NHS

NHS Consultants' Clinical Excellence Awards Scheme

2012 Awards Round









ADVISORY COMMITTEE on CLINICAL EXCELLENCE AWARDS

Guide to Applications (new and renewal) and Existing Award Holders



This Guide is available online at the ACCEA website vww.dh.gov.uk/ab/ACCEA/index.htm

The online national awards application system is available at vww.nhsaccea.dh.gov.uk

Published May 2012

Please note: All applications for national awards must be submitted by 17:00 on Friday 7 August 2012

Preface: What does this Guide cover?

All applicants (new or renewal) and current awards holders should be aware that the Clinical Excellence Awards Scheme has been subject to a review by the Review Body on Doctor's and Dentists Remuneration (DDRB). We are awaiting the publication of the report and the Department of Health's response to the report.

<u>The advice and information contained within this Guide relates to the</u> <u>2012 Round only</u>. It does not pre-empt decisions on any new Scheme.

This Guide is for NHS consultants and academic GPs applying for a new Clinical Excellence Award and/or for renewal of their current clinical excellence or distinction award. It covers national awards in England and Wales. (Separate guidance is available for employer based awards – applicants for these awards should consult the employer based awards guide.)

It explains how the Scheme works, who is eligible and how to apply. It also explains how your application will be considered, and what to do if you want to appeal against the decision.

Please use it as background information and as a reference guide while completing your application. You may not be able to complete your application without this Guide so it is essential that you read it.

You can find a set of frequently asked questions about the Scheme, along with annual reports of previous award rounds, at www.dh.gov.uk/ab/ACCEA/Publications/index.htm

You can also find a Code of Practice at www.dh.gov.uk/ab/ACCEA/Committees/index.htm

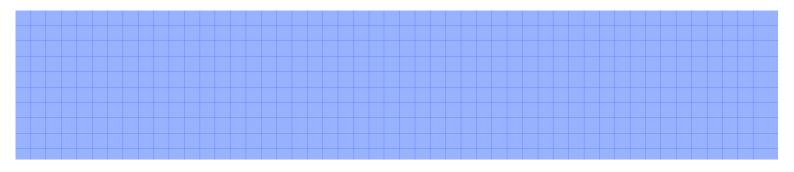
Screenshots of the application form will be placed on the ACCEA website. This does not replace this Guide but may assist further when completing your application.

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Part 1: Introduction

1.1 The Clinical Excellence Awards Scheme

1.1.1 Clinical Excellence Awards recognise and reward NHS consultants and academic GPs who perform 'over and above' the standard expected of their role. Awards are given for quality and excellence, acknowledging exceptional personal contributions.

1.1.2 To be considered for an award, you will have to demonstrate achievements in developing and delivering high quality patient care, and commitment to the continuous improvement of the NHS.

1.1.3 The Scheme is administered by the Advisory Committee on Clinical Excellence Awards (ACCEA). It is managed on the Committee's behalf by a full-time Secretariat in the Department of Health in England and Wales has a Secretariat in the Welsh Assembly Government.

1.1.4 The Clinical Excellence Awards Scheme continues to take account of the good practice developed by the Distinction Awards and Discretionary Points schemes that preceded it. If you already hold either of these, you can still apply for a Clinical Excellence Award – see section 2.2 for more details.

1.2 How does the Scheme work?

1.2.1 There are 12 Levels of award. In England, Levels 1-8 are awarded locally (employer based awards) and Levels 10-12 (Silver, Gold and Platinum hereafter) are awarded nationally in England and Wales. Level 9 Awards in England can be awarded locally as employer based awards or nationally as Bronze, depending on the type of contribution. To avoid confusion, this Guide will always refer to the national Level 9 award as Bronze. In Wales there are no local awards instead commitment awards are made by employers. Although the principles in this Guide apply equally to both national and employer based local awards, applicants for employer based awards should consult the employer based award guide.

1.2.2 Applicants in England may apply for both a national Bronze and an employer based Level 9 in the same year. If an applicant finds out that they have been successful at the employer based level 9, before the national recommendations are made, they must let the Secretariat know - whichever award is granted first takes precedence, therefore your national application will be withdrawn if you are successful in your Level 9 application prior to the outcome of the national awards round. There is no difference to the applicant, financially, between the two awards.

1.2.3 ACCEA and its sub-committees recommend individuals for Bronze, Silver, Gold and Platinum awards. Applicants for Levels 1-9 are recommended by employer based awards committees.

1.2.4 There is a core application form for all the awards, which means everyone who applies for a particular level of award has the same opportunity to highlight their contributions.



1.2.5 Applications for national awards in both England and Wales must be completed online. Anyone applying for an employer based award (in England) will need to download and complete the form, and then submit it through their employer's processes.

1.3 What does the Scheme reward?

1.3.1 The Scheme rewards individuals who achieve over and above the standard expected of a consultant or academic GP in their post, and who locally, nationally or internationally provide evidence of many of the following characteristics (applicants are not expected to possess them all).

Demonstrate sustained commitment to patient care and wellbeing, or improving public health

Sustain high standards of both technical and clinical aspects of service whilst providing patient focused care

Make an outstanding contribution to professional leadership

In their day to day practice demonstrate a sustained commitment to the values and goals of the NHS, by participating actively in annual job planning, observing the Private Practice Code of Conduct and showing a commitment to achieving agreed service objectives

Through active participation in clinical governance contribute to continuous improvement in service organisation and delivery

Embrace the principles of evidence based practice

Contribute to knowledge base through research and participate actively in research governance

Are recognised as excellent teachers and/or trainers and/or managers

Contribute to policy making and planning in health and healthcare

1.3.2 ACCEA invites consultants to provide evidence about their performance, including achievements in preventative medicine, in five domains enabling them to demonstrate that they:

Deliver patient services which are safe, have measurably effective clinical outcomes and provide a good experience for patients

Have significantly improved quality of care and the clinical effectiveness of their local service or related clinical service broadly within the NHS

Have made an outstanding leadership contribution.

Have made innovations or contributed to research, or the evidence/evaluative base for quality

Have delivered high quality teaching and training which may include the introduction of

innovative ideas

1.3.3 National awards recognise not only the high quality of local clinical practice, leadership, research and innovation and teaching but also the impact of that work elsewhere within the NHS.

1.4 Overseas work

1.4.1 The Scheme recognises outstanding contributions to the NHS. Work undertaken in other countries is not directly relevant to the Scheme. However, if it can be shown to have had a direct benefit to the NHS then that impact can be taken in to account. Evidence of the outcomes of overseas work can be used as background evidence to support an application based on a consultant's current role and position in the NHS and their contribution in that capacity. For example, it may be used to demonstrate current excellence as part of a portfolio of work, or to show that relatively short NHS contributions are likely to have a sustainable effect. Work done overseas cannot be considered in isolation.

1.5 How will your application be assessed?

1.5.1 The Scheme aims to be completely open, and offer every applicant an equal opportunity. Individual applications are considered on merit and the process is competitive. Awards are also monitored to ensure that the Scheme is implemented fairly. The Annual Report of ACCEA records the conclusions of this monitoring.

1.5.2 Standard guidelines are used when recommending applicants for every level, and all awards are assessed against the same strict criteria. These criteria are set out in Part 5, and there is guidance for assessors on how to judge applications against these criteria, which you can view at www.dh.gov.uk/ab/ACCEA/Awardsround/index.htm

1.5.3 The criteria apply to all levels of award, but take account of achievements possible at different stages of a consultant or academic GP's career.

