day contracted under paragraph 14), and where the Medical Research Council or University appointment involves clinical work, the consultant shall have the option of being treated either:
 - a. as though he or she were employed on a part-time basis with each employing authority. In such a case the provisions of paragraphs 61 to 66 and 69 to 75 will apply for purposes of calculating the consultant's remuneration from the employing authority; or
 - b. as though he or she were employed jointly on a whole-time basis.

Where the consultant elects to be treated under b., the salary rate paid by each separate employing authority shall be in accordance with the appropriate rates in the respective fields and the proportions of the whole-time rates payable shall be in accordance with the proportion of time spent in each part of the joint appointment. For the purposes of paragraphs 30 to 38, 40 to 42 and 275 to 315, the consultant shall be treated as if he or she were a whole-time practitioner.

79-80. Unallocated.

Honorary Appointments

- 81. Holders of clinical posts in medical or dental schools or with the Medical Research Council, and teachers (including part-time clinical professors or heads of university clinical departments) who devote part of their time to NHS work, shall hold honorary (unpaid) appointments with the appropriate authority, but shall receive reimbursement of travelling expenses, expenses of candidates for appointment, subsistence allowances and postage and telephone expenses incurred in the performance of NHS duties. Such practitioners who hold honorary consultant appointments shall, however, be eligible for distinction awards and discretionary point(s), which shall be paid in accordance with paragraphs 82 to 86.
 - a. Practitioners in the grades of SR, SpR, R SHO and PRHO who are required as part of their approved training programme to work in non-NHS organisations shall be guaranteed continuity of service for employment purposes.

Whole-Time Posts

82. Whole-time clinical teachers and research workers shall receive a proportion of any distinction award or discretionary point(s) made to them according to the average time per week for which they are engaged in clinical work, as follows: -

Average number of hours of clinical work per week	Proportion of award payable
21 or more	The full amount
17.5 or more but less than 21	80%
14 or more but less than 17.5	65%
10.5 or more but less than 14	50%
7 or more but less than 10.5	35%
3.5 or more but less than 7	25%
an assessable amount of clinical work but less than	15%
3.5 hours	

Practitioners Engaged in Private Practice

83. Whole-time clinical teachers who are, exceptionally, permitted to engage in private practice and to retain the fees there from, or to receive a consolidated sum in return for handing these fees to their employer, shall, for the purposes of determining the amount of any distinction award or discretionary point(s) payable, be treated as part-time clinical teachers and the provisions of paragraph 84 shall apply to them.

Part-Time Posts

84. Part-time clinical teachers and research workers shall be paid fractions of any awards made to them on the same basis as part-time clinicians according to the amount of time spent in clinical work, subject to a maximum of that appropriate for nine notional half-days.

Teaching Duties Undertaken by Part-Time Consultants

85. Consultants who hold paid part-time appointments with an employing authority and who undertake teaching duties concomitantly with their clinical work shall be permitted to retain any remuneration they may receive from the University or School in recognition of their teaching duties.

Joint Appointments

- 86. Consultants who hold appointments of the kind described in paragraph 78 and who have elected to be treated as whole-time practitioners under the provisions of sub-paragraph 78.b. shall, where necessary, also hold honorary appointments with the employing authority covering access to the place of work for clinical work arising out of the Medical Research Council or University part of the appointment and shall be eligible for distinction awards and discretionary points on the following basis.
 - a. the amount of the distinction award or discretionary point(s) payable in respect of the contract with the employing authority (or authorities) shall be the same fractional proportion of the full award as the salary is of the whole-time consultant salary;

b. the amount of the distinction award or discretionary point(s) payable by the employing authority (or authorities) in respect of the contract with the University or Medical Research Council shall be calculated in relation to the proportion which, on average, the time spent on clinical work arising from the University or Council contract bears to the total time under that contract, on the following basis:

Where the average time spent on clinical work under the University or Medical Research Council bears the total time under contract a proportion greater than or equal to:

The amount of the distinction award payable shall be the following proportion of the difference between the value of the full award and the amount payable under a. above:

6/11ths	The full amount
5/11ths	80%
4/11ths	65%
3/11ths	50%
2/11ths	35%
1/11th	25%
an assessable amount of clinical work but	15%
less than 1/11th	

NEW CONSULTANT CONTRACT

Under the new Consultant Contract whole-time clinical academic consultants shall receive a proportion of any distinction award made to them according to the average time per week they are engaged in NHS work (as defined in Annex B of the Guide to the Distinction Award Scheme)

Average number of hours of clinical work per week	Proportion of award payable
20 or more	The full amount
16 or more but less than 20	80%
14 or more but less than 16	65%
10 or more but less than 14	50%
6 or more but less than 10	35%
4 or more but less than 6	25%
an assessable amount of clinical work but less than	15%
4 hours	

For comprehensive information on the new Consultant Contract and how this affects clinical academic consultants see NHS Circulars **PCS(DD)2004/2** New Consultant Contract, and **HDL(2004)25** Treatment of Teaching, Training and Research Under the New Consultant Contract and Development of Memoranda of Understanding Between Universities and NHS Boards. Both these documents can be accessed on the Pay Modernisation website at:

http://www.paymodernisation.scot.nhs.uk/consultant/

ADDRESSES OF SECRETARIATS

SCOTTISH ADVISORY COMMITTEE ON DISTINCTION AWARDS (SACDA)

SACDA Secretariat Scottish Health Service Centre Crewe Road South EDINBURGH EH4 2LF

Tel: 0131 275 7741 Fax: 0131 315 2369

Email: committee@shsc.csa.scot.nhs.uk

Correspondence for the Chairman and Medical Director should be addressed to the Secretariat.

