

NHS Scotland Medical ACT 2021/22 Accountability Report

NHS Board: Tayside

Section 1 Confirmation of Total Medical ACT Funding Received From NES During 2021/22

a	Confirmation of Allocation of Funding	Recurrent	Non Recurrent*	Total	
	Base Allocation	£13,387,606		£13,387,606	£11,476,264
	Value of Bids Required in 21/22 - as per letter	£629,784		£629,784	
	Value of Bids Required in 21/22 - Add 20/21 100 places - non recurrent		£373,412	£373,412	
	Value of Bids Required in 21/22 - Add 21/22 165 places - recurrent	£347,856		£347,856	
	Value of Bids Required in 21/22 - Add 21/22 15 places - non recurrent		£31,623	£31,623	
	Initial Allocation Available to Board	£14,365,246	£405,035	£14,770,281	
	Total Funding Available for Bids in 21/22- pre national slippage	£977,640	£405,035	£1,382,675	

b	Confirmation of Funding Received	Recurrent	Non Recurrent*	Total	
	Base Costs	£13,387,606		£13,387,606	Detail in section 2c
	Bids Approved by RAWG and NES	£388,932	£833,357	£1,222,289	Detail in section 2a
	In Year Slippage on Bids Approved by RAWG and NES	(£64,048)	(£512,495)	(£576,543)	Detail in section 2a
	Total Funding Received	£13,712,490	£320,862	£14,033,352	
	Bids Under/(over) Allocation Agreed by RAWG and NES			£736,929	using regional, national slippage or NES additional funding if over initial allocation

*Non recurrent spend/bids are for time limited spends usually for 1 financial year but can cover multiple years, examples of multi year spends/bids- Mat leave cover 5 months in year and 7 year after; capital projects covering several years, IT equipment needed in year; CTF's.

Comments on above

Recurrent slippage of £64k had been incorrectly included within non-recurrent slippage. They have been separated out and table (b) above amended accordingly to reflect the correct position.

Director of Finance

Signed:

Print name:	
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Date:	
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Director of Medical Education

Signed:	
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Print name:	
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Date:	
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Note: DoF and DME signature and date must be obtained prior to report submission to Regional ACT Working Group.

Report Approved at Regional ACT Working Group

Copies can be sent to NES before approval by RAWG

(Y/N)	Date

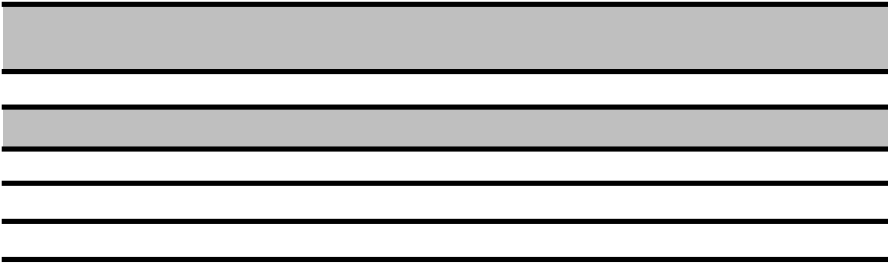
NHS Scotland Medical ACT 2021/22 Accountability Report