1.5.4 The sub-committees measure achievement within the parameters of an individual's employment, and recognise excellent service over and above the normal delivery of job plans, including the quality of delivery of contractual duties

1.5.5 Regional subcommittees score all new and renewal applications in their region. From these scores the sub-committees make a list of recommendations for awards based on the indicative number of awards for that region. Applications for platinum awards go through two further stages. They are scored again by a national committee made up of lay chairs and medical vice chairs of regional sub-committees. These scores along with the regional sub-committee scores are considered alongside the recommendations of the Academy of Medical Royal Colleges and Universities UK by the platinum committee of the main ACCEA.

1.5.6 ACCEA receives additional advice for applications for new awards from specialist societies and 'National Nominating Bodies' on the quality of applicants' work. A separate guide has been produced for these 'nominators'. They produce ranked lists indicating their views of the relative merits of applicants who have asked to be considered by them.

1.5.7 These rankings are one of the pieces of evidence used by sub-committees to help



evaluate applications. The lists are also considered by the Chair and Medical Director, when preparing the recommendations to go to the main Committee.

1.6 About the ACCEA and supporting committees

1.6.1 The Advisory Committee on Clinical Excellence Awards (ACCEA) is a nondepartmental public body. It issues Guides to the Scheme (such as this document), setting out the detailed criteria against which applicants will be assessed. The ACCEA Secretariat administers the application and assessment process for national awards.

1.6.2 The Committee advises Ministers on award nominations proposed by the Chair and Medical Director, and based on recommendations from sub-committees and national bodies.

Regional sub-committees

1.6.3 There are thirteen regional ACCEA sub-committees which assess applications for national awards. They are based on the boundaries of the ten Strategic Health Authorities. London is split into three, while the North West is subdivided into two to make these areas manageable. There is a committee covering Wales. A DH committee considers applicants who are seconded to the Department of Health or who work for Arms Length Bodies.

1.6.4 The sub-committees consider all applications from consultants and academic GPs in their area. They also receive any associated citations and ranked lists from specialist societies and nominating bodies on the applicant's work, when these are submitted to ACCEA via its accredited process. The sub-committee produces a shortlist for the Chair and Medical Director to consider, for submission to the main Committee.

1.6.5 Committee members come from a wide range of backgrounds, with experience and expertise in numerous areas. They come to a collective decision on which applicants to shortlist for awards.

National nominating bodies

1.6.6 The Chair and Medical Director also consider the applications of all those consultants and academic GPs who have been shortlisted by accredited national nominating bodies, such as the Medical Royal Colleges, Universities UK, the British Medical Association, the Medical Women's Federation and the British International Doctors Association. There is a Guide for nominators and a list of national nominating bodies on the ACCEA website. These bodies are invited to submit a ranked shortlist in a similar way to that produced by the subcommittees. These lists are then considered, in consultation with the relevant subcommittee.

1.6 Commitment Awards

1.6.1 ACCEA does not have any role in relation to commitment awards in Wales. For further Information on commitment awards please contact the individual employer.

Part 2: Eligibility

2.1 Who can apply for an award?

2.1.1 You can apply for a Clinical Excellence Award if you are in one of the following 6 categories:

a) A **fully registered medical or dental practitioner**, who is included on the specialist register of the GMC or specialist list of the GDC, who has been substantively appointed as an NHS consultant for one year (excluding any period as a locum although reference to achievements as a locum in the same role can be drawn on as evidence) on 1 April in the award year and employed by organisations such as:

Strategic Health Authorities Special Health Authorities NHS Trusts NHS Foundation Trusts Primary Care Trusts Local Health Boards in Wales The Department of Health (where you retain NHS terms and conditions of service) Welsh Assembly Government The Public Health NHS Trust in Wales Social Enterprise organisations National Institute for Health and Clinical Excellence The Health Development Agency The National Blood Service Universities Medical and Dental Schools The Medical Research Council Other bodies occasionally approved by ACCEA as proper employers of consultants for NHS purposes

b) An **academic general practitioner** (GP) holding a substantive contract of employment as a clinical academic at the equivalent of senior lecturer level or above, with a higher education institute and/or the Medical Research Council.

You will only be eligible if your employer considers that your duties and responsibilities equal those of consultant clinical academic staff.

You can apply for awards, provided you:

Work at least half your hours as an academic GP Are a practising clinician providing some direct NHS services Undertake at least five programmed activities or equivalent sessions that benefits the NHS, including teaching and clinical research

c) A consultant who is a registered medical or dental practitioner and holds an **honorary NHS contract**. Eligibility for awards is defined in the contribution made to the NHS, using wider terms than direct patient care. Whole time academic consultants who undertake at least five programmed clinical activities or equivalent sessional time of benefit to the NHS, including teaching and clinical research qualify for a whole CEA.

Whole-time academic consultants with fewer than five programmed activities (or equivalent), considered beneficial to the NHS, may be eligible for a proportion of the award. For more details please see the matrix on pro rata payments which is available to download from www.dh.gov.uk/ab/ACCEA/Publications/index.htm

d) **A postgraduate dean** appointed in competition from both general practitioners (GPs) and consultants and with responsibilities for postgraduate trainees across all specialties.

e) A consultant subsequently employed as a dean/head of school in medicine or dentistry, on the basis of your work in this post.

f) A consultant working as an NHS trust clinical or medical director or equivalent **medical manager post**. Awards committees will assess your clinical work and contribution over and above expected duties.

If you are a consultant almost exclusively in medical management, you remain eligible for awards provided that you have an active consultant contract and ensure you continue to be eligible for appropriate revalidation by the General Medical Council.

Consultants who move out of medical management into general management without a specific clinical leadership role are not eligible for clinical excellence awards.

Terms and conditions

2.1.2 As an NHS consultant, you can apply for a Bronze, Silver, Gold or Platinum Award, whether you are subject to nationally determined terms and conditions of service or have agreed terms with an individual trust.

Military service

2.1.3 ACCEA is pleased to recognise contributions, over and above the contractual expectations, by NHS consultants and academic GPs to military medical and dental services. Applicants who are members of the Reserve Forces are encouraged to seek a citation from the Ministry of Defence via their Commanding Officer. Applicants who are Civilian Advisors to the Ministry of Defence are encouraged to seek a citation from the Surgeon General of the Ministry of Defence.

Consultants and academic GPs nearing retirement

2.1.4 Clinical Excellence Awards make it possible for very experienced consultants to be properly recognised and rewarded while continuing to work for the NHS. While there is no upper age limit for applications, ACCEA aims to reward continuing, sustained contributions, and so does not expect applications from consultants or academic GPs intending to retire in the near future.

Consultants working part time

2.1.5 Part time consultants are eligible for Clinical Excellence Awards and will be paid on a pro rata basis.

2.2 Eligibility for progression

2.2.1 If you already hold Discretionary Points, a Distinction Award or Commitment Awards and apply successfully for a Clinical Excellence Award, you will no longer receive payment from your previous Points or Award.

You already hold:	You can apply for:
Discretionary Points or Level 1-8 Award or Commitment Awards in Wales or exceptionally no award	Bronze Award through the national process and/or Level 9 from your employer if you work in England
Bronze Award or Level 9 Award or B Distinction Award	Silver Award
Silver Award	Gold Award
Gold Award or an A Distinction Award	Platinum Award

2.2.2 The guidelines for applying for a higher level award are as follows:

2.3 Issues affecting your eligibility for awards?

2.3.1 You are not eligible for an award if you are -

A locum consultant, although if you subsequently hold a substantive consultant post it will be acceptable for your application to draw on evidence from your time as a locum consultant

A consultant working exclusively in a general management position (such as chief executive or general manager) without a specific clinical role

Investigations or disciplinary procedures.