ADVISORY COMMITTEE ON CLINICAL EXCELLENCE AWARDS (ENGLAND & WALES)

(Formerly the Advisory Committee on Distinction Awards)

ACCEA Secretariat
Department of Health
Room LG04 Wellington House
133-155 Waterloo Road
LONDON SE1 8UG

Tel: 020 7972 2021 Fax: 020 7972 4556

HPSS DISTINCTION AND MERITORIOUS SERVICE AWARDS SCHEME (NORTHERN IRELAND)

Secretariat
Pay & Employment Unit
Castle Buildings, Stormont,
BELFAST
BT4 3SJ

Tel: 028905 22817

ADDITIONAL REVIEW PROVISIONS

- 1. SACDA may review the award of any consultant at any time and, if appropriate, withdraw it if SACDA is made aware of issues that might bring the continuation of the award into question.
- These additional review provisions, as set out in the following paragraphs, are separate from the standard five yearly and supplementary review provisions (section 6). It is intended that these provisions will be used **exceptionally**, and that they will apply to cases involving **serious matters of professional or personal misconduct, or professional incompetence** where, in the opinion of SACDA, continuation of the award would undermine confidence in the awards system.
- 3. The need to consider review action under these provisions would thus most likely arise as a result of: -
 - disciplinary action by the employer
 - GMC or GDC findings
 - criminal conviction

4. Notification to SACDA: Responsibilities of Employers

It is a condition of the granting and holding of an award that information of a disciplinary nature may be reported to SACDA by employers at any time.

- 4.1 Employers should notify the SACDA Chairman or Medical Director in any case involving serious matters of professional or personal misconduct, or professional incompetence, and where preliminary investigation has established the need for further action.
- 4.2 It should be noted, however, that as a general rule it would be contrary to the principles of natural justice for SACDA to act on the basis of the mere existence of complaints or allegations of a disciplinary or criminal kind which may be contested by the consultant and where investigations are not yet complete.
- 4.3 Where such allegations are under investigation, the employer should report that fact on a strictly confidential basis to the SACDA Chairman or Medical Director, reporting progress towards a conclusion on the allegations made, and informing the outcome.
- 4.4 The consultant should be informed by the employer that this action has been taken.

5. Consideration of the Need for Review Action

- 5.1 Once a conclusion has been reached on the allegations made, the SACDA Chairman and Medical Director will decide the need for further action under these review provisions after consultation with SACDA members as appropriate.
- 5.2 If no further action by SACDA is necessary the SACDA Chairman will notify the consultant and his or her employer.
- 5.3 If the SACDA Chairman concludes that SACDA needs to consider whether or not the award should be continued, the SACDA Chairman will obtain such further information as is considered necessary.
- 5.4 The SACDA Chairman will inform the consultant that the matter is to be put before SACDA, and invite the consultant to put his or her case in writing to SACDA before a decision is made.

6. Basis of SACDA's Considerations

- 6.1 The decision which SACDA is required to take is whether or not the continuation of the award is justified. It is not part of SACDA's role to rehear the evidence or arguments relating to particular allegations. The basis of SACDA's decision will be whether, in its view, the consultant in question is continuing to satisfy the published criteria for awards or where the credibility of the scheme is put into question.
- 6.2 Recipients of awards are expected to display and maintain very high standards of conduct and professional competence, taking account of guidance issued by the General Medical Council and General Dental Council where appropriate. SACDA must satisfy itself that such standards have been maintained, and that the continuation of the award is justified.
- 6.3 SACDA will have regard to the outcomes of any employment disciplinary decision, GMC/GDC or criminal proceedings but such outcomes may not be the sole basis for SACDA's decision; SACDA may also take into account representations or mitigating factors or any other matters it considers relevant.

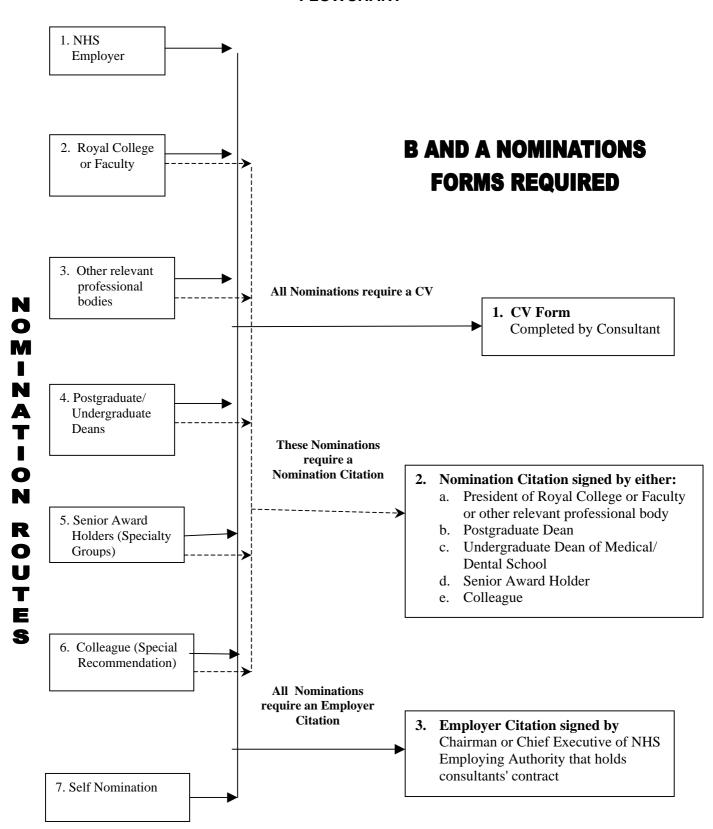
7. Withdrawal/Downgrading and its Effect

- 7.1 Where SACDA decides that the continuation of the award is not justified, it may withdraw (or downgrade) the award and may withdraw the value of the award (or the relevant element thereof) from the consultant's salary.
- 7.2 Any decision to withdraw or downgrade the award, and any consequent salary reductions, will apply from the date of SACDA's decision.