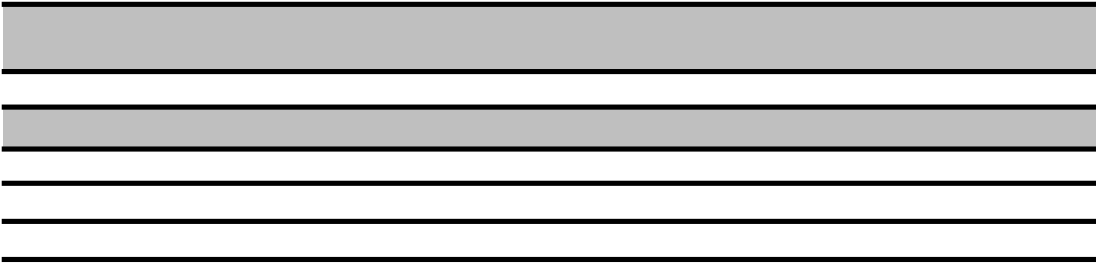
NHS Board: Tayside

Section 2a Bids approved by RAWG and NES and funded during 2021/22

Proposal/Item Description	In Year Bid					Slippage			Evaluation Requested			Anticipated Benefits		
	Recurring (£)	Non-Recurring (£)	Total (£)	Capital (Y/N)	Fully Implemented (Y/N)	Per POB Payments Schedule (£)	Other (details of spend should be included on 2b) (£)	Barriers to Full Implementation	By NES (Y/N)	By Other (Y/N)	Report Next Year (Y/N)	Detail Results of Evaluation.	Achieved (Y/N)	Please Provide Details
Camera Equipment for GP clinics		563	563	N	Y	0			Y		Y	Logistically, mainly due to Covid, PPE ie aprons etc combined with min house calls at the planned practice (SdPp) is carried on a chest plate on the persons front) has resulted in minimal opportunities to test equipment. Barriers have been discussed with main GP team and will be discussed also at GP tutor away day to try and gather more volunteers to try out the device. Consider possibility of data collection being reinforced by offering as BMS- Med Ed research opportunity 2022-23 also.	N	Possible benefits being explored are the opportunities to capture GP house calls which provides additional materials for future medical student teaching
Clinical Fellows in Anaesthesia	0	40,794	40,794	N	Y	(19,868)		Recruitment delays	Y			Practical skills such as airway management and cannulation can be assessed in an informal manner when the students attend theatre lists as part of the block. The Acute Care block has historically requested feedback from students, but this year only the airway workshop has formal feedback. For future feedback we intend to look at how best to collect information while decreasing the burden to medical students. With the innovation of QR codes linked to electronic forms such as "Google forms" then it should be easier to allow "real time" feedback in a couple of minutes at the end of the session.	Y	(but not exclusively) involved in the delivery of clinical workshops for the acute care block covering Airway Management, cannulation and simulation of acute emergencies. These are essential "ABC" skills which require to be delivered in practical, small group sessions. They are the foundation to managing an acutely unwell patient, a situation where there may not be time to consult others prior to starting emergency clinical management. The sessions address both practical and non-technical skills with reinforcement of this in the theatre sessions attended during the block. The fellows are involved in other projects as documented in the ACT funding application which will continue to evolve over time to match the new curriculum and requirements from the GMC.
Cert Med Ed	0	13,200	13,200	N	Y	0			Y			Completion of modules, certificate or diploma of medical education	Y	While gaining hands-on teaching experience and attending locally run workshops aimed at teaching methods are invaluable, by being able to support the fellows through a more formal teaching education financially, we are hopefully helping these clinicians become medical educators of the future.
Male pelvic models	0	13,590	13,590	N	Y	0			Y			Models being used for teaching	Y	male pelvic model. Evaluation of clinical skills teaching was very positive. We ordered 6 more models in order to further expand the clinical skills teaching we could offer which went live in July 2022 for the current Year 4. We plan to introduce formal OSCE assessments using these models to better formally evaluate the teaching. Sessions are much easier to manage from a tutor point of view and allows more content to
Interventional Radiology (IR)	15,526	0	15,526	N	Y	(3,881)		Delayed start	Y			For an evaluation tool case reports were submitted and those doing research a 4-week project was undertaken which highlighted the novel techniques within IR but also the basics of research methodology and presentation. It is too early to map out if benefits have been achieved but the reports were largely of a reasonable standard and the trainees appear to have a good handle of what the role of IR is and had revision of anatomy and disease processes.	Y	Introduction of IR into the UG curriculum and it's role in modern medicine. Role of quality improvement in IR.