2.3.2 The Framework Agreement establishing the Clinical Excellence Awards Scheme states that consultants are eligible for awards providing there are no adverse outcomes for the consultant following disciplinary action by the employer or the General Medical Council or the General Dental Council. It also states that in very extreme circumstances the award and associated payment will be removed. Adverse outcomes include disciplinary sanctions, all findings by the GMC or GDC of impaired fitness to practice due to 'misconduct', 'deficient professional performance' or criminal conviction or caution. Eligibility relates to continuing to



hold an award as well as applying for a new award.

2.3.3 <u>A consultant will not be eligible for an award, or the renewal of an award, if they have disciplinary sanctions outstanding against them on the closing date for applications for new awards and renewals in a particular year.</u>

2.3.4 The implications of 'warnings' issued by the GMC or GDC, and the implications of disciplinary sanctions by employers' disciplinary proceedings, including the issuing of a formal warning, will be considered by the main ACCEA. ACCEA will decide if those sanctions render the consultant ineligible, with an opportunity for the consultant and the employer, where appropriate, to make representations on the issue.

2.3.5 ACCEA considers the placing of restrictions by a regulator or employer on a consultant's practice as indicating 'very extreme circumstances' in which pay protection would not apply. Consultants in this position would have the award itself and payment of the award removed unless the consultant makes a case to the main ACCEA that persuades them that it would be appropriate to continue payment. This would only occur in exceptional circumstances.

Part 3: The application process

3.1 Making your application

3.1.1 You must complete your own application form – nobody can submit one on your behalf.

3.1.2 If you are applying for a **new national award** (Bronze, Silver, Gold or Platinum) and/or **renewal of a national clinical excellence or distinction award**, you will need to complete your application online at the ACCEA website at www.nhsaccea.dh.gov.uk

3.1.3 You can download copies of the forms, to refine your responses, before completing the actual forms online. To do this, go to www.dh.gov.uk/ab/ACCEA/index.htm

3.1.4 When applying for an award, you need to specify in which trust/organisation you are based, to ensure your application is considered by the correct sub-committee. If you list the wrong trust/organisation, your application will be sent to the wrong sub-committee and you will not be considered for an award.

3.2 Support for your application

3.2.1 We cannot accept applications for awards without a supporting employer's statement (citation) from the chief executive or nominated deputy. You should explain this to your employer if, for any reason, they have not completed Part 2 of the application on your behalf.

3.2.2 If you are employed by a university, the employer's statement should be completed by the chief executive or nominated deputy of the trust where you hold your honorary contract. You may wish to ask your university to complete a citation if you are applying for a new award, so it can comment on the significance of your contribution.

3.2.3 Any individual, university or professional body may also support applications for new awards. To do so, they must write and submit a citation. This must be done by the individual, university or professional body online at the ACCEA website.

3.3 How do appraisals fit into the process?

3.3.1 To be eligible for an award you must take part in an annual appraisal exercise. It is your employer's responsibility to confirm whether you have done this in the 12 months before your application, and if an annual appraisal exercise has not taken place then to confirm that you have made reasonable efforts to participate in an appraisal.

3.3.2 ACCEA does not need information about the appraisal itself. But you will not be eligible for an award unless your employer confirms that you have participated satisfactorily in the appraisal process, have fully participated in job planning, met contractual obligations and complied with the Private Practice Code of Conduct. An applicant may have met the required standard of job planning without necessarily having an agreed job plan in place, for example where mediation is taking place. It is important that you explain this to your employer, if they are delaying for any reason.

3.4 What does ACCEA need to know about investigations or disciplinary actions?

3.4.1 You must inform ACCEA on your application form if you are currently, or have been in the last five years the subject of any investigations or disciplinary procedures. This would include any investigations by external bodies such as the GMC, GDC, NCAS etc. It would also include any restrictions on your practice, complaints against your performance or conduct that your employer is formally investigating.

If the investigation has been concluded, you must provide information on the outcome. Any declarations are recorded in a 'hidden' field within the application form and are not available to assessors during their scoring process; it will not have a negative impact on the scoring of your application.

For live investigations, ACCEA maintains a policy of 'innocent unless proven otherwise'.

If you are subject to a new investigation or disciplinary procedure following the submission of your application, and before the new awards are announced, you must inform ACCEA immediately.

3.4.2 Please note that ACCEA receives regular updates on investigations or disciplinary procedures. Failure to declare any issues will call into question the probity of your application and this could lead to the application being void and, ultimately, the withdrawal of your award.

3.5 National Awards timetable

3.5.1 The timetable for the national awards round is set out in the following diagram. All applications and supporting documents for national awards must be submitted by **17:00** on Friday **17 August 2012**. This is an automated system and **it will not be possible to submit an application after this time under any circumstances**.

Online application form		Monday 28 May
available on ACCEA website		2012
All applications for new		
awards and renewals of		
existing awards plus citations		
and nominations to be		17:00 on Friday 17 August 2012
submitted to ACCEA via the online application system		August 2012
online application system		
Regional and Platinum sub-		
committees to consider		September 2012 – February 2013
applications		rebluary 2015
Final ACCEA meeting for		
consideration of		February 2013
recommendations		
Ministerial approval of		February 2013
recommendations		
Successful applicants to be		
notified		w/c 4 March 2013
Publication of names of new		
award holders and their		w/c 11 March 2013
personal statements		
	. 1	
Appeals to be lodged	$ \rightarrow $	15 April 2013
Publication of ACCEA Annual	1 I	Summer 2013

3.6 Applying for a new national award (Bronze, Silver, Gold or Platinum) and/or renewal of a national clinical excellence or distinction award.

3.6.1 The online application form for the 2012 Awards Round is available on the ACCEA website. Please follow the steps at the end of this chapter when applying. You will need to complete each section and cannot submit your application to your employer without doing so, but you can move between sections and amend them up until you submit to your employer.

3.6.2 We recommend that you save your work at least every 10 minutes, in order to avoid being 'timed out' and losing any unsaved work.

3.7 Things to remember when applying

3.7.1 When making your application, please bear in mind the following:

It is advisable to start work early on your application as you will need to allow enough time to secure support from your employer

If your application is for the renewal of a current award give as much attention to detail as you would in an application for a new award – all renewal applications will be scored alongside applications for new awards (see Part 4)

When filling in the form it is very important to:

- Follow the steps given in this guide
- Write names of societies, groups, etc in full; do not use acronyms Remember that people reading the application may not know you and may not be Doctors or Dentists
- Give quantified information such as outcome data whenever possible, quoting dates, the source and appropriate benchmarks
- If listing roles you have fulfilled make certain you describe the impact you have had in those roles
- Use a new line for each entry. The use of bullet points will help clarity of presentation.
- You should give dates for activities. Award holders applying for higher level awards must specify which achievements have been made after the date of their last award
- You will not be able to submit incomplete forms and your application must include an employer's statement
- You should check with your trust administrator which email address to use when setting out your employer's details on national applications
- Do not try to sign your application electronically, as this cannot be done, simply type your name in the box provided

You must inform ACCEA on your application form if you are currently, or have been in the last five years the subject of any investigations or disciplinary procedures (see Step 13 of Stages of Your Clinical Excellence Award Application). If you are subject to a new investigation, restrictions on your practice or disciplinary procedure following the submission of your application, and before the new awards are announced, you must inform ACCEA immediately (see Part 3.4)

Stages of your Clinical Excellence Award application

• **Read** <u>all</u> of this Guide before starting your application. In particular applicants should read <u>all</u> of this section before beginning work on your application, and remember to save your work regularly.