8. Appeal

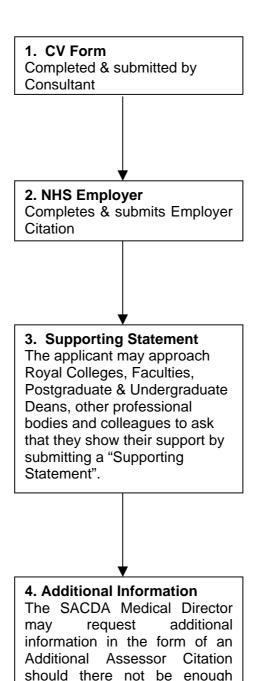
There is currently no mechanism of appeal against action to withdraw an award and the decision of SACDA is final. SACDA would, however, reconsider this decision in the event of any subsequent judicial reversal of a disciplinary decision upon which SACDA's reasons for withdrawal were based.

FLOWCHART



A+ FLOWCHART

A+ NOMINATIONS - ONLY ONE ROUTE - SELF NOMINATION BY CONSULTANT



information submitted through

supporting statements.

WHICH ANNEX TO USE

Award Level	Writer	Form
B, A, A+	Nominee Consultant	Annex G CV Form
B, A, A+	NHS Employer The Medical Director or Clinical Director may be asked to complete the form but the Chair or Chief Executive MUST authorise.	Annex H Employer Citation
B and A	Royal Colleges, Faculties, Colleagues, Senior Award Holders, Specialist Societies Any consultant may be asked to complete a form on behalf of one of the aforementioned groups.	
	In the case of a professional organisation the President or nominated person MUST authorise the submission).	
B, A, A+	Distinction Award holding consultants. The SACDA Medical Director will write to consultants to ask them to complete assessments on consultants under 5 year review.	
B, A, A+	Distinction Award holding consultants. The SACDA Medical Director will write to consultants to ask them to complete assessments on consultants who have submitted Self Nominations.	Annex K Additional Assessor Citation
A+	Royal Colleges, Faculties, A+ Award Holders, Specialist Societies Anyone of the aforementioned may wish to write in support of a consultant who has submitted a Self nomination for an A+ award.	Annex I Supporting Statement

SCOTTISH ADVISORY COMMITTEE ON DISTINCTION AWARDS (SACDA)

GUIDANCE NOTES FOR COMPLETION OF CURRICULUM VITAE FORMS

IMPORTANT

- The Curriculum Vitae form is the only material submitted by the consultant and therefore serves as application, consultant profile and database. It has been carefully constructed with the aim of maximum fairness to all and SACDA attaches considerable significance to its presentation.
- YOU ARE THEREFORE STRONGLY ADVISED, IN YOUR INTERESTS, TO FOLLOW STRICTLY THESE INSTRUCTIONS AND THE RUBRIC DISPLAYED WITHIN THE SACDA ONLINE SYSTEM.
- Forms which depart significantly from the instructions and rubric will seriously impair the nomination's chances. They may be rejected by the Online system. It is the nominee's responsibility to ensure submission by the deadline. Submissions received post-deadline WILL NOT BE CONSIDERED IN ANY CIRCUMSTANCES.
- For all nominations and 5 yearly reviews. It is imperative that you inform the NHS Employer that holds your contract or honorary contract of employment to allow completion and submission of an Employer Citation form. SACDA has to work to a definite timetable if it is to determine its recommendations for A+, A and B awards before deciding which should be presented for consideration at the final meeting of SACDA in September 2009. No nomination will be considered by SACDA without an accompanying Employer Citation Form.

ADVICE ON COMPLETING THE FORM

- Consultants must complete a CV form when being nominated or self-nominating for an A+, A or B
 award, requesting a special review, notifying change of post or contract, transferring from another part
 of the UK outwith Scotland or when an award is subject to review.
- All forms must be submitted using the SACDA Online system at https://awards.sacda.scot.nhs.uk/index.php
- Completion of certain fields is mandatory
- A strict limit has been imposed on the number of characters that may be entered onto these forms. The font size has been fixed at 11 point. Each box on the form is limited to a fixed number of words per box. For the CV, Criteria 2-5 are limited to 350 words per box, and Criteria 1 and 6 and the Summary are limited to 400 words. You should also save the form as draft before you submit it and ensure that the form prints out on no more than 4 A4 pages.
- The forms will not be able to be saved if the number of words is greater than this. Please try to be as concise as possible.
- A separate Guide on how to use the system is available on the SACDA website (http://www.sacda.scot.nhs.uk) or by contacting the Secretariat.
- It is possible for you to type up your information in a Word document to refine your responses before copying and pasting into the Online forms. It is also possible to save the Online form in draft format before submitting to the SACDA Secretariat. (Advice: copy to "Notepad" first before copying and pasting into Online System to help retain formatting).
- No other material of any sort is acceptable use only this form available via the SACDA Online system at (https://awards.sacda.scot.nhs.uk/index.php) which is valid for this awards year (commencing 1 October 2008).