UoD Laptop	0	844	844	N	Y	0			Y			Laptop being used	Y	Staff using laptop to deliver online teaching and use UOD teaching aids
UoD Laptop	0	844	844	N	Y	0			Y			Laptop being used	Y	Staff using laptop to deliver online teaching and use UOD teaching aids
UG Teaching - Pathology	13,224	0	13,224	N	Y	0			Y			Feedback is gathered as part of theme based feedback at the end of each block.	Y	Pathology represents an understanding of disease processes and is therefore fundamental to any medical course.
Maternity cover - Emergency Medicine	0	21,005	21,005	N	Y	(9,507)		Cost saving as lower graded cover	Y			The Teaching Lead was off on maternity cover: Her 1.5 FA were split across 3 doctors during this time.	Y	Teaching Lead commitments were appropriately covered.
Trolleys for 75" touchscreens	1,740		1,740	N	Y	0			Y			The trolleys enabled the screens to be fully usable for online learning	Y	Trolleys have enabled screens to be portable, and useable in multiple locations within departments. It has also bypassed the need to involve NHST Estates, and therefore avoided installation delays.
Maternity Cover - Obs & Gynae	16,831		16,831	N	Y	(5,364)		Cost saving as lower graded cover	Y			Continuity of teaching and development was successfully provided	Y	Cover provided by Dr Brown ensured that the running and development of the block continued.
Y4 Block Convenor Roles	42,000		42,000	N	Y	(36,167)		Recruitment delays	Y		Y	Individuals have not yet been in post long enough for evaluation	N	
Immersion Room		27,511	27,511	Y	Y	0			Y		Y	Not yet fully installed. Awaiting work through NHS before filming can begin. Used in existing format for Acute Care teaching. Post teaching evaluation collected and to be published at conference. Students really enjoyed teaching in this new environment. Comments about realism and enhanced engagement.	N	Yet to be fully explored. Benefits to Acute Care teaching and student engagement.
1% uplift allocated to pay	106,857		106,857	N	Y	0			N		N/A			
Maternity Cover - GP	13,889		13,889	N	Y	0			Y			Usual assessment of teacher via appraisal	Y	Back-cover to provide GP SIP Year 1 ongoing teaching throughout this academic year and up until end of maternity leave for staff member.
PRI Student Accommodation refurbishment - on hold	150,000		150,000	N	Y	(150,000)		Lack of NHST Estates resources, huge backlog of projects	N		N/A			
ENT Teaching Fellow	37,753		37,753	N	Y	(12,584)		Cost saving as lower graded cover. August start	Y			Assessment of the post has been carried out in the form of student feedback on the blocks he has been involved in teaching (Year 3 ophthalmology and ENT and Year 4 ENT)	Y	The feedback from students has been very positive. Dr Ahmed has been mentioned specifically in some of the feedback comments. He has also helped to carry out many tutorials and helped block organisers with work to prepare for the changes in the curriculum in August.
Online subscription to Capsule	4,125		4,125	N	Y	0			Y		Y	Students use the subscription, still under evaluation		
Ipad	774		774	N	Y	0			Y			No formal evaluation has been carried out into the utility of the iPads for the preparation of UG teaching.	Y	The iPad's portability has enabled the ADME to carry out teaching related work, marking and joining Teams calls wherever free.
EDI Staff Development tutor	14,000		14,000	N	Y	(11,687)		Delayed start	Y		Y	New appointee - evaluation of teaching under way	N	
Integrated teacher - Year 1 - 6 posts of 1PA this year (6 sessions)	84,000		84,000	N	Y	(84,000)		Recruitment delays	N		Y	Initial appraisals undertaken for those in post. Ongoing evaluation through academic year with formal evaluation at end of Academic year 2022/23.	N	
Integrated teacher - Year 5 - 5 posts of 1PA (5 sessions)	70,000		70,000	N	Y	(69,419)		Recruitment delays	N		Y	Initial appraisals undertaken for those in post. Ongoing evaluation through academic year with formal evaluation at end of Academic year 2022/23.	N	