Part 1 of your application

Step 1: Logging on to the system (for national award applications)

Go to the online ACCEA system www.nhsaccea.dh.gov.uk

First time using the system?

Click "new account request" and complete all sections then click "submit".

You will shortly receive an email with your username. This will include a link that you must click within 24 hours of receiving the email in order to activate your account and create a password. By clicking the link you will be taken to a security information page. On here you would need to complete a password (note the on screen rule about this). You are also asked to complete three security questions. It is important you complete these as they assist the ACCEA Secretariat, when trying to identify a caller. If you cannot answer the questions when asked, the ACCEA Secretariat will not be able to assist you over the phone and communication would need to be carried out via email. Once you have completed all fields on this page select "submit". You will then be taken to the log in page of the online system.

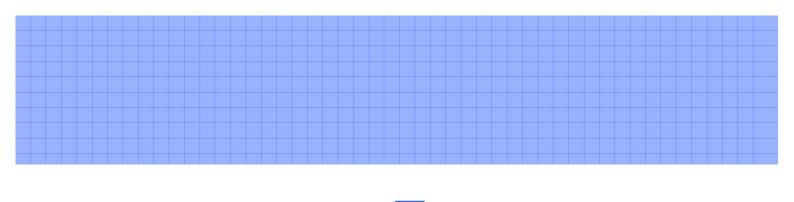
When logging in for the first time you will be directed to the terms and conditions page, asking you to verify that this Guide has been read. Tick the box to confirm that the Guide has been read and select "accept". You will then be directed to the consultant home page.

Existing account holder?

Log in using your existing username and password.

If you forget your password at any time go to the web address above, and select "forgot password". This will then ask you for your username and an answer to one of your security questions. Complete these and click "submit". This will take you to a "change password" screen where you will type a new password (note the on screen rule about your password) and click "submit". This will take you back to the login page and your new password will be ready for use.

If you forget your username at any stage, you would need to contact the ACCEA Secretariat. Please note your username, password and answers to your security questions are case sensitive.





Step 2: Publish Personal Statement Confirmation

Here you will be asked to confirm that you understand that should your application be successful, your personal statement will be published. Only in exceptional circumstances will you be able to opt out of this.



Step 3: Location of Primary Employer

Select whether your primary employer is in England or Wales



Step 4: Application Type Selection

Here you would need to enter your details regarding your current award status, what level is being applied for and whether this is a new application, a renewal or both. This can be changed at any stage before submitting the application form to ACCEA.



Step 5: Application Guidance

This page gives you a series of step by step instructions to assist you in the application process. It would be advisable to save your work here, by clicking the "save draft" button.



Step 6: Applicant Details

Here you enter your address details, please note if you have entered any details in to the "my profile" section of the online system, these will automatically be copied over on to the "applicants' details" page. This screen also confirms your personal statement information and the level of award you are applying for.



Step 7: Qualification Details

This asks for details of your specialty and qualifications you have achieved.



Step 8: Employment Details

You should use this page to list your employers (main employer first) and the posts you have held in your time as a consultant. The employer you select as your main employer, will be the one who verifies your application. Please note in the case of university employees, you must select your NHS employer as the main employer.



Step 9: Personal Statement

Here you should give up to four examples that summarise your case for an award. Please note that achievements mentioned in the personal statement should also be included in the relevant domain statements.



Step 10: Job Plan

Complete the Job Plan section by summarising separately the number of direct clinical care, supporting and 'other' programmed activities you are remunerated for. Also describe other roles for which you receive remuneration from other sources as well as listing activities for which you are not remunerated. Do not provide a day to day list of all your activities but do describe your working week for each post you hold, e.g. consultant surgeon, clinical director, senior lecturer, or specialist society officer (this is not a comprehensive list). You should notify the ACCEA Secretariat if there are subsequently any significant changes e.g. in your place of work, extended absences.



Step 11: Domains

The first screen in this section is Domain 1, once this has been completed select "next" to take you to Domain 2. Repeat this for each domain until you have completed all five domains. Please see Part 4 of this Guide for what information should be detailed here.

If you would like to highlight additional work you have done in any of these areas, there is an option to select an additional form.

Instead of filling in the domain field, tick the box in the domain concerned and you will be able to add your contribution to the supplementary form of that area with a greater character count (applicable to Domains 3, 4 and 5 only).

Please be aware that there is a maximum number of supplementary forms that can be completed at each National Level:

Bronze and Silver applicants:	1
Gold applicants:	2
Platinum applicants:	3

These forms are optional.



Step 12: Employers Section

You cannot do anything on this screen, this is for your employer to complete. The next step is to submit this to your employer by clicking next until you come to the "verification of completion" page.



Step 13: Verification of Completion

This page will ask you to confirm all the information you have given is correct. Before entering your details on this page you should check you have completed all sections on the form. You can navigate back through the form using the menu on the left hand side of the screen. On this page you must declare if you are currently, or have been in the last five years the subject of any investigations or disciplinary procedures. This would include any investigations by external bodies such as the GMC, GDC, NCAS etc. It would also include any complaints against your performance or conduct that your employer is formally investigating and any restrictions on your practice. Once this is all complete select "submit to employer". (If any section of the form has not been completed you will receive a warning message here and it will not allow you to proceed).



Part 2 of your application – Employer's contribution

Following this, your employer will receive an email informing them that your application is waiting for their contribution. Your employer will have their own username and password to do this. Should your employer find a mistake with your application, they can return it back to you to correct. You can make any necessary amendments and resubmit it to your employer.



Step 14: Reviewing

Once your employer has completed **Part 2**, they will submit your application back to you and you will then be able to view your application in a 'read-only' format.



Step 15: Submitting to ACCEA

If you are content with your application, you should then select "Submit to ACCEA" to complete the process. Submission of your application to ACCEA is your responsibility – IT CANNOT BE COMPLETED BY A SECOND PARTY.

If you want to check your application has been successfully submitted to ACCEA, the 'Step in Action' progress bar on the top half of the screen will display 'Submitted to ACCEA' in bold type when successfully submitted.

Part 4: Additional information on applications for renewal of awards

4.1 Timing of renewals

4.1.1 National Clinical Excellence Awards and Distinction Awards granted from the 1989 awards round onwards are currently subject to application for renewal every five years. It is your responsibility to ensure that you reapply for renewal at the correct time.

4.1.2 The ACCEA Secretariat will endeavour to notify you and your Chief Executive to remind you when your renewal is due: however, there may be occasions when we are unable to contact you. The onus is on the Award Holder to ensure that an application for renewal is submitted at the correct time.

4.1.3 In 2012, ACCEA is expecting renewal applications from those whose awards were granted in the following years 2008, 2003, 1998 and 1993

4.1.4 In a few cases some consultants will be renewing out of the usual cycle. In these cases the individual will have received a letter from ACCEA.

4.1.5 The current process of five year renewal ensures that ACCEA only rewards consultants who continue to meet the standards required. In reaching a view on renewals, we also consider any adverse findings from complaints, disciplinary or professional proceedings.

4.1.6 Awards can be reviewed at any other time. If your employer feels there is good reason to do so, they have a duty to inform the Chair and Medical Director of ACCEA

4.2 How will the renewal application work?

4.2.1 As part of the current renewal process you will need to complete an application form, setting out how you continue to meet the criteria for holding an award at your current level. When applying for renewal you should demonstrate, by reference to any achievements since the original award or last renewal, how you continue to meet the criteria for the Scheme.

4.2.2 You should focus on activity within the five year period leading up to the renewal application. You should only include information on earlier activity to demonstrate how your contributions have evolved and / or shown a sustained commitment to the continuous improvement of the NHS within the renewal period.

