Scottish Advisory Committee on Distinction Awards

GUIDE TO THE SCHEME

2015

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

The SACDA Online system is available at:
https://awards.scclea.scot.nhs.uk/

DEADLINE FOR SUBMISSION OF FIVE-YEARLY REVIEW CV FORMS:
FRIDAY, 20 MARCH 2015
Data Protection Statement

The information gathered from SACDA forms will be used by the Scottish Advisory Committee on Distinction Awards (SACDA), the SACDA secretariat, Scottish NHS boards and the Scottish Government Health and Social Care Directorates, in the administration of the awards scheme. Information provided by or about applicants in relation to submissions may require to be verified. It may also be necessary to disclose such information to a third party, including employers and individual consultant assessors, where applicable in the process.

For further information on how your information is handled please refer to the full Privacy section on the SCCLEA website.
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SECTION 1: INTRODUCTION

1.1 The remit of the Scottish Advisory Committee on Distinction Awards (SACDA)

1.1.1 Distinction awards recognise and reward NHS consultants who perform ‘over and above’ the standard expected of their role. Awards are given for quality and excellence, acknowledging exceptional personal contributions over a range of domains.

1.1.2 The Scottish Advisory Committee on Distinction Awards is a non-departmental public body and acts on behalf of Scottish Ministers in taking decisions on which NHS consultants will receive awards each year. SACDA also reviews the retention of awards on a five-yearly basis. This is done using a system based on peer review, employer and lay input and the evidence submitted by consultants in their CV form.

1.1.3 At the time of publication, the awards scheme in Scotland remains suspended on instruction from the Cabinet Secretary for Health and Wellbeing following the UK-wide review of awards schemes. However SACDA will continue with its responsibility for five-yearly and supplementary reviews of existing awards. Separate guidance will be published on any new scheme that may be implemented.

1.1.4 The secretariat to the committee administers all awards processes.

1.2 What does the scheme reward?

1.2.1 The essential points that assist SACDA’s decision-making 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
- achievement in each domain is measured within the parameters of the individual’s employment and job plan
- distinction is not restricted to, for example, academic or research contributions but recognises the consultant’s total contribution to patient services, teaching, management and service development
- a record of achievement in every domain is not expected, but success in only one of these areas will not normally be sufficient
- a particularly high standard is required for the small number of those who hold awards at A and A+ level
1.3 **Levels of award**

1.3.1 There are currently three levels of distinction award (from lowest to highest): B, A, and A+

1.3.2 Awards are paid with salaries, are pensionable and subsume the value of any discretionary points or lower level distinction award previously held.

1.3.3 The current value of each award can be found on the [SACDA website](#).

1.4 **SACDA membership**

1.4.1 SACDA has 14 members, including the Chairman and Medical Director/Vice-Chairman. All members are appointed by the Cabinet Secretary for Health and Wellbeing in accordance with the Commissioner for Public Appointments in Scotland (OCPAS) Code of Practice. Membership includes:

- applicants sought from the Academy of Medical Royal Colleges and Faculties in Scotland
- applicants sought from the Scottish Consultants Committee representing the general body of consultants in Scotland
- two members from NHS employers
- two lay members
- The Chief Medical Officer for Scotland (*ex-officio member*)
- The Chief Executive of NHS Scotland (*ex-officio member*)

1.4.2 Members of SACDA are appointed as individuals, not as representatives of any specialty or employer.

1.4.3 Details of individuals appointed to serve on the committee can be found on the [SACDA website](#) and are published in the SACDA Annual Report.

1.5 **SACDA Advisers**

1.5.1 SACDA Advisers are senior award holders from a range of specialties and regions who are appointed by the Chairman, following consultation with the Medical Director, but remain independent of the committee.

1.5.2 SACDA Advisers give general advice to the consultant community regarding the awards scheme.

1.5.3 A full list of SACDA Advisers is available on the [SACDA website](#).
SECTION 2: PROVISION OF INFORMATION TO SACDA

2.1 The nominal roll

2.1.1 The names of all consultants who hold contracts with NHS Scotland are listed in the nominal roll. All information listed, apart from award level, is maintained by NHS employers through the SWISS database, from which SACDA extracts information on consultants.