- The closing date for the receipt of CVs for the 2009 round is Midnight on 30 January 2009. It will not be possible to submit an application after this time under any circumstances.
- The 2009 CV form takes account of the new consultant contract; attention is drawn in particular to Criteria 1 and 6.
- Please remember that SACDA members review several hundred forms each year. It is therefore in your interest to make your CV as clear and easy to assimilate as possible. The CV is the principal source of factual information for SACDA. Long sentences and detailed descriptions are rarely as effective as short statements and bullet points. It is possible to be informative and comprehensive within the available space, though you may need to be selective as to what you include; Concentrate particularly on the preceding 5 years but more distant achievements, especially if of continuing significance, may be included.
- The use of headings, appropriate underlining and simple explanations is encouraged for ease of reading. Unless very well known (such as BMA) please do **not** use unexplained abbreviations it is irritating to read if unknown to the reviewer and may mean that the credit is not fully recognised.
- Dates of appointments, membership of committees and other activities must be included.
 References should indicate whether senior author, project lead, etc.
- It is most important to remember that, in addition to medical members, SACDA also has lay members who may not be familiar with medical terminology.
- SACDA always assess nominees according to the criteria in Annex A of the Guidelines: the CV should therefore address all these categories (though it is, of course, recognised that distinction in all 6 categories will be very rarely achieved.) Dates of all appointments, etc. should always be included.
- The Summary is very important since it is an opportunity to spell out simply (to reviewers without specialist knowledge) what you feel are your main contributions to the NHS and the significance thereof especially to direct patient care and to advancing the wider good of the health service. Some consultants, understandably, feel reticent about self-appraisal and 'blowing one's own trumpet' but it is important not to sell oneself short.

AUDIT

SACDA undertakes a detailed audit of a random sample of submitted CVs. SACDA may seek
additional information or confirmation of details from nominees where necessary. It reserves the right
to ask outside assessors for opinion and to check references, etc.

IN CONFIDENCE

SCOTTISH ADVISORY COMMITTEE ON **DISTINCTION AWARDS**

Curriculum Vitae 2009

EXAMPLE CV THE SACDA ONLINE SYSTEM MUST BE USED TO COMPLETE AND SUBMIT ALL FORMS

To be completed by consultants: - Please indicate by selecting the appropriate box below: -

Self Nomination		Other Nomination		5 Yearly Review		Special Review	
		11011111011	-		 		
PERSONAL DETAILS	3						
Name (in full)				Date of Birth		Age at 30/09/09	
GMC/GDC Registrati	on I	Number		Year First Graded as	Con	sultant	
Specialty				Date of Present App	ointm	ient	
Name of Appt.				Main Place of Work			
NHS Contract Held b	у (е	.g. NHS Board)		Please tick one or m Full time No. of EPAs		ppropriate boxes Part-time □ onorary □	
Award/Discretionary	Poi	nts Held		Year of Award/Most	recer	nt Discretionary Point	ts
Nature of University	con	tract (if applicable)				
PROFESSIONAL QU	ALII	FICATIONS Qual	ificatio	on and year			
CRITERION 1 PROFESSIONAL PROFILE							
Outline job plan (as in appraisal forms) to include sessions and EPAs indicating sessions given for specific purposes							
Evidence of Leadership							
Evidence of Team working							
 Evidence of supervision and support or responsibilities for colleagues 							
 Exceptional and noteworthy features of job plan 	n						

Name: Curriculum Vitae Form 2009 page 2

CRITERION 2 RESEAR	CH AND INNOVATION
A. RESEARCH ACTIVITY Ongoing research	
Recent achievements	
Current grants	
Recent grants	
 Special awards 	
 RAF outcomes 	
B. PUBLICATIONS	Number of PEER REVIEWED articles: whole career last five years
Up to four significant	
recent research	
papersFull bibliographic	
reference	
Other significant	
published research	
outcomes	
C. SIGNIFICANCE OF	
RESEARCH	
 Impact of research 	
on patient care	
 Impact of research 	
on wider NHS	
D. SCIENTIFIC	
REVIEW	
Peer review for	
journals Journal editorships	
Journal editorsnipsGrant evaluation	
• Grant Evaluation	
CRITERION 3 ADMINIS	TRATIVE, MANAGEMENT AND ADVISORY ACTIVITIES
A. LOCAL	
 Membership 	
 Chair 	
Secretary	
Special roles	
 Significance of activity & 	
outcomes	
B. NATIONAL	
 Advisory committees 	
 Scottish 	
Government	
UK Government	
Royal CollegesMRC	
MRCOutcomes of	
contributions	
made	

Name:	Curriculum Vitae Form 2009 Page 3
 C. INTERNATIONAL Societies and committees Invited lectureships Outcomes of contributions made 	
CRITERION 4 AUDIT, C	CLINICAL GOVERNANCE, PROMOTION OF EVIDENCE BASED MEDICINE
 Personal Audit Local and national contributions SIGN, QIS, etc. 	
CRITERION 5 TEACHIN	G AND TRAINING
 A. UNDERGRADUATE Teaching load Examining Course administration Curriculum planning Tutoring Mentoring 	
 B. POSTGRADUATE & PROFESSIONAL Royal Colleges SACs Local training Career support 	
C. EDUCATIONAL PUBLICATIONS • Books, with full bibliographic reference • Significance of books • Chapters • Significance of chapters	Number of books: whole career last five years

Name: Curriculum Vitae Form 2009 Page **CRITERION 6 IMPROVEMENTS IN SERVICE AND ACHIEVEMENT OF SERVICE GOALS** Service goals Addressing NHS priorities Innovation in service provision (other than applications of your original research) Service planning Exceptional or unusual commitments Exceptional or severe service pressures Relevant activities outwith mainstream medicine e.g. health promotion, patient support **SUMMARY & OVERALL PERSONAL APPRAISAL** Contributions over & above that expected for the post Intensity, significance & value of work Last 5 years Honours, prizes or other recognition N.B.400 WORDS MAXIMUM (words in excess will be deleted)



DATA PROTECTION

The information gathered from this form will be used by the Scottish Advisory Committee on Distinction Awards (SACDA), the SACDA Secretariat and the Scottish Government Health Directorates in the administration of the Awards Scheme. It may be necessary to check information provided by you or information provided about you by a third party. It will also be necessary to disclose information about you to a third party, including employers, colleges, other organisations and individual consultant assessors. Limited information relating to award holders is published in SACDA's annual report. The SACDA Secretariat, Scottish Health Service Centre, is part of NHS National Services Scotland (is the operating name of the Common Services Agency for the Scottish Health Service).