4.2.3 You should give as much attention to completing an application for the renewal of an award as you would give to submitting an application for a new award. Applications will be



scored alongside applications for new awards at the equivalent level and will be considered in the light of the standard of those applications.

4.2.4 To be successful, a renewal application should normally demonstrate that the contribution is at least as good as the weakest successful applicants for new awards. The previous contributions of the award holder which led to the making of the original award will also be considered. Attention will also be given to the employer's assessment of the contribution being made.

4.2.5 It should be noted that the Scheme is currently under review and may therefore change. Applicants who submit a successful renewal application in the 2012 Round will have their award renewed subject to any transitional provisions that may be issued as a result of these changes.

4.2.6 Applicants who were due to submit an application to renew their award in the 2011 Round and did not do so, or whose application was inadequate, must submit a renewal application in the 2012 Round or their Award will expire on 31 March 2012.

4.2.7 If these applicants fail to submit or submit an application with insufficient evidence for renewal in the 2012 Round, a recommendation will be made to ACCEA that the award is terminated. Consultants to whom this applies will be warned that this recommendation is being made and they will be given the opportunity to write to ACCEA explaining why they were unable to submit an application with sufficient information to justify renewal, which will be presented to the main committee. There will be no opportunity to submit further evidence on the quality of contributions made, only that relating to reasons why it was not possible to do this initially.

4.2.8 If applicants who are due to submit a renewal application in the 2012 round either fail to submit an application or submit an application with insufficient evidence to justify renewal a recommendation will be made to ACCEA that the award is terminated when it expires in March 2013.

4.2.9 These applicants will be warned that this recommendation is being made and will be given the opportunity to write to ACCEA explaining why they were unable to submit an application with sufficient information to justify renewal, which will be presented to the main committee. There will be no opportunity to submit further evidence on the quality of contributions made, only that relating to reasons why it was not possible to do this initially.

4.2.10 Consultants who have failed to provide sufficient evidence to justify the renewal of an award that falls to be considered in the 2012 Round will not be able to submit a renewal application in a subsequent round. They will, however, be able to apply for a new award if they remain eligible for the Scheme or any successor Scheme.

4.3 What part does your employer play in your renewal application?

4.3.1 The Chief Executive or nominated deputy of the organisation where you work will need to complete **Part 2** of the renewal form, and indicate whether:

They support the continuation of the award

You continue to work to the standards of professional and personal conduct required by the General Medical/Dental Council (GMC/GDC)

You have had a formal appraisal, agreed a job plan, fulfilled contractual obligations and complied with the Private Practice Code of Conduct in the last 12 months

There has been any disciplinary action by your employer or the GMC/GDC, arising from a complaint that directly concerns you

4.4 How do appraisals and job planning fit into the process?

4.4.1 To be eligible for an award, you must take part in an annual appraisal exercise. It is your employer's responsibility to confirm whether you have done this within the twelve months before your application, and if an annual appraisal exercise has not taken place then to confirm that you have made reasonable efforts to participate in the appraisal.

4.4.2 You will not be eligible for an award unless your employer confirms that you have participated satisfactorily in the appraisal process, have fully participated in job planning, met contractual obligations and complied with the Private Practice Code of Conduct. You may have met the required standard of job planning without necessarily having an agreed job plan in place, for example where mediation is taking place.

4.5 What happens if your award is withdrawn?

4.5.1 If, following a renewal application, it is considered that you have not provided sufficient evidence for the continuation of your award, the Chair and Medical Director will recommend to ACCEA that it is withdrawn.

4.5.2 Before referring such cases, the ACCEA Secretariat will contact you, explaining the reasons. You then have the opportunity to write to ACCEA explaining why you were unable to submit an application with sufficient information to justify renewal, which will be presented to the main committee. There will be no opportunity to submit further evidence on the quality of contributions made, only that relating to reasons why it was not possible to do this initially.

4.6 How will the withdrawal of an award affect your salary?

4.6.1 There is currently a system of salary protection for awards that are withdrawn although it should be noted that this may become the subject of a consultation exercise and therefore may change.



4.6.2 At present, the financial value of your former award will be frozen until your basic pay has caught up with your mark time earnings.

4.6.3 However, in exceptional circumstances ACCEA may completely withdraw an award and its financial component.

4.7 What if you are soon to retire?

4.7.1 If your expected retirement date follows the renewal limit by only a short period (up to six months) ACCEA may under current arrangements use its discretion to renew the award until that date, without the need for submission of a renewal application, even if this results in an extension slightly beyond the limit. You should inform the Secretariat if this may apply to you.

Part 5: Assessment criteria

Clinical excellence is about delivering high quality services to the patient in front of you. However, it is also about ensuring that you are able to treat as many patients as possible by using resources efficiently and improving the productivity of the services that you offer. Assessors will expect to see evidence of a contribution to improving the productivity and efficiency of services of the NHS whilst simultaneously improving quality.

5.1 Highlighting your achievements

5.1.1 Complete the **Personal Statement** section. Give **four points** summarising your case for an award. Focus on your most significant achievements and most important examples of local, national and international work since your last award. You might like to highlight your particular working environment and the expectations relating to it. Although the personal statement is not scored it allows assessors to understand the essence of your case as you see it. In light of the fact that your personal statement is not scored, you should ensure the achievements highlighted here are included in one of the five domains. Should your application be successful your personal statement will be published on the website. Only in exceptional circumstances will you be able to opt out of this.

5.1.2 Complete the **Job Plan** section by summarising separately the number of direct clinical care, supporting and 'other' programmed activities you are remunerated for. Also describe other roles for which you receive remuneration from other sources as well as listing activities for which you are not remunerated. Do not provide a day to day list of all your activities but do describe your working week for each post you hold, e.g. consultant surgeon, clinical director, senior lecturer, or specialist society officer (this is not a comprehensive list). You should notify the ACCEA Secretariat if there are subsequently any significant changes e.g. in your place of work, extended absences.

5.1.3 An illustration of the format of a job plan is below:

Obstetrician and Gynaecologist

I have an 11 Programmed Activity (PA) contract which is split in to 8.5 Direct Clinical Care PAs and 2.5 Supporting Professional Activities. Broadly, my direct clinical care time is spent leading Antenatal clinics, Gynaecology clinics, both Obstetric and Gynaecology theatre lists and labour ward rounds. I attend or lead various meetings to support this clinical care such as case reviews, governance meetings, multi disciplinary team meetings and safety meetings. These occur throughout the week although the pattern varies from week to week. As a consultant I also take teaching and training sessions and help develop training. I am on call at the weekends once in every four weeks. My objectives include taking a lead on reducing Hospital Acquired Infections within my department, reducing the need for Caesarean births, improving the screening process for gynae related cancers and working towards becoming an examiner for my college.

My job plan reasonably closely relates to my actual work although I frequently stay later than planned if operations or meetings take longer than expected.

5.1.4 You will need to highlight your achievements in the **Domain** section of the online application form. Your application will be assessed based on your achievements in these key areas.

5.1.5 As you complete this part of the application, please bear in mind the following:

You need not demonstrate achievement over and above expected standards in all five domains to be worthy of an award. Much will depend on the type and nature of your post. It is possible to receive a national award, based on an excellent local contribution where this has had an impact on the wider NHS

Use the domains to draw attention to the most important examples of your local, national and international work

Make certain that you describe the impact you have had in any roles that you list and make certain that it is clear when these roles began and ended or if they are on-going

5.1.6 You should demonstrate your achievements against the objectives originally set in your job plan or personal development plan.