Integrated teacher – Year 4 – 10 posts of 1PA		140,000	140,000	N	Y	(135,284)		Recruitment delays	N	Y	Initial appraisals undertaken for those in post. Ongoing evaluation through academic year with formal evaluation at end of Academic year 2022/23.	N	
Various IT equipment - GP		4,233	4,233	N	Y	0			Y		Equipment being used	Y	Teaching equipment has allowed staff to continue to teach and provide curriculum deliverables
UG Teacher - Healthcare Improvement	4,667		4,667	N	Y	0			Y		New appointee in January – Delivered two SSC's in Service Learning January and May 2022. Tested out new Health Inequalities teaching with plans in the future to upscale this for all students. Post holder is working in collaboration with Teaching Lead in Public Health and Realistic Medicine Lead to develop Health Inequalities teaching and explore other opportunities.	Y	
IT Equipment - Palliative Medicine		1,545	1,545	N	Y	0			Y		Equipment being used	Y	IT equipment has facilitated online teaching sessions and student participation in meetings
NHS Tayside/ University of Dundee Clinical Skills Teaching Videos		12,000	12,000	N	Y	0			Y	Y	Not yet completed	N	
Trolley for 65" screen		660	660	N	Y	0			Y		The trolley enabled the screen to be fully usable for online learning	Y	Trolley has enabled screen to be portable, and useable in multiple locations within the department. It has also bypassed the need to involve NHST Estates, and therefore avoided installation delays.
Health Psychologist	4,717		4,717	N	Y	0			Y	Y	Initial appraisal meeting undertaken. Fuller evaluation at end of Academic Year 2022/23.	Y	Increased Psychology teaching within MBChB curriculum
iSimulate REALITI Plus kit - Clinical Skills		9,010	9,010	Y	Y	0			Y		The kit was used for Y1 ABCDE teaching this year so the whole year group were exposed to its use in an acute care scenario. The verbal and written feedback on the sessions were very positive and the iSimulate was highlighted as one of the main advantages of the teaching. It has also been used for Y4 teaching, again looking at ABCDE. The verbal feedback was very positive on this as well.	Y	Moving forwards we would look to use it more frequently across ABCDE teaching for all years.
Whiffled GP student led surgery - revised bid equipment only		60,566	60,566	N	Y	0		Delayed start	N	Y		N	
IT equipment - GP		1,019	1,019	N	Y	0			Y		Equipment being used	Y	Teaching equipment has allowed staff to continue to teach and provide curriculum deliverables
Simulation models - ENT		14,802	14,802	N	Y	(14,802)		Late delivery	N	Y			
Simulation equipment - Obs & Gynae		11,982	11,982	Y	Y	0			Y	Y	Will be used in next academic year. New gynaecology emergency simulation session has been added to year 4 Obs & Gynae Block.	N	To ensure equity of training in Obs & Gynae emergencies.
PRI Audio visual kit - Steele lecture theatre		42,000	42,000	Y	Y	0		Delayed installation	N	Y			
PRI Audio visual kit - Gillingham study centre		11,910	11,910	Y	Y	0		Delayed installation	N	Y			Improved AV capability
BMJ Open Quality subscription renewal		7,144	7,144	N	Y	0			Y	Y	Plans to support a range of students to write up their Quality Improvement work for publication. Aim to publish at least 4 papers over the next year.	N	This will showcase the work that students and staff are doing in Tayside raising awareness to a wider audience of the impact students can have supporting clinical teams with improvement.
Y3 Portfolio Lead - Obs & Gynae	5,000		5,000	N	Y	0			Y		Achieved targets of marking portfolios within timeframes, with timely feedback and standardised marking.	Y	1. Achieved marking within the timeframe with feedback to students in a timely manner; 2. Had a smaller group of assessors to deliver constructive feedback; 3. Standardised marking; 4. Had all the 240 portfolios marked.
Seasonal Assessors from GP or Sec Care to assessment/ revision interviews for UG MBChB programme UOD.	42,080		42,080	N	Y	0			Y		OSCE assessments, interviews and portfolio reviews undertaken to support MBChB and Scotgem UG programmes.	Y	Continued assessment, interviews and portfolio reviews across UG programmes
DME 2 additional sessions (was 2 PA request 4PA)	30,000		30,000	N	Y	(24,000)		Deferred start	Y		Been in post for less than 2 months. Has achieved objectives increased attendance at meetings, positive feedback from NES.	Y	More active DME. Objectives ongoing.
Additional 1% pay uplift	120,305		120,305	N	Y	0			N	N/A			
Sustainable Healthcare teacher approved based on additional info	4,556		4,556	N	Y	0			Y	Y			To be appraised in 2023.
			0			0							
			0			0							
Total	388,832	833,357	1,222,289	0	0	(576,543)	0						
Check to section 1						0							