2.1.2 In the case of clinical academic staff, the accuracy of the nominal roll is dependent upon universities providing information to NHS employers. The integrity of the scheme is dependent upon timely notification of this information from both universities and NHS employers.

2.1.3 The nominal roll is available on the SACDA website.

2.2 Notification of changes in circumstances

2.2.1 Changes in circumstances may affect payment of, or eligibility for, distinction awards. It is the responsibility of both the award holder and their NHS employer to inform SACDA of any relevant changes.

2.2.2 • Change in nature of contract

Where an award holder changes substantially the nature of the contract held with the NHS board, or the number of sessions undertaken, continuation of the award will be subject to review by SACDA.

2.2.3 • Change in specialty

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

2.2.4 • Unpaid leave

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, reinstatement of the award will be subject to review by SACDA.
2.2.5 • Secondments

If an award holder is seconded full-time to a post with a non-NHS employer, they will not be eligible to hold an award. As such, the award will be regarded by SACDA as suspended for the period of their secondment. When the consultant or academic GP returns to their normal NHS or academic post, reinstatement of the award will be subject to review by SACDA.

If such an individual returns to clinical work after a period in a full-time general management position, other than Medical Director, reinstatement of the award will be subject to review by SACDA.

2.2.6 • Prolonged absence from the NHS

If an award holder is absent from NHS service and does not practice within their specialty for more than one year, SACDA will review the award in the light of the circumstances of each case.

Notification from NHS employers of such absence is essential.

2.3 Retirement of award holders

2.3.1 Awards cease on retirement and are consolidated into pension. If a consultant who had previously held an award is re-employed following their retirement, they will not be eligible to receive their award payment.

2.3.2 For clinical academic award holders who are part of the Universities Superannuation Scheme and are therefore eligible for partial retirement, their award may continue pro-rata after retirement in line with the amount of work they continue to do. For example, an award holder who reduces their job plan to 60% of their previous commitments while drawing 40% of their pension will receive 60% of their award, subject to approval of their new job plan by SACDA.

2.3.3 NHS Consultants

2005 Pension Scheme
Consultants, who are re-employed on a part-time basis following their retirement having accessed their full pension, will not be entitled to continue to receive their award payment. As they have accessed their whole pension at the time of their retirement any previous award will be consolidated into their pension.

2008 Pension Scheme
Consultants, who are re-employed on a part-time basis following their retirement and who have opted to access part of their pension, may continue to receive their award pro-rata after retirement in line with the amount of work they continue to do. The revised job plan will be subject to approval by SACDA before a decision regarding the pro-rata award is agreed.
2.4 **Award holder vacancies**

2.4.1 The SACDA secretariat will contact NHS boards each year to request that they submit, in writing, notification of all distinction award holding consultants and academic GPs who will have terminated their contracts or become ineligible to hold an award by the end of the awards round.

2.4.2 It is important that, where appropriate, NHS boards liaise with universities regarding vacancies from honorary consultants and academic GPs.

2.4.3 This verification exercise is in addition to the normal HR procedures for recording retirements, transfers, resignations etc. within the SWISS database. Accurate and timely reporting to SACDA is of the utmost importance.

2.4.4 Employers are requested to consider the rules above relating to the retirement of consultants when completing vacancy returns for SACDA.

2.5 **Disciplinary Matters**

2.5.1 If an award holder is subject to any investigation regarding professional or personal misconduct, or professional incompetence, the SACDA Chairman and Medical Director must be notified by the award holder’s NHS employer. This could either be through an Employer Citation form (if the consultant is under review in the awards round) or by writing in confidence to the SACDA Medical Director.

2.5.2 SACDA must be notified in any instance where receipt or continuation of an award may undermine confidence in the awards system. This would most likely result from:

- disciplinary action by the employer
- GMC or GDC findings
- Fatal Accident Inquiries
- criminal conviction

2.6 **Transfer of awards between schemes**

2.6.1 When an award holding consultant or academic GP changes employment and transfers between the awards scheme in Scotland and the equivalent scheme in England and Wales, or Northern Ireland, continuation of their award will be subject to the provisions below.