Do not include evidence submitted for an earlier award, unless it illustrates how initiatives have been further developed. This may be relaxed for applications for Bronze awards. Even then, you will have to demonstrate that your current work continues to be excellent

Providing quantified data particularly outcome data, highlighting achievements since your last award or progress made over the last 5 years, will help your application; quote the dates, the source and appropriate benchmarks. Where your work is subject to national audits, you should include this information.

5.1.7 Domains are scored by committee members using the following ratings:

Excellent	10
Over and above contractual requirements	6
Meets contractual requirements	2

Does not meet contractual requirements or when insufficient 0

0

information has been produced to make a judgement.

5.2 What sort of information should you include in each domain?

5.2.1 There are five domains, and you should group your achievements accordingly. The following pages show some examples of the type of information you might want to include in each domain, and the criteria against which your application will be assessed.

5.2.2 More specific guidance on scoring is provided to assessors. You can read this by downloading the Guide for Assessors from the ACCEA website at www.dh.gov.uk/ab/ACCEA/Awardsround/index.htm

Domain 1 – delivering a high quality service

5.2.3 Give evidence here of your achievements in delivering a service which is safe, has measurably effective clinical outcomes, provides good patient experience, and where opportunities for improvement are consistently sought and implemented. (Applicants should provide evidence across all of these dimensions, although it is recognised that their exceptional contribution may just focus on one of them). In your evidence you should include quantified measures if these exist (e.g. outcome data) that reflect the whole service that you (and if relevant, your team) provides: using Indicators for Quality Improvement or Quality Standards and other reference data sources in England or the Healthcare Standards for Wales where it allows you to provide performance data against indicators for your specialty. The evidence on patient safety should refer where possible to the new quality indicators and the evidence on the patient experience should indicate how you have addressed the issues of dignity, compassion and integrity with patients.

5.2.4 This could, for example, cover the following:

Excellence in delivering your professional commitments. You may refer to validated performance or outcome data. Present this comparatively, and/or with external or peer review reports assessing the quality of your service if possible

Exemplary standards in dealing with patients, relatives and all grades of medical and other staff. For example you should describe how you have provided dignity of care for patients and won their trust. Here you may refer to validated patient or carer surveys, or service feedback

Evidence of excellence in preventative medicine measures e.g. in alcohol abuse, smoking cessation and injury prevention

Evidence of the effect on patient experience

Good use of NHS resources

5.2.5 You should give evidence of the quality and quantity of your service arising out of audit or assessment by patients, peers, your employer or outside bodies: providing evidence will help your application. It would not be a disadvantage if evidence is less available in your specialty. You should quote the source of the information you give, and relevant dates. For example:

"In an analysis of mixed arterial interventions (2006) our vascular unit had relative risk of death 0.61 in the UK and the third largest arterial series in the country. My contribution to this outcome was....."

"Data from the intensive care national audit (ICNARC) (May 08), shows our unit is one of the top ten for survival with a standardised mortality ratio SMR of 0.65 meaning 60 patients lived who were expected to die. This performance has improved steadily since 2002 when our SMR was 1.35. My contribution to this outcome was....."

"I have set up a short stay programme which has the lowest length of stay for hip replacements in England, 2.7 days as against the England average of 6.1 days... 67% of patients are home after 2 nights... 98.5% patient satisfaction service... readmission rate of 5.1% as compared to the regional average of 7%"

5.2.6 You should provide benchmark comparisons wherever possible, for example standardised mortality ratios, MRSA, C difficile ratios, VTE prevention.

Domain 2 – developing a high quality service

5.2.7 Give evidence here of how you have significantly enhanced clinical effectiveness (the quality, safety and cost effectiveness) of your local service(s) or related clinical service widely within the NHS. In general, your evidence should be as measurable as possible. It should specify your individual contribution, not just that of your department. You should give specific examples of action taken in light of audit findings including how these might have contributed to organisational change.

5.2.8 This could, for example, cover information about the following:

Developing and completing relevant audit cycles or applying strategies to implement evidence based practice, leading to demonstrable service improvements. It is a baseline expectation that you provide evidence that you have fully participated in any

relevant National and Local Clinical Audits. You should also refer to participation in any relevant National Confidential Enquiries

Developing and/or applying tools to determine barriers to clinical effectiveness and their resolution

Developing diagnostic tools, intervention techniques and methodology

Analysis and management of risk; this may include examples of specific improvements, reduced risk or enhanced safety

Improved service delivery, with a demonstrable effect. For example, how has your service become more patient-centred and accessible?

Evidence that changes have been informed by consultation with patients

Innovation in service delivery, with a demonstrable effect. Is there evidence of improved outcomes or the introduction of major prevention, diagnosis, treatment innovations or care models?

Improved productivity and efficiency due to service redesign, with no diminution in quality

Development of new health or healthcare plans or policies

Major reviews, inquiries or investigations

National policies to modernise health services or professional practice

5.2.9 Where possible, give audit or research evidence showing where improvements have been made, quoting sources and dates. You need not have carried out these audits or research yourself. Indicate the developments you have been responsible for, either alone or in a team, with evidence that these have been of high quality and benefit. For example:

"The development of a Gastro Intestinal bleed service has resulted in excellent outcomes. Mortality 2% vs. 7.1% nationally. Risk Standardised Mortality Ratio of 0.58 National Audit. My contribution to this outcome was....."

"I have an international reputation for complex aortic surgery and thoracic abdominal aneurysms; our unit has the largest practice in the UK. We pioneered a hybrid open and endovascular operation for aneurysms involving the thoracic and abdominal aorta; first 75 cases elective mortality of 12.5%; elective and urgent of 16%; world's best reported results have mortality of 13%. Our thoracic aortic stent programme is largest in UK with mortality of 3.8%. My contribution to

these outcomes was "

" I have developed a continuous patient pathway with GP services for all preadmission clinics, and day case surgery patients ensuring the following; VTE risk assessment, appropriate thromboprophylaxis (including an extended duration component) with bleeding and VTE incidence, prevalence and follow up data. This is already improving our understanding and awareness of the issue but also stimulating us to work with GP colleagues to streamline the process. We estimate that, in the area piloted, ... bed days have been saved over the 6 month period of the pilot."

"I used multi disciplinary team working to effect systemic change throughout our unit saving nearly 1,000 bed days. This reduced the requirement for elective beds by 25%...I developed two half session theatre days. This has greatly improved theatre efficiency...I helped set up and develop the Orthopaedic Outreach Team which greatly reduced length of stay and was highly commended in the 2006 HSJ Awards."

Domain 3 – leadership and managing a high quality service

5.2.10 Give evidence of how you have made a substantial personal contribution to leading and managing a local service, or national/international health policy development.

5.2.11 If you list particular roles in your application, that you have undertaken describe the impact that you have had in those roles. ACCEA recognises many different aspects of leadership, which could include, but are not limited to the following:

Evidence of positive outcomes as a result of effective leadership inputs and processes, giving examples of specific achievements in terms of improved quality of care for patients

Information about any change management programme or service innovation that you have led, with evidence that it has improved service effectiveness, productivity or efficiency, for the benefit of patients, the public and staff

Evidence of excellence in leading the development and delivery of preventative medicine initiatives including working with other agencies such as local authorities and the voluntary sector.