NHS Scotland Medical ACT 2021/22 Accountability Report

NHS Board: Tayside

Section 2c Recurrent Baseline Medical ACT Funding.

Total per Section 1		13,388	325	321	14,033					
Activity	Provider: Select from Drop Down Menu	2020/21 Cost (£000's)	Movement		2021/22 Cost (£000's)	Reason for Movement (Excluding Bids)	Staffing time			
			2021/22 Recurrent Bids (£000's)	2021/22 Other (£000's)			Medical PA	Medical WTE	Clinical Non Medical WTE	Others WTE
AHP	NHS Tayside	51			51				0.95	
Anaesthetics	NHS Tayside	321		34	355		3	0.8		
Cardiology	NHS Tayside	240			240		1			
Child Health	NHS Tayside	498			498		4			
Clinical Skills	University of Dundee	681		38	719		37	1.0	2.0	4.0
Critical Care Medicine	NHS Tayside	6			6					
Dermatology	NHS Tayside	474		1	475			0.5		
Diabetics and Endocrine	NHS Tayside	38			38		1			
Emergency Medicine	NHS Tayside	695		11	706		13	0.05		
ENT	NHS Tayside	251		26	277		2	0.8		
Gastroenterology	NHS Tayside	90			90		1	0.05		
Acute Care	NHS Tayside	2			2		4			
General Medicine	NHS Tayside	591			591		7	0.6		
General Surgery	NHS Tayside	635		(7)	628	Vacancy	5			
Trauma & Orthopaedics	NHS Tayside	320			320		2			
Genetics	NHS Tayside	53			53		2		0.2	
Genito Urinary Medicine	NHS Tayside	29			29					
MFE	NHS Tayside	587			587		2			
Haematology	NHS Tayside	120			120		2			
Healthcare Improvement	NHS Tayside	144	5	1	150		2	0.1		1.0
Histopathology - CLASP	NHS Tayside	4		(4)	0	Discontinued				
Immunology - CLASP	NHS Tayside	6		(6)	0	Discontinued				
Infectious Diseases	NHS Tayside	255		(13)	242	Vacancy	2.5			
Medical School	University of Dundee	714	48	(5)	757	Vacancy	33	3.45		3.1