SCOTTISH ADVISORY COMMITTEE ON DISTINCTION AWARDS

GUIDANCE NOTES ON COMPLETION OF SACDA EMPLOYER CITATION FORM (Applicable for ALL nominations, 5-yearly and supplementary reviews)

IMPORTANT

- COMPLETION OF CVs AND CITATIONS IS OF HIGH IMPORTANCE AND SHOULD BE DONE WITH CARE AND ATTENTION TO THE GUIDANCE BELOW
- Completion of this Employer Citation Form by the employer is required in all cases where a consultant has been nominated or Self Nominated for an award (see 2). Consultants who have been nominated for an award will have been required to complete a SACDA Curriculum Vitae (CV) Form. Employers should ensure they have seen and considered the information set out by the consultant in the CV Form before completing this Employer Citation Form.
- It is expected that the Employer completing this form will have consulted with other employing authorities where the consultant is employed on two or more sites.
- All citation forms must be authorised on the SACDA Online system by the Chief Executive/Chairman on behalf of the employer. If the task of completing this citation form is delegated to another person, usually the Medical Director, the Chief Executive/Chairman should still authorise the citation form via the SACDA Online system.

ADVICE ON COMPLETION OF FORMS

- All forms must be submitted using the SACDA Online system at https://awards.sacda.scot.nhs.uk/index.php
- Completion of certain fields is mandatory
- A strict limit has been imposed on the number of characters that may be entered onto these forms. For the Employer Citation, the Overall Assessment is limited to 200 words and all other boxes are limited to 150 words. You should also save the form as draft before you submit it and ensure that the form prints out on no more than 2 A4 pages.
- The forms will not be able to be saved if the number of words is greater than this. Please try to be as concise as possible.
- A separate Guide on how to use the system is available on the SACDA website (http://www.sacda.scot.nhs.uk) or by contacting the Secretariat.
- It is possible for you to type up your information in a Word document to refine your responses before copying and pasting into the Online forms. It is also possible to save the Online form in draft format before submitting to the SACDA Secretariat. (Advice: copy to "Notepad" first before copying and pasting into Online System to help retain formatting).
- No other material of any sort is acceptable use only this form available via the SACDA Online system at (https://awards.sacda.scot.nhs.uk/index.php) which is valid for this awards year (commencing 1 October 2008).
- The closing date for the receipt of Employer Citations for the 2009 round is Midnight on 13 February 2009.
- Employers have the ability to view all relevant CV forms submitted on the SACDA Online system. Please refer to the separate User Guide available on the SACDA website (<u>http://www.sacda.scot.nhs.uk</u>) or by contacting the Secretariat.

- This form should be used when an employer wishes to <u>nominate</u> a consultant for an award and the nomination is ranked against the other nominations from the same NHS Board area. This form (Annex H) is also for employers to assist SACDA when a consultant has self-nominated or been nominated by another source (Senior Award-Holders, Royal Colleges, etc.) Employers should be assured that giving support to a consultant in answer to question 1 in Annex H does not disadvantage their own nominees.
- The published criteria for distinction awards are in Annex A to the Guide to the NHS Consultants' Distinction Awards Scheme. Employers completing this Employer Citation Form should have regard for these.
- Taking this information into account, employers should set out, succinctly, their views on the consultant's case for an award. To the extent this is not set out in the responses to Q1-6 inclusive, this should be referred to under question 7, 'Summary of Views'. SACDA finds these comments particularly helpful. They need not necessarily comment upon specialist work outwith the Authority; nevertheless, they are encouraged to draw attention to such work where it has implications for the Authority, for the wider NHS or for medicine internationally.
- The Citation Form should not simply reproduce information that has already been provided in the CV Form, but may highlight important aspects of it.
- Full participation by the consultant in annual appraisal would normally be regarded by SACDA as sine qua non for granting/renewing an award. Employers are asked to confirm this (where appraisal has taken place) and confirm accuracy of the job plan as stated in the CV Criterion 1.
- It is emphasised that awards are made only for performance over and above that normally expected in the post. In the case of teaching hospital consultants it will be expected that in general the teaching and academic activities will be strong. Those working in primarily academic posts (honorary consultant contract holders) will be expected to be making a substantial contribution to research and development, as well as playing their part in supporting the work of the NHS employer. In the case of consultants working in other hospitals or in some other circumstances the situation may be almost the reverse, in many cases, with the criterion relating to the achievement of service goals being of particular importance. This may be combined with some work towards development and improvement of their own field locally and more widely and often with defined work in management and perhaps teaching.
- As consultants progress through their career they will tend to be involved in more important local management activities which will receive recognition provided that they are indeed over and above that which would normally be expected of such a consultant. Their research contribution may diminish as other leadership activities take more time.
- SACDA has a responsibility to take into account any matters of a disciplinary kind and also any current health issues that are likely to affect the consultant's professional work. It is essential that the facts relating to such matters are referred to, and a view expressed as to the relevance or otherwise of these to the granting of an award, to assist SACDA in considering information reported to them from other sources. Any such matters or significant developments that arise between the submission of the citation and the SACDA final meeting should be drawn to the attention of the SACDA Chairman or Medical Director.
- Employers may be asked to provide a completed Employer Citation Form to support a nomination by more than one organisation or individual during a particular awards round. The SACDA Online system will only allow the employer to submit one employer citation per individual.