Development of individuals or a team in support of improved patient care. You should give specific examples e.g. of mentoring or coaching. (Consultants working in England might refer to the Guidance on talent and leadership planning in England. Please see /www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidan ce/DH_093395)

An ambassadorial or change champion role, perhaps in public consultation or explanation of complex issues

Developing a compelling and shared vision and purpose for change, investing in verified improvement methodologies, tackling any behavioural issues that get in the way

Demonstrating your contribution to removing barriers and positively promoting diversity in the workplace, thus enabling the career progression of clinicians and non-clinicians into senior leadership positions

Working across organisational and professional boundaries in support of improved patient care, access or use of resources (clinically effective and efficient)

A leadership contribution to developing patient-focused services

Membership of a committee along with evidence of outcomes and your role in these. ACCEA is aware that membership of some national or international boards or advisory bodies is itself recognised as a marker of high professional status, but membership alone will not usually be accepted as evidence of an awardable contribution: we require evidence of what your membership achieved and your impact in any particular role that you list

Excellence in team leadership for which you take sole, rotational or shared responsibility

A leadership role in relation to clinical governance including a leadership role in policy or service development

Examples of individual leadership

5.2.12 Evidence of your contribution, the source of any data, and relevant dates should all be included, for example:

At local level

"As the lead obstetrician for Delivery Suite I have promoted normal labour and birth. The team's work was recognised by winning the All Parliamentary Group for Maternity Services Award for 2008. This work has been short listed for the Royal College of Midwives' annual award.



I continue to lead the weekly Obstetric Risk Management meeting. The reduction in reportable incidents when this meeting was established has continued.

I undertook a detailed review and redesign of the Antenatal Clinic service which has improved patient waiting times."

At national level

"In my role as chair of the regional neonatal network between 2006-2009 I championed the rationalisation of beds and care levels across acute hospitals. As a result, transfers of neonates for clinical and non clinical reasons have reduced by 10%: see data below"

5.2.13 Do not include educational responsibilities, such as chair of a training committee. These should be entered in Domain 5.

Domain 4 – research and innovation.

5.2.14 Use this section of the form to outline your contribution to research, and how you have supported innovation including developing the evidence base for the measurement of quality improvement. In the section on references you should detail papers published etc. (not give the names of referees).

5.2.15 On a separate line, detail what you have achieved to date and what you hope to achieve, with supporting evidence, such as:

New techniques or service models that you have developed and which have been adopted by others. In particular, how you have applied improvement methodologies in order to get the right things to the right place, at the right time, in the right quantities, while minimising waste and being flexible and open to change

Further developed techniques for public engagement.

Encouraged the systematic uptake of innovation to improve the quality of patient services.

Actual or potential impact of your research, including that which is laboratory based, or innovative development on health service practice, health service policy or on the

development of health services, including the relevance of your research to the health of patients and the public

Major trials/evaluations (including systematic reviews) led, or co-investigated, and published over the preceding five years and referenced

Your contribution as a research leader and to the research and supervision of others

Other markers of standing in your chosen research field(s) such as membership of review boards of national funding agencies, office bearer of learned societies or professorships. Provide evidence of your impact in these roles

Grants you hold i.e. not just those held by the department

Peer-reviewed publications, chapters or books written/edited – please indicate editorial activity

Significant participation in multi-centre research studies, e.g. high levels of recruitment to clinical trials

Evidence of excellence in research leading to new solutions to preventing illness and injury

5.2.16 Some relevant extracts from recent applications are as follows-

"As Director of R&D in the last 3 years I have positioned the Trust as one of the leading 5 NHS research centres in the country and developed a research service to support clinicians with robust governance processes, a clinical trials office, a research design service, and funding for research time."

"My research is in stroke, which is a public health priority for prevention and improvement of care. The development of a public health model for chronic disease using stroke is relevant to assessing needs and evaluating innovative models of care. My R&D leadership role has enabled academic and clinical organisations to develop joint NIHR Centres in biomedical and health services research and training for population and patient benefit.

"I have developed booking systems for use in emergency and trauma theatre settings. These secure systems allow cases to be booked into emergency theatres from anywhere in the hospital, informing all emergency staff of pending cases and their preparedness. The system links with hospital investigation reporting systems allowing blood investigations for each patient to be accessed.

In addition, the traumas booking system can be linked to a radiological teaching package; when a particular fracture type is booked onto the system the booking doctor is offered the opportunity to look at the system of classification for that fracture type and to review teaching radiographs of each type. The system won a 2008 national Theatre Innovation Award for IT."

Domain 5 – teaching and training

5.2.17 For some applicants, teaching and training will form a major part of their contribution to the NHS, over and above contractual obligations.

5.2.18 Give evidence of excellence that relates to the following (you will not be expected to include examples in all of these categories):

Quality of teaching. Any medical undergraduate teaching, evidence of student feedback and other forms of teacher quality assessment that show students' views

Leadership and innovation in teaching. This might include:

- Developing a new course
- Innovative assessment methods
- Introducing new learning facilities
- Authorship of successful text books or other teaching media
- A contribution to postgraduate education and life-long learning
- Contributions to teaching in other UK centres or abroad
- Developing innovative training methods

Scholarship, evaluation and research contributing to national or international leadership in the educational domain. This might include:

- Presentations
- Invitations to lecture
- Peer-reviewed and other publications on educational matters
- A contribution to education of other health and social care professions

Teaching and education of the public e.g. health promotion and disease prevention

Institutional success in regulatory body and quality assessment audits of teaching in which you have played a key role. This could include undergraduate or postgraduate examinations or supervision of postgraduate degree students

Evidence of personal commitment to developing teaching skills. Such as Higher Education Academy membership and courses completed

Evidence of unusual teaching and educational commitment and workload not recognised in other ways

Evidence of excellence and innovation in teaching related to preventing illness and injury

5.2.19 Some relevant extracts from successful applications are as follows-

"My course for **** (2005-10), innovative in its integrated health systems and active learning approaches, has sought and used intensive feedback to enable modification of the course before wider roll out. It is approved for continuing professional development by ****, shows significant gains in knowledge and skills and excellent participant feedback."

"Principal Internal Examiner for final MB examinations at ****. I am responsible for ensuring the written and clinical parts of the examination are constructed, blueprinted to the curriculum and then standard set. I oversee the work of the examination leads for these sections. I personally write exam questions and examine for first and resit examinations. I am Chairman of the Final MB board which considers extenuating circumstances and receives reports from external examiners."

5.3 Additional information for Domains 3, 4 and 5

5.3.1 For Domains 3-5, you will have an opportunity to include additional material to support your application, if you have been particularly active in a specific area.

5.3.2 If you are applying for **Bronze or Silver**, you can include additional information for Domain 3 or Domain 4 or Domain 5.

5.3.3 For **Gold** applications, you can select two from Domains 3, 4 and 5. If you have been particularly active in these areas, choose the one/s in which you have made the most significant contribution.

5.3.4 For **Platinum** applications, you have the opportunity to select all three domains in which to include extra information.

5.3.5 When completing these domains online, you will be given the option to provide this additional information in supplementary form(s), instead of in the actual domain field.. You are not obliged to complete these supplementary form(s) and you should only use them if you feel there is inadequate space in the domain field to provide important information to support your application

Part 6: Appeals

6.1 Grounds for an appeal

6.1.1 Inevitably, some applicants will be disappointed with the final outcome of the awards. You cannot appeal simply because you disagree with the collective judgement of ACCEA or your employer's award committee. However, where it can be shown procedures have not been followed, you may appeal for a review.