Mental Health	NHS Tayside	471		6	477		3			
Microbiology	NHS Tayside	0			0					
Neurology	NHS Tayside	226			226		5			
Neurosurgery	NHS Tayside	86			86		2			
Various	NHS Tayside & University of Dundee	496		(141)	355	Vacancies	2		0.05	
Nursing	NHS Tayside	0			0					
Obs & Gynae	NHS Tayside	816	5	37	858		7.8		0.15	
Oncology	NHS Tayside	295		1	296		4			
Ophthalmology	NHS Tayside	222			222		1			
Palliative Medicine	NHS Tayside	178		0	178		7	0.1		
Pathology	NHS Tayside	97	13		110			0.1		
Pharmacy	NHS Tayside	44			44				0.9	
Plastic Surgery	NHS Tayside	18			18		1			
Public Health	NHS Tayside	63	9	5	77		3		0.8	
Radiology	NHS Tayside	52	12	1	65		4.5			
Rehabilitation	NHS Tayside	0			0					
Renal	NHS Tayside	118			118		1			
Respiratory	NHS Tayside	72			72		3		0.05	
Rheumatology	NHS Tayside	215			215		2.5			
Safety	University of Dundee	150			150		1		0.2	
Surgical Skills	University of Dundee	30			30		1			
TILT	University of Dundee	293			293				3.27	
Urology	NHS Tayside	336			336		2	0.1		
GP ACT	University of Dundee	1,881		41	1,922	Increased GMS fees, staff costs	67.5	0.1	0.2	5.65
Non Pay Costs	NHS Tayside	118		8	126	Increased OHSAS costs				
Directorate of Medical Education	NHS Tayside	544	6	48	598		12		9.0	
Inflationary increases			227		227					
					0					
Total		13,626	325	82	14,033					

NHS Scotland Medical ACT 2021/22 Account

NHS Board: Tayside	
Section 3	
a	Local Governance Structure
	Does the Board hold Local Medical ACT meetings?
	Yes. These occur about four times per calendar year and are usu
	Provide brief details of the Board's local governance structur
	Local ACT meetings are usually chaired by the DME, and also att Officer, Medical Education Co-ordinator, and various University of which was reviewed in 2021 as part of the terms of reference revi refined by the ACT Officer before being submitted to the Local AC appropriate. Local meetings are also serviced by NHST DME tear prior to the next Regional ACT Working Group where the bids will agreed with NES towards the end of the 2021/22 financial year th meetings, and then forwarded to NES via email for approval in or
b	Please provide details of any Medical ACT funded activities/i
	During 2021/22 Tayside had some excellent examples of innovati role of Integrated teacher – this new role across the curriculum is clinical teaching, providing a particular focus on Primary Care dur in Clinical Skills which is the first of its type in Scotland. An Immer footage around a simulation. This allows students to be immerse to an ITU. The footage can place them in a remote location or in was able to innovate by the use of Go pro cameras on GP house The final example of innovative teaching was the delivery of Inter modern medicine. Interventional Radiology also lends itself as a c
	Please provide details of Medical ACT funded activities/initial teaching capacity
	The Whitfield GP (Newfield Medical Group) GP teaching hub is a in delivering clinics to patients. This model should make greater u funding for equipment during 2021/22, and will start delivering tea
c	Please provide a brief overview of any opportunities/challeng
	Education The lack of NHS Tayside Estates resources, and the failure to ad delivery of UG teaching projects which have been delayed for ove years makes the in-year funding of capital projects increasingly di numbers have resulted in increasing pressure at every stage, incl rooms and clinical teaching are at full capacity. Further proposed satisfaction, teaching quality, and quality of overall educational ou
	Please provide details of any anticipated future challenges w

	As mentioned above, the lack of NHS Tayside Estates resources teaching resources, and rooms.
d	Please provide details of any anticipated changes to Undergr could impact Medical ACT in your board.
	There has been a new curriculum implemented in Years 1 & 4 this changes have already largely been accounted for in recent bids for year. Increasing emphasis on EDI in Staff Development means w

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ally held two weeks in advance of the scheduled RAWG meetings.

re for Medical ACT and how this feeds into RAWG business

ended by the Deputy DME, an Associate DME, Medical Education Manager, ACT f Dundee representatives. Local ACT meetings also have a quoracy requirement ew. All bids (including re-assignment of sessions and new bids) are reviewed and CT meeting, where they are scrutinised and reviewed before being approved as n admin support. Once approved all new bids are then submitted to NES for review, l be formally discussed and formal approval decisions then made by NES. It was at new bids could be agreed by the DME without holding additional Regional der to spend NHST's 2021/22 ACT allocation.