EXAMPLE FORM

Page 1 of 2

NO

YES

SACDA NHS EMPLOYER CITATION FORM (2009 Awards Round)

NAI	NAME OF CONSULTANT						Specialty					
F	Employing Authority that holds the contract as a consultant or honorary consultant							2009 awards round (Indicate below as appropriate)				\dashv
								New Awa	ırd 🗆	5-Yea	arly Review	可
								В□	A		A+ 🗆	
from task mus	Where a consultant holds a contract with more than one employer a separate citation form should be submitted from each employer. It should not be solely or mainly a summary of the consultant's curriculum vitae. If the task of completing this citation form is delegated to another person, the Chief Executive or Chairman must authorise the citation form.								lf the rman			
The relationship between a consultant's achievement and the local and national requirements of NHS Scotland are an important factor in SACDA's considerations. Please ensure that your citation gives realistic relevant advice.												
			NCE	_ (Pleas	se select t			riate boxes	•			
1.		AWARDS u support	the gı	ranting c	of an award	?	Do yo	YEARLY RI ou support t ward?		uation o	of	
	YES		N	o 🗆		,	YES		NO			
	If 'no'	please ela	borat	e at que	stion 7.		lf 'no	' please ela	borate at	questior	n 7.	
2.								V includin e compon				
	YES		NO			lf 'no'	plea	se elabora	te.			
3.		ne statem			vations an	nd ach	ievei	ment of se	rvice goa	ıls as oı	utlined in th	е
	YES		NO			lf 'no'	plea	se elabora	te.			
4.		as you are ements?	e awa	re does	the CV reas	sonabl	y refl	ect this con	sultant's	local/na	tional	
	YES		NO			If 'no'	plea	se elabora	te.			

Has full participation in appraisal taken place within the last year? (if applicable)

5.

6.	shows distinction. Please ensure that the boxes you have ticked are consistent with the text of your assessment in question 7 below.					
	Domain 1 — Professional Excellence □ Domain 2 — Research □					
	Domain 3 — Administration, Management and Advisory □ Domain 4 — Contribution to Clinical Governance □					
	Domain 5 — Teaching and Training □ Domain 6 — Achievement of Service Goals □					
7.	Please provide a brief evaluation of the achievements of the consultant that in your view are					
	relevant to the case for a Distinction Award. It is most helpful if your evaluation leads to a statement of the strength of your support or otherwise. Within the domains themselves, you may wish to refer to the following as they apply locally or nationally: • Service development/redesign to the benefit of patients					
	 Leadership and teamwork Outcomes of contributions in the context of benefit to patients and NHS priorities. 					
8.	So far as you are aware, do any of the following apply to the consultant whose citation you are					
	signing? (See para. 9 in Notes)					
	a. Criminal Convictions or serious disciplinary issues YES NO					
	c. Health issues likely to adversely affect his/her professional work YES NO NO NO NO NO NO NO N					

DATA PROTECTION Compation dathered

The information gathered from this form will be used by the Scottish Advisory Committee on Distinction Awards (SACDA), the SACDA Secretariat and the Scottish Executive Health Department in the administration of the Awards Scheme. It may be necessary to check information provided by you or information provided about you by a third party. It may also be necessary to disclose information about you to a third party, including employers, colleges, other organisations and individual consultant assessors. Limited information relating to award holders is published in SACDA's annual report. The SACDA Secretariat, Scottish Health Service Centre, is part of NHS National Services Scotland (is the operating name of the Common Services Agency for the Scottish Health Service).

SCOTTISH ADVISORY COMMITTEE ON DISTINCTION AWARDS

GUIDANCE NOTES FOR COMPLETION OF SACDA NOMINATION CITATION FORM

B AND A AWARDS ONLY

ADVICE ON COMPLETION OF FORMS

- All forms must be submitted using the SACDA Online system at https://awards.sacda.scot.nhs.uk/index.php
- Completion of certain fields is mandatory
- A strict limit has been imposed on the number of characters that may be entered onto these forms. For the Nomination Citation the Overall Assessment is limited to 200 words and all other boxes are limited to 150 words. You should also save the form as draft before you submit it and ensure that the form prints out on no more than 2 A4 pages.
- The forms will not be able to be saved if the number of words is greater than this. Please try to be as concise as possible.
- A separate Guide on how to use the system is available on the SACDA website (http://www.sacda.scot.nhs.uk) or by contacting the Secretariat.
- It is possible for you to type up your information in a Word document to refine your responses before copying and pasting into the Online forms. It is also possible to save the Online form in draft format before submitting to the SACDA Secretariat. (Advice: copy to "Notepad" first before copying and pasting into Online System to help retain formatting).
- No other material of any sort is acceptable use only this form available via the SACDA Online system at (https://awards.sacda.scot.nhs.uk/index.php) which is valid for this awards year (commencing 1 October 2008).
- The closing date for the receipt of Nomination Citations for the 2009 round is Midnight on 30 January 2009. It will not be possible to submit a nomination after this time under any circumstances.
- Completion of this Nomination Citation Form is required in all cases where a consultant has been nominated for a B or A award from any source of nomination excluding Self Nomination and nominations by NHS Employers. Consultants who have been nominated for an award will have been required to complete a SACDA Curriculum Vitae (CV) Form and the nominator should ensure they have seen and considered the CV completed by the consultant before completion of this Nomination Citation. Where a nomination is from an NHS Employing Authority this form should not be used. Completion of an Employer Citation (Annex H) would be essential.
- The published criteria for distinction awards are in Annex A to the Guide to the NHS Consultants' Distinction Awards Scheme. Nominators completing this Nomination Citation Form should note these criteria carefully.
- The Citation Form should not simply reproduce information that has already been provided in the CV Form, but may highlight important aspects of it.
- In all of the recognised categories of distinction, it is emphasised that awards are made only for work over and above that normally expected in the post. In the case of teaching hospital consultants it will therefore be expected that in general the teaching and academic activities will be strong. Leadership in the specialty outside the local region will however be looked for. Those working in primarily