6.1.2 The following would be considered grounds for an appeal:

The relevant committee did not consider material duly submitted to support an application (i.e. application and citations)

Extraneous factors or material were taken into account

Unlawful discrimination based on, for example, gender, ethnicity or age

Established evaluation processes were ignored

Bias or conflict of interest on the part of a committee

6.1.3 Any appeal, related to national awards must be lodged within four weeks of the award results being announced.

6.1.4 Please refer to the employer based awards guidance for information on the local awards appeal process.

6.2 Appeals for national awards

6.2.1 Appeals against decisions about national awards (Bronze, Silver, Gold and Platinum) are handled by ACCEA.

6.2.2 To appeal, you should write stating why you believe the process followed by a committee was unfair.

6.2.3 ACCEA will seek to resolve any concerns informally, but you retain the right to proceed with a formal appeal. If you do, ACCEA may request a restatement of why you continue to believe the processes were unfair, to ensure only unresolved issues are examined.

6.2.4 Where concerns cannot be resolved informally, a panel of people previously uninvolved in your application will consider the appeal. The panel will include a professional (medical or dental), an employer and a lay member as chair. They will look at your complaint, the documents setting out prescribed procedures, and a written statement of the procedure actually followed by the committee in question.



6.2.5 You will have access to all documents for consideration by the panel, and you will have the chance to make further representations in writing.

6.2.6 Appeals panels will usually proceed on the basis of the paperwork, without hearing oral evidence or representations. However, the chair of the panel will consider any written applications for an oral hearing.

6.3 Timeline for appeals

6.3.1 ACCEA attempts to resolve appeals within the timeline overleaf, however delays do sometimes occur. Where there are delays, you will be kept informed.

6.4 What happens if your appeal is successful?

6.4.1 The panel may determine what action follows if your appeal succeeds. If the panel is not able to suggest a specific resolution, the relevant committee will be asked to reconsider the case, taking into account the panel's findings.



National appeals process

(In all cases, the decision of the appeal panel is final)

Within 5 working days of receipt of appeal: acknowledgement will be sent



Within 20 working days of the acknowledgement being sent the Chair will have made proposals for an informal resolution if this is possible



If you remain unsatisfied, you can request a formal appeal. Within 20 working days of requesting a formal appeal a panel will be set up and a date agreed for them to meet.



Within 20 working days of receiving the outcome of the panel hearing, a final response with the outcome of the appeal will be communicated to the appellant by the Awards Manager.

Part 7: Change in circumstances of current award holders

The following changes to your circumstances may affect the payment of your Clinical Excellence Award or Distinction Award:

7.1 Change in specialty, job or significant change in job plan

7.1.1 If you stop practising in the area for which your award was granted, change your job, employer or have a significant change to your job plan, including a reduction in the number of sessions, you should inform ACCEA, who will consider your case.

7.1.2 You will normally be asked to submit a copy of your new job plan, signed by your Chief Executive, to be considered and approved by ACCEA

Part time working

7.1.3 If you are working part-time, your award will be paid pro-rata.

Working in general management

7.1.4 If you stop practising in the area for which your award was granted, and move into a full or part-time general management post, you will need to speak to your employer and consult ACCEA about whether you can continue to receive the full monetary value of your award. You would not normally receive payment of your award if you cease to meet the eligibility criteria set out in Part 2 of this guide.

7.1.5 If you return to clinical work after a period in full-time general management, your award may be reinstated after a review.

7.2 The effect of leave or secondments

Unpaid leave

7.2.1 Awards are not paid during any period of unpaid leave. If you take leave for longer than a year, the question of reinstating your award will be subject to review by ACCEA.

Secondments

7.2.2 If you are on full-time secondment to a post with a non-qualifying employer, your award will be suspended and you will not be subject to renewal in this period.

7.2.3 You should speak to your employer before you begin your secondment to make arrangements for protecting the award, and continuing to collect it after your secondment has finished.

7.2.4 If the secondment period is less than a year, you will resume receipt of your award once the secondment has ended. If you are due for a renewal during the secondment



period, you will be subject to a renewal during the next applicable awards round. ACCEA may use its discretion and grant an extension to the renewal period to allow you time to gather suitable evidence of awardable work on your return to the NHS.

7.2.5 If the secondment is longer than a year, ACCEA will consider reinstating the award subject to you returning to awardable work.

7.2.6 If you are away for between 1 and 5 years you can apply to have your award reinstated. ACCEA will specify the renewal period of the reinstated award. Generally, consultants who are away for five years or more must reapply at Bronze level. Consultants who move to government departments or government sponsored roles may be considered to return at the original level.

7.2.7 If you are due to begin your secondment during your renewal year an extension may be granted at the discretion of ACCEA following the same criteria for retirements. Each case will be judged on its merits.

7.2.8 If you are on secondment to the Independent Sector Treatment programme or similar organisation, whilst retaining your contract as an NHS consultant, you are still eligible to receive the award and will be subject to renewals.

Prolonged absence from the NHS

7.2.9 Where, for any reason, you have not practised your specialty in the NHS for more than a year, ACCEA will review whether the award should be reinstated.

Leaving the NHS during an award round

7.2.10 Payment for awards is backdated to 1 April of that awards year.

7.2.11 In order to qualify for an award, you must be employed as a consultant in the NHS on 1 April in the award year. We cannot grant an increased award in the 2012 round if you leave the NHS before 1 April 2012.

7.2.12 Consultants sometimes leave the NHS before the awards round is completed. If you submit a completed application by the closing date and are still in your NHS post on 1 April, the application will be followed through to the conclusion of the process. If successful your award will be backdated to 1 April and payable until you leave the NHS.

7.3 Changes in your pension contributions

7.3.1 You should notify the Secretariat of any changes to your pension contributions.

7.3.2 ACCEA considers you to have retired and returned to work if you are in receipt of all or part of your pension.

7.4 Effect of retirement

7.4.1 You are obliged to notify us of your date of retirement when it is known.



7.4.2 Clinical Excellence Awards cease on retirement and are consolidated into pension. If you are re-employed, you will not continue to receive any award payment. If you are re-employed on a permanent contract, you currently have the right to re-apply to the Scheme – this will be at entry level and will take no account of any awards held prior to retirement.

7.4.3 If you hold a **Distinction Award** and return to work within 12 months of retirement, to the same post or one substantially the same as that held when the Distinction Award was granted you may be able to apply to have your award reinstated. This aspect of the Scheme is currently under review and may change. Currently ACCEA has a requirement that you must be working a minimum of 4 PAs to have your award reinstated. You will also need to demonstrate that you continue to carry out excellent work which is comparable to successful applications for new awards at an equivalent level. You should submit a 'retire and return' application form which will be considered by a sub-committee of the main ACCEA that has been established specifically to consider these applications on a quarterly basis. Each case is judged on its own merits but as a rule applications will only be approved exceptionally. The application form is available from the Secretariat.

7.4.4 Your application should demonstrate that you will continue to work over and above that standard expected of your role, to the level of your existing award.

7.4.5 If your application for reinstatement of your award is successful this is subject to annual renewal. Failure to submit a renewal application at the correct time will lead to your award being ceased. Awards will also be ceased if the regional sub-committees of ACCEA judge there to be insufficient evidence in the application form for renewal. If this is the case, consultants will have a single opportunity to write to ACCEA to explain why they were unable to provide adequate evidence to support the continuation of their award.

7.5 Becoming the subject of an investigation

7.5.1 You must inform ACCEA, as soon as you are aware, if you become the subject of any investigations or disciplinary procedures. This would include any investigations by external bodies such as the GMC, GDC, NCAS etc. It would also include any restrictions on your practice, complaints against your performance or conduct that your employer is formally investigating.

7.5.2 You should keep ACCEA informed of any developments and the outcome of any investigations for our records. ACCEA maintains a policy of 'innocent unless proven otherwise'.

7.5.3 Failure to declare any issues will call into question the validity of your award and could lead, ultimately, to the withdrawal of your award.