2018/19 Accountability Report

NHS Board:

NHS Tayside

Note: This report is required to be submitted to your regional group in time for their meeting on: 30/07/2019

Section

		Initial Allocation	2018/19 Total	
		£'000	£'000	
a) ACT Allocation 2018/19		12773	12568	
			2018/19 Total	
	Recurring	Non-Recurring		
	Recurring £'000	Non-Recurring £'000	£'000	
	1			

2)	General narrative on 2018/19 Medical ACT activity within your Board area:	Regio Grou
a)	Health Board Involvement in Regional ACT group Meetings	 Wor Cou
	The health board have consistent engagement with the Regional ACT Group. The DME is chair of the Regional ACT group and at each meeting, the health board is represented by the DME and a Senior Finance Manager. If either representative were unable to attend, a suitable deputy would be identified and would attend on their behalf. During 18/19 this was not required. Under the leadership of the DME a review of the governance and support arrangements for the group was carried out.	82
b)	Decision making process at local and regional level for any new uses of Medical ACT funding	
	All bids submitted to the regional ACT meeting are subject of scrutiny and require approval at the regular local ACT meetings. Local ACT meetings are attended by DME, Deputy DME, Medical Education Manager, Head of Finance - Governance & Assurance/ACT Officer, Medical Education Co-ordinator, Chair of Education for General Practice, Head of Finance UoD, Head of Undergraduate Medicine UoD, Director DIHS UoD, UG Curriculum Manager UoD, Undergraduate Data coordinator UoD. In addition to these local ACT meetings there are a number of operational meetings involving a number of stakeholders including the ACT Officer to dicuss a variety of undergraduate issues.	100
c)	Detail of any new initiatives funded by Medical ACT within the last 12 months	





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*GP Training Champion, a conduit between students undertaking LICs and NHS Tayside liaising with clinicians and service managers to facilitate students' attendance at for example OPD, acute receiving services, surgical sessions, investigations/procedures, pathology/microbiology etc.

*A senior Allied Health Professional (AHP) undertaking the role of OSCE examiner for exams during the System in Practice (SiP) Years 1-3 MBChB.

*Purchase augmented and virtual reality equipment to enhance the teaching of clinical skills, strengthen students understanding of anatomy and its role in clinical skills and support teaching of the evolving need to use ultrasound in patient assessment.

*Purchase of equipment (Laerdal crash kelly manikin, a 'Life/form' chest tube insertion manikin and a Cricothyrotomy training model).

*Creation of a visual and interactive education resource for medical students. Human interaction/communication and user-centred design depends highly on sensory perception (vision, hearing, taste, smell, touch and proprioception). There is currently no single education resource that brings the anatomy, physiology and pathology of human sensation under one umbrella.

*Subscription to BMJ Open Quality which allows unlimited papers to be published over a year. This links into the undergraduate Healthcare Improvement curriculum and enables students to improve their publication writing.

*Purchase of 10 tablets/iPads for medical students to use when undertaking their patient shadowing experiences allowing them to use different methods of collecting the necessary data for their case discussions.

*New role for Interprofessional Education (IPE), who will lead the development and running of the IPE theme across all 5 years of the MBChB curriculum, ensuring that IPE is embedded within revisions of the curriculum.

*PiP deputy – scotgen y3 & 4 lead (bringing forward an appointment budgeted to commence in 2020/21 in the ScotGEM financial model). Appreciating the complexity of the challenge and lead times associated with ScotGEM planning Dundee medical school sought to bring this appointment forward. This was non-recurrent as salary costs would transfer to ScotGEM in line with the finance model. 2pa NHST 2pa UoD

*Spiritual Care Team Lead delivering education and support to medical students. The sessions delivered on Values Based Reflective Practice (VBRP), Mindfulness, Bereavement, Grief and Loss, Communication Difficult Conversations, as well as shadowing opportunities and informal teaching/consultation.

d)

General use of Medical ACT funding within health board area for improvement of teaching.

ACT funding provides a comprehensive range of face to face teaching and funds the purchase of necessary equipment. Our Clinical Skills centre provides an authentic and immersive simulated clinical experience for students from the beginning of first year onwards and is also the location for our OSCE exams. Our TILT resource develops and maintains our virtual learning environment and ensures consistently high quality educational materials including developing video and other novel approaches like virtual reality.

3) Detail Funding Confirmation 2018/19

Confirmation that your Board have used the 2018/19 additional funding as agreed by NES (details to include full summary that reconciles to submissions to NES) or identify any changes made in-year.

Obs & Gynae examination skills 2 additinal sessions £10k, GP training champion £10k, OSCE examinaer - AHP £5k, Clinical Skills VR equipment £8k, Acute care equipment

ACT Officer

Section



	£5k, BMJ subscription £7k, 10 tablets for medical students £2k, IPE lead role £15k, PiP deputy Scotgem year 3&4 lead £20k, Spiritual care lead £5k, flexible desk for converting meeting room to teaching room £2k, Creation of a visual and interactive education resource for medical students for human senses £3k
	For each item of additional expenditure; Based on the benefit criteria identified please detail the results of any evaluation/review undertaken or other assessment of the fitness-for-purpose of this expenditure and confirm that this investment is to continue in future years.
	Evaluations not available at this point given timing of approval for spend.
c)	Please attach a revised base-line budget for 2018/19 which reconciles to your 2017/18 base-line budget submitted to NES plus the additional recurring funds received in year.
	please see additional tab for budget

