

NHS Scotland Medical ACT 2020/21 Accountability Report

This report is required to be submitted to your regional group in time for their meeting on:

Enter date

NHS Board: Lanarkshire

Reviewed by

SECTION 1 Confirmation of total Medical ACT funding received from NES during 2020/2021

	Initial Allocation Per allocation letter £'000	2020/21 Total £'000	ACT Officer
a ACT Allocation 2020/21	3736	3751	

	Recurring £'000	Non-Recurring (b/fwd. from previous year) £'000	2020/21 Total £'000	ACT Officer
b Use made of 2020/21 additional allocation	396		396	

The redevelopment proposed in the 20/21 allocation which was approved in January / Feb 2021 has been through board processes and tendering, construction forms appointed and the works are in progress, due to construction material supply challenges the works are currently 6 weeks behind schedule but we still hope to achieve completion in time for the start of the academic year 21/22. Details of the background to the allocation are as follows: The Medical Education and Training centre (METC) was initially developed in 2009 /10 at the Kirklands Hospital site. This provided NHS Lanarkshire with state of the art Simulation and Clinical skills facility which has enabled the department and teams across the board to develop and deliver a wide range of local, regional and national courses. We have significantly increased our provision of medical school undergraduate places from our 3 partner universities, provision of work experience events such as medical student for the day as well as deliver postgraduate training events for trainees and Trainers alike. This ensured we developed and supported for Lanarkshire from school through to career grade for the a