academic posts (honorary consultant contract holders) will be expected to be making a substantial contribution to research and development, and usually to be playing their part in supporting the work of the NHS employer in which they are based. In the case of consultants working in other hospitals or for other types of employers the situation may be almost the reverse, in many cases, with the criterion relating to the achievement of service goals being of particular importance perhaps combined with some work towards development and improvement of their own field locally and more widely and often with defined work in management and perhaps teaching. It is accepted that as consultants progress through their career they will tend to be involved in more important local and national advisory and management activities which will receive recognition provided that they are indeed over and above that which would normally be expected of such a consultant. Similarly, as consultants come towards the age limit for distinction awards their research contribution may diminish as other leadership activities take more time.

- All citation forms must be submitted and authorised by the person completing the form. For nominations from Royal Colleges etc., if the task of completing this citation form is undertaken by a person other than the Head of a Nominating organisation, the Head of the Nominating organisation (for example the President of a Royal College, Dean of the Faculty, etc.) is required to authorise the citation form via the SACDA Online System.
- SACDA has a responsibility to take into account any matters of a disciplinary kind and also any current health issues that are likely to affect the consultant's professional work. It is essential that the facts relating to such matters are referred to, and a view expressed as to the relevance or otherwise of these to the granting of an award, to assist SACDA in considering information reported to them from other sources. Any such matters or significant developments that arise between the submission of the citation and the SACDA final meeting should be drawn to the attention of the SACDA Chairman or Medical Director.

EXAMPLE FORM

SACDA NOMINATION CITATION FORM (2009 Awards Round)

Page 1 of 2

NAME OF CONSUL	1 . , ,	Authority that holds the a consultant or honorary	Specialty
SOURCE OF CITAT	FION Nomination B	or A award (specify the level):	Priority rank order
Employing Authoric consultant for an award citation is on behalf of the President of that IN STRICT CONFIDE 1. As far as you a achievements.	ty and if it is a Self and. It should not be ma of a Royal College, Fac organisation. ENCE (Please select tare aware does the CV?	Nomination . The citation shou inly or solely a summary of the coulty of other professional body, the	a nomination is from an NHS Id describe the strengths of the consultant's curriculum vitae. If this he citation must be authorised by tant's local/national
2. Where you are distinction:	e able please indicate i	n which of the following domai	ns the consultant shows
Domain 2 — R Domain 3 — A Domain 4 — C Domain 5 — T	rofessional Excellence esearch dministration, Manage ontribution to Clinical eaching and Training chievement of Service	ement and Advisory	
3. Does the conspost?	sultant add value to the	local team in excess of that no	ormally expected for the
YES 🗆 I	NO 🗆	If "Yes" please specify h	now:
4. Does the conspost?	sultant add value to the	wider NHS in excess of that no	ormally expected for the
YES 🗆 I	NO 🗆	If "Yes" please specify h	now:
			Continued/

5.	Page 2 of 2 Has the consultant been responsible for any recent service development/led service re-design initiatives for the benefit of patients and/or the wider NHS?			
	YES □ NO □ If "Yes" plea	ase provide	details:	
6.	So far as you are aware, do any of the following apply to the consulta signing? (See para. 6 to Notes)	ant whose c	itation you	ı are
	a. Criminal Convictions or serious disciplinary issuesb. Proceedings or determinations regarding professional competence.c. Health issues likely to adversely affect his/her professional work	YES YES YES	□ N	000
7.	OVERALL ASSESSMENT			

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Name of consultant

Specialty

EXAMPLE FORM

SACDA FIVE-YEARLY REVIEW ASSESSOR CITATION FORM (2009 AWARDS ROUND)

Employing Authority that holds the

		consultant			
*INT	rce of Citation ERNAL/EXTERNAL ete as appropriate	Award to be reviewed (B,	A or A+ award)		n award is being d. (Please tick one] NO
the cons	reasons why the awa sultant's curriculum vita		should not be main		
1.		(Please select the appropriate are does the CV reasonably		Itant's local	/national
	YES □ NO □	lf 'ı	no', please elabor	ate.	
2.	Where you are able	olease indicate the domains	in which the core	ultant char	e distinction:
۷.	Please elaborate at		in which the cons	ouitaiit SNOW	zə นเอนเเนินไปไไ:
	Domain 1 — Profess Domain 2 — Researc	ch		_	
	Domain 4 — Contrib	stration, Management and Adution to Clinical Governance	e	_ 	
		ement of Service Goals]] 	
3.		T BE COMPLETED BEFORE his section, please read para			TARIAT
	So far as you are aw signing?	are, do any of the following a	apply to the consi	ultant whose	e citation you are
	Proceedings or deterr	or serious disciplinary issues ninations regarding profession adversely affect his/her profes	al competence YE	ES 🗆	NO NO NO

4.		Page 2 of 2
	Summary and any Additional Information	_
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EXAMPLE FORM

ADDITIONAL ASSESSOR CITATION FORM (2009 AWARDS ROUND)