Initiatives which may be beneficial and/or transferable to other Boards - General

on and best practice which could be shared with other Boards. These included the designed to integrate the Professional Values and Behaviours learning outcomes with ing Year 4. Another example of innovation was the new virtual reality Immersion room 'sion room is a dedicated space which uses 360-degree projection to display video d in any environment during their simulation, from a pre-hospital or community setting the local ward they are currently attached to for their clinical placement. GP teaching calls which will provide useful recording of house visits for future learning and review. ventional Radiology teaching across the UG curriculum and to present its role in good model for anatomy teaching in the early years.

Initiatives which may be beneficial and/or transferable to other Boards for increasing

new concept of teaching whereby groups of 4 students are supervised by a GP tutor se of GP resources and increase teaching capacity. The project received some ACT ching in 2022/23 academic year once the premises have been refurbished.

Issues in year which have impacted on the delivery of Undergraduate Medical

equately address the resulting backlog of works has adversely impacted upon the or 2 years in some cases. The inability to carry forward NHS funding to future financial difficult especially when combined with Estates resource issues. Increasing student uding the increased intake of St Andrews students into Year 3, meaning teaching increases in student numbers will have a significant detrimental effect on student itcomes.

Issues which may impact the delivery of Undergraduate Medical Education

will impact upon the delivery of UG teaching projects, resulting in a shortage of NHS

adequate teaching and/or curriculum in the forthcoming academic year which

s academic year, with subsequent changes planned for Years 2 & 5 in 2023/24. These
or ACT funding, but we will look to expand the numbers of Integrated Teachers this
e will request more funding for this area.

Please Submit to NES a
Information provided sh

Section
1
2A
2A Sup -PY Evaluation
2B
2C
3

**s an Excel File not in PDF Format
ould be from 2021/22**

User Information
<p>Tab summaries, initial allocations offered to the Boards and actual funding received, also for sign off by DoF and DME of Boards and date of RAWG approval</p> <p>1a and 1b are pre-populated by NES based on 21/22 Allocation Letter and Payment on Behalf (POB) payments made to Boards.</p> <p>Signatures - email approval or signature accepted. We will also accept an excel copy without signatures if this is provided with a PDF signed version.</p>
<p>payments from NES.</p> <p>NES will pre-populate columns: B, C, D, E, F, I, L</p> <p>Boards should complete G, H, J, K, M, N, O, P</p> <p>sourced in time, work delayed etc</p> <p>N – Please provide metric results where available</p> <p>O – Anticipated benefits as per bid details</p> <p>P - please provide brief overview detailing why the anticipated benefit was not achieved for example if the equipment did not fulfil the need.</p>
<p>In section 2A we have asked for evaluation details. We acknowledge that evaluation often takes place a year after implementation and can therefore take some time. Information from the evaluation of bids not covered in the Accountability report timeline should be included in this tab.</p>
<p>Tab details of all other spend and slippage of medical ACT in year not either shown in 2a or part opening baseline allocation, i.e. use of additional in year funding not spend on bids as shown on 2a, where the funding has come from- underspend on bid or other health board.</p> <p>All details to be added by Boards</p>
<p>bids per section 1</p> <p>To allow us to pre-populate this section in future years please complete the excel sheet provided, do not attach as an additional sheet.</p> <p>Please use drop downs where provided.</p> <p>Staffing time</p> <p>Medical PA - Consultant/GP PA's</p> <p>Medical WTE - Training grades, Specialty Doctors, CTF's</p> <p>Clinical non medical WTE - all other clinical staff</p> <p>Other WTE - support functions, Admin, Medical ACT officers, education managers</p>
<p>Tab requests details on Local regional ACT groups/practises, new initiatives details, future opportunities/ challenges and future anticipated changes to teaching/curriculum.</p> <p>Please keep the answers to these sections brief and concise. If you have any metric data to support this would be appreciated.</p> <p>challenges.</p>