Regional Group

ACT Officer

4)	Use of Measurement of Teaching Data and Financial Allocations					
	Please refer to: http://www.scotlanddeanery.nhs.scot/trainer-information/medical-act/medical-act-performance-management-framework/					
a)	Please provide a breakdown of your Boards 2018/19 ACT allocation by specialty/department or other clinical service grouping used locally. This should reconcile to the total ACT funds identified in 1a above.					
	per table below					
b)	Please detail the number of ACT funded teaching sessions identifiable in job plans (shown by consultant and other teaching staff) in each specialty/department or other clinical service grouping detailed in 4a. Please use the template provided.					
	At a minimum this should include all sessions funded from all ACT funding provided to the Boards since the NES allocation model was introduced, however, if possible this should show all sessions funded from total ACT funds set out in 1a.					
	The table below can be used to provide the information requested in 4a and 4b but amended as necessary to suit local circumstances.					

Regional Group

Specialty/ Department	ACT funding received in 2018/19 £'000	ACT Funded PAs (consultants)	ACT Funded PAs (other staff)	2017/18 MOT hours Cat A (if available)	2017/18 MoT Hours Cat B (if available)
Acute Care	121	2		1,705	30.5
AHP	57	4.5			929.3
Anaesthetics	459	3		3,548	3,434.7
Audiology	12			-	201.5
Cardiology	129	1		-	2,106.0
Child & Adolescent Psychiatry	18			-	292.5
Child Health	643	4		4,861	4,930.5
Clinical Pharmacology	9			-	145.3
Community Medicine	16			118	132.5
Critical Care Medicine	22			118	218.5
Dermatology	324	5		2,940	1,916.2
Diabetics and Endocrine	43	2		39	655.0
Emergency Medicine	449	11		5,096	1,505.8
ENT	253			1,784	2,086.3
Forensic Psychiatry	50			-	816.5
Gastro	131			274	1,819.5
General Medical Practice (mostly TB2)	287	2			4,664.0
General Medicine	879	9		9,408	3,581.2
General Surgery	867	13		9,957	2,765.7
Genetics	61	4		39	952.2
Genito Urinary Medicine	34	1		-	550.0
Geriatric Medicine	409	7		2,979	3,267.0
Haematology	110	2		-	1,786.5
Histopathology	8			-	131.3
Immunology	19			-	310.7
Infectious Diseases	171	1		1,450	1,137.5



Learning Disability Mental Health	29	l I			
	423	1		3,606	464.5 2,771.0
Microbiology	11	3		39	127.2
Neurology	275	6		2,822	1,265.0
Neurosurgery	66			39	1,026.0
Not Populated	12			-	192.0
Nuclear Medicine	23			_	381.0
Nursing	5			_	88.0
Obs & Gynae	577	6	1	5,410	3,221.8
Old Age Psychiatry	70	-	'	-	1,134.5
Oncology	208	3	1	2,117	977.5
Ophthalmology	216			1,862	1,389.0
-		•		.,002	102.0
Oral & Maxillo Surgery	6			_	102.0
Other - TILT	27		2		176.0
Palliative Care	86	4		118	1,273.5
Pathology	7			-	114.0
Pharmacy	24		5.2		396.5
Plastic Surgery	46	1		39	697.0
Psychotherapy	4			-	66.0
Public Health	228	1		-	3,711.0
Radiology	151	2		-	2,454.4
Rehabilitation	44			-	711.0
Renal	74	1		39	1,157.3
Rheumatology	164	2		1,411	1,069.5
Thoracic Medicine	74			· -	1,208.5
Trauma & Orthopaedics	234	0			2,071.8
Trauma & Ormopaedics	234	2		1,529	
UoD Specialties	528	37	17.8	431	8,098.2
Urology	137	3		1,254	793.5
Vascular Surgery	4			39	14.0
GP ACT	1572				
Other non pay costs	564				
Medical Education	463	12	10		
Other non teaching pay costs	967				
Totals	12900	159	37	65,307	77,518

versity of Dundee has been chosen as a joint lea				
me (SCOTGEM). It's a four year programme for a nd GP practices. ent Dundee 5 year MBChC curriculum is underg I students, and to mitigate the risk of a "bulge ye ence in 2022. There are also likely to be related of ad over the next two years.	oprox 55 students per year, s ing a review at present, drive " when students opt not to d	starting in the academic year 201 ven in the part by the need to prov do an intercalated degree to avoid	8/19. Work is ongoing to ma ide increased capacity in yea I the forthcoming UK medica	anage capacity issues in ars 4 and 5 to accommo al licensing exam which
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rector of Finance		-		
rector of Finance				

Director of Medical Education

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Date:	

Note: DoF and DME signature and date must be obtained prior to report submission to Regional ACT Group & NES

	2017/18 budget	adj	2018/19 budget
notional	7,582,424	-	7,582,424
DoME	539,960	- 30,658	509,302
Clincal Skills	551,801	-	551,801
GP Act	1,595,808	- 24,283	1,571,525
IT	263,482	-	263,482
Pharmacy	36,184	-	36,184
Teaching Leads	609,295	- 55,793	553,502
Miscellanous - Pay	1,008,730	56,217	1,064,947
Miscellanous - NonPay	431,471	-	431,471
unallocated funding allocated	ation	208,000	208,000
Total	12,619,155	153,483	12,772,638
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