Name of consultant		Employing Authority that holds the contract as a consultant or honorary consultant	Specialty					
Sou	rce of Citation	Nominated for (Specify Level of award B or A)	Granting of an award is being recommended. (Please tick one box) YES NO					
This	form must be used wh	nen assessing a consultant. The citation sho	ould describe the reasons why the					
	award should be granted. It should not be mainly or solely a summary of the consultant's curriculum vitae.							
IN STRICT CONFIDENCE (Please select the appropriate boxes) 1. As far as you are aware does the CV reasonably reflect this consultant's local/national								
achievements? (300 WORDS LIMIT)								
	YES □ NO □	If 'no', please elab	orate.					
2.	Where you are able p Please elaborate at S	lease indicate the domains in which the corection 4.	nsultant shows distinction:					
	Domain 1 — Profession	onal Excellence						
	Domain 2 — Research							
		tration, Management and Advisory tion to Clinical Governance						
	Domain 5 — Teaching	g and Training						
	Domain 6 — Achiever	ment of Service Goals						
3.	3. THIS SECTION MUST BE COMPLETED BEFORE RETURNING TO THE SECRETARIAT (Before completing this section, please read paragraph 9 of Annex H).							
	So far as you are awa signing?	re, do any of the following apply to the con	sultant whose citation you are					
	Criminal Convictions		YES NO					
		inations regarding professional competence						
	nealth issues likely to a	adversely affect his/her professional work	YES NO					

4.			Page 2 of 2
	Summary and any Additional Information	(500 WORDS LIMIT)	

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Consultant's Name:

SUPPORTING STATEMENT FOR A+ SELF NOMINATIONS (2009 AWARDS ROUND)

Nominated Award Level:

Specialty: Consultant's NHS		mpio	yer:		
Source of Citation (e.g. Royal College/Professional Society/Colleague):					
reas curr	form is to be used to support individuals that submit Self Nomination ons why the award should be granted. It should not be mainly or sculum vitae.				
1.	TRICT CONFIDENCE (Please select the appropriate boxes) As far as you are aware does the CV reasonably reflect this cor	ngultai	nt's loc	al/natio	nal
'	achievements? (300 WORDS LIMIT)	isuitai	111 3 100	airriatio	iidi
	YES □ NO □ Unable to Comment/Don't Know If 'no', please elaborate.				
2.	Where you are able please indicate the domains in which the co Please elaborate at Section 4.	onsult	ant sho	ows dist	tinction:
	Domain 1 — Professional Excellence Domain 2 — Research				
	Domain 3 — Administration, Management and Advisory				
	Domain 4 — Contribution to Clinical Governance				
	Domain 5 — Teaching and Training Domain 6 — Achievement of Service Goals				
3.	THIS SECTION MUST BE COMPLETED (Before completing this section, please read paragraph 9 of An	nex H).		
	So far as you are aware, do any of the following apply to the co signing?	nsulta	ant who	se citat	ion you are
	Criminal Convictions Proceedings or determinations regarding professional competence Health issues likely to adversely affect his/her professional work	YES YES YES		NO [NO []

	de to the Distriction Awards Scheme Annex W				
4.	Page 2 of 2				
	Indicators of newformance demonstrating distinction, places also highlight leaders by a distinction of particular and a second s				
	Indicators of performance demonstrating distinction - please also highlight leadership and				
	national/international clinical excellence.				
	(COO MODDO LIMIT)				
	(500 WORDS LIMIT)				
	Summary				

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SACDA ADVISERS AS AT 1 OCTOBER 2008

SACDA Advisers

The Advisers are senior award-holders appointed on a 3-yearly basis by the Chairman of SACDA. In summary, their remit is to help the committee to perform its tasks and the 13 Advisers are based accordingly, as follows:

Dr Frank G Dunn (Senior Adviser), Consultant Cardiologist, Department of Cardiology, Stobhill Hospital, Balornock Road, GLASGOW G21 3UW

Professor James Garden (Senior Adviser), Regius Professor of Clinical Surgery, Royal Infirmary of Edinburgh 51 Little France Crescent, EDINBURGH EH16 4SA

Dr Brenda Gibson, Consultant Haematologist, Royal Hospital for Sick Children, Yorkhill, GLASGOW G3 8SJ

Dr Christopher Isles, Consultant Physician, Dumfries and Galloway Royal Infirmary, Bankend Road, Dumfries, DG1 4AP

Professor David A Levison (Senior Adviser), Professor of Pathology, Department of Pathology, Ninewells Hospital & Medical School, DUNDEE DD1 9SY

Professor Christopher Ludlam, Professor of Haematology and Coagulation Medicine, Royal Infirmary of Edinburgh 51 Little France Crescent, EDINBURGH EH16 4SA

Dr Una M MacFadyen, Consultant Paediatrician, Stirling Royal Infirmary, Livilands, Stirling, FK8 2AU

Dr Tahir A Mahmood, Consultant Obstetrician & Gynaecologist, Forth Park Hospital, Bennochy Road, Kirkcaldy, Fife, KY2 5RA

Dr Robert G Masterton, Executive Medical Director, NHS Ayrshire & Arran, Eglinton House, Ailsa Hospital, Ayr, KA6 6AB

Mr Alan J McKay, Consultant General & Vascular Surgeon, Gartnavel General Hospital, 1053 Great Western Road GLASGOW G12 0YN

Mr William S McKerrow (Senior Adviser), Consultant Otolaryngologist, Department of ENT/Head and Neck Surgery, Raigmore Hospital Old Perth Road, Inverness IV2 3UJ

Professor David Owens, Professor of Clinical Psychiatry, Kennedy Tower, Royal Edinburgh Hospital, Morningside Park, EDINBURGH EH10 5HF

Professor Anthony Pelosi (Senior Adviser), Consultant Psychiatrist, Adult Mental Health Services, Hairmyres Hospital, Eaglesham Road, East Kilbride G75 8RG

Professor Alan Struthers, Consultant Physician, Ninewells Hospital & Medical School, DUNDEE DD1 9SY

Dr John Webster, Consultant Physician, Aberdeen Royal Infirmary, Foresterhill, Aberdeen AB25 2ZN

Professor George Youngson, Professor of Paediatric Surgery, Royal Aberdeen Children's Hospital, Westburn Road Aberdeen AB25 2ZG