2.6.2 If an NHS board in Scotland appoints a consultant or academic GP who already holds the equivalent of a distinction award from a scheme in a different part of the United Kingdom, they must contact SACDA to arrange for the transfer of the award.
2.6.3 SACDA requires submission of a CV form to ensure that the new post and job plan of the award holder are commensurate with the level of award held.

2.6.4 Formal approval of the transfer of the award will be subject to review by SACDA.

2.6.5 As the award levels and values in the different schemes are not the same, each award transfer will be dealt with on a case by case basis, following the principles below:

- The new award level held will be that closest in financial value to the previous award held
- Although listed as an award level within the new scheme, the value paid will continue at the level of the award held in the previous scheme (including annual increases, as appropriate)
- This will be the case until a new level of award is granted in Scotland, at which time the award held and value paid will follow the standard procedures
SECTION 3: REVIEW OF AWARDS

3.1 Five-yearly reviews

3.1.1 All distinction awards granted from the 1989 awards round onwards are subject to five-yearly review by SACDA. The review process is undertaken to ensure that each award holder continues to meet the level of achievement appropriate for their award.

3.1.2 Reviews are undertaken in the fourth year of receipt or renewal, 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 granted, or last reviewed.

3.1.3 Award holders 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 are not subject to review.
   - If an award holder notifies SACDA of their intention to retire and does not have their award reviewed, but subsequently extends their employment, they must inform SACDA immediately.

3.1.4 Although reviews are carried out routinely at five-yearly intervals, SACDA reserves the right to review, at any time, any case where they have a reservation as to whether the criteria continue to be satisfactorily met or where there is evidence of disciplinary action by an NHS employer, the GMC or GDC, or criminal conviction.

3.2 The five-yearly review process

3.2.1 The SACDA secretariat will notify each award holder when their award is due to be reviewed.

3.2.2 The award holder must complete and submit a CV form via the SACDA Online system by midnight on the day of deadline.

3.2.3 The following points should be noted:
   - The CV must fully and fairly reflect the work undertaken and the wider contributions to the NHS
   - Emphasis within the CV should be on activity within the five years prior to the review, although information on earlier activities can also be included to show how contributions have evolved
- SACDA recognise that job plans and activities may have changed since the award was granted or last reviewed, but assess the CV to ensure that contributions are continuing at the appropriate level.

- SACDA has a responsibility to take into account any past or current matters of a disciplinary nature, court decisions, or adverse conduct or performance decisions of the GMC or GDC. Award holders are urged to be open in such matters.

- The case for continuing an award will be significantly undermined if important data or detailed information, such as dates, are omitted from the form.

3.2.4 In cases where the evidence supplied is unclear, the SACDA Chair and Medical Director may request that a revised CV is submitted.

3.2.5 The NHS employer of the award holder must submit an Employer Citation form to provide their assessment of the case for the renewal of the award. Employer Citations must be submitted via the SACDA Online system by midnight on the day of deadline. Employers should be aware that the award holder under review will be able to view any citation written about them.

3.2.6 Two or more Assessor Citation forms will be sought from other award holders in the same, or a related, specialty. Assessors are selected by the SACDA Medical Director and will have access to the submitted CV form.

3.2.7 The names of award holders under five-yearly review will be published on the SACDA website. Anyone who feels they have relevant information regarding these award holders is invited to contact the SACDA Medical Director in confidence, via the secretariat.

3.2.8 When the paperwork is complete, SACDA review and score the information provided according to the standard Scoring System. This provides a basis for discussion to ensure that award holders are maintaining the high level of achievement for which the award was granted.

3.2.9 SACDA reserves the right to seek further information if they feel it is necessary in order to make a decision regarding the renewal of an award.

3.3 Acting as an assessor

3.3.1 If an award holder is selected by the SACDA Medical Director to act as an assessor for a five-yearly review they will be contacted by the secretariat and have approximately four weeks to review the submitted CV and submit an Assessor Citation via the SACDA Online system.
3.3.2 Close attention should be paid to the criteria for awards, evidence of which should be exhibited in the CV form, while bearing in mind that few, if any, award holders are expected to show outstanding contributions in every domain.

3.3.3 Adverse comment is also helpful in ensuring the credibility of the scheme is maintained, but such comments must be objective and open to justification. Assessors should be aware that the award holder under review will be able to view any citation written about them.

3.4 Successful five-yearly review outcomes

3.4.1 When SACDA is satisfied that an award should be renewed, the award holder will be notified via the SACDA Online system that their award has been continued subject to future five-yearly review.

3.4.2 The secretariat will also notify the NHS employer of the award holder that the award has been continued.

3.4.3 Award holders should be aware that if their award is successfully reviewed and continued, the summary section of their CV form may be made available on the SACDA website.

3.4.4 This information may be published in the interest of transparency, and to demonstrate to anyone with an interest in the scheme the extremely high standard of achievements for which awards are granted and renewed.

3.5 Supplementary review

3.5.1 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 new documentation.

3.6 Effect of downgrading or withdrawal of an award under the Five Yearly or Supplementary Review process

3.6.1 If a preliminary decision is taken by SACDA to withdraw or downgrade an award, the award holder will be advised of the preliminary decision and the reasons for it, by the SACDA Chair. A copy of all documentation received for the review will also be sent.

3.6.2 The award holder then has the opportunity to put their case in writing to SACDA for discussion, before a final decision is made by the committee as to whether the award will be continued, downgraded or withdrawn.

3.6.3 If SACDA takes such a decision, the award holder’s NHS employer will also be informed of the preliminary decision and subsequent outcome.
3.6.4 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 “mark-time” 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.

3.6.5 Consultants will be issued a warning if they have not submitted their CV by the deadline. If they do not submit their CV by a revised date then payment of the award will cease on the fifth anniversary of their award and they will revert back to the value of any previously held discretionary points.

3.6.6 If an award is downgraded, SACDA will recommend a more appropriate award level on a case by case basis.
SECTION 4: THE CRITERIA FOR AWARDS: WHAT SACDA LOOKS FOR

4.1 The SACDA domains

4.1.1 The six SACDA domains are:

- Scope and level of professional contribution to the NHS
- Audit, clinical governance, and promotion of evidence based medicine
- Administrative, management and advisory activities
- Research and innovation
- Teaching and training
- Improvement in service and achievement of service goals

4.1.2 All SACDA forms have been structured to allow clear demonstration of achievement in each of these domains.

4.2 Scope and level of professional contribution to the NHS

4.2.1 Achievement in this domain has four required elements, including an outline job plan (as in appraisal forms) to include sessions and EPAs, indicating sessions given for specific purposes, plus:

- Sustained highest standards of clinical care – essential for all with clinical commitments
- Achievement matched to the opportunities available
- Leadership, including support for junior medical staff and other colleagues
- Peer recognition of outstanding overall performance

4.2.2 Demonstration of achievement may include:

- Chairmanship of important committees (less so when these arise in rotation, as may occur, for example, with “head of service”)
- Substantial contribution to Royal College, faculties and national associations, especially presidency or chairmanship
4.2.3 Please remember: clear description of a consultant’s job plan will allow SACDA members to better assess their achievements.

4.3 Audit, clinical governance and promotion of evidence based medicine

4.3.1 Achievement in this domain requires:

- Evidence of promotion and leadership of audit, clinical governance and evidence based medicine

4.3.2 Demonstration of achievement in this domain may include:

- Introducing and developing local guidelines and standards, and in locally applying nationally derived standards
- Personal audit and monitoring of patient management and service delivery
- Significant contributions to NHS QIS including SIGN groups, Audit Scotland, etc., particularly if invited to act as Chair or Secretary of a group
- Royal College or faculty activity at a national level to promote and maintain standards, clinical guidelines and validation / appraisal schemes

4.4 Administrative, management and advisory activities

4.4.1 Achievement in this domain requires:

- Evidence of successful recent (in the past five years) and ongoing administrative work locally, nationally and / or internationally
- This evidence should demonstrate the significance of activities and contributions, as well as their outcomes
4.4.2 Demonstration of achievement in this domain may include:

- **Locally**: Chair, Secretary, other special roles (these are more significant than simple membership)

- **Nationally**: Advisory Committees, Scottish Government, UK Government, Royal Colleges, Medical Research Council and other nationally funded bodies, QIS, Scottish Medicines Consortium etc

- **Internationally**: Societies and committees

The significance and outcomes of such activity should be made clear. This may include:

- Planning and delivering local or national services

- Successful management skills in innovation and service development, and in relation to hard pressed services

4.5 Research and innovation

4.5.1 Achievement in this domain will be substantially different for different types of post.

4.5.2 For a clinical academic consultant, demonstration of achievement in this domain may include:

- Recent and current grants awarded by the Medical Research Council, especially programme grants, and from the Wellcome Trust are particularly prestigious

Research Assessment Exercise results reflect the department overall, and would be especially relevant if the applicant is a senior figure within, or Head of, the department

4.5.3 For an NHS consultant, demonstration of achievement in this domain may include:

- Evidence of results applicable to clinical care

- Publication in high quality, peer reviewed journals

- Contribution to nationally recognised multi-centre trials and studies
• Development of innovative models of patient care and service delivery, which are especially meritorious if they can be applied across the NHS.

4.5.4 For any consultant or academic GP:

• Refereeing for grant applications, journals and books merits recognition

• Invited lectures are a sign of national and international recognition (of particular importance for A and A+ awards)

• Clear explanation of the impact of research on patient care and the wider NHS is crucial

4.6 Teaching and training

4.6.1 It is recognised that undergraduate teaching, postgraduate education, training and career guidance for junior staff are normally expected of consultants and academic GPs. Accordingly, achievement in this domain requires demonstration of achievement ‘over and above’ this.

4.6.2 Demonstration of achievement in this domain may include:

• Successful performance as undergraduate or postgraduate dean, or a strong supporting role to the work of a Deanery

• Promoting good relations between the NHS and academic medicine

• Curriculum planning and course administration

• Teaching load and, to some extent, lecturing

• Medical writing (e.g. publication of an important textbook) including the significance of books and chapters

• Work for Royal Colleges and faculties in examinations and Specialist Advisory Committees

• Input into training of nurses and other healthcare professions

4.7 Improvements in service and achievement of service goals
4.7.1 Achievement in this domain requires:

- Evidence of sustained and high quality contributions to the NHS in Scotland

4.7.2 Demonstration of achievement in this domain may include:

- Sustained performance in hard pressed and disadvantaged services
- Application of innovations in service provision and clinical practice (other than applications of original research which is covered in Domain 4)
- Full achievement of service goals
- Addressing NHS priorities
- Service planning
- Exceptional or unusual commitments, particularly under exceptional or severe service pressures
- Promotion of patient education (e.g. health promotion) and patient support
- National or international recognition of performance

4.8 Summary section

4.8.1 The summary section is an opportunity to clearly and simply explain to SACDA members (who may not have specialist knowledge of the award holder’s area) the main contributions to the NHS and the significance of achievements in relation to patient care and advancing the wider good of the NHS.

4.8.2 Demonstration of achievement in this section may include:

- Contributions that have been ‘over and above’ those expected for the post
- The intensity, significance and value of achievements
- Receipt of honours, prizes and other forms of recognition

4.8.3 Award holders should be aware that if their award is successfully renewed following a five-yearly review the summary section of their CV form will be published on the SACDA website.
4.9 Key points to remember

4.9.1 Please remember that SACDA members may have to review several hundred forms in any given awards round. It is therefore recommended to make submissions as clear and concise as possible.

4.9.2 Some key points of guidance are noted below:

- **Dates** of appointments, membership of committees and other activities must be included

- Long sentences and detailed descriptions are rarely as effective as short statements and bullet points

- The use of heading and appropriate formatting is encouraged

- It is possible to be informative and comprehensive within the available space but it will be necessary to be selective as to what is included

- The use of unexplained abbreviations (unless particularly well known, such as BMA) should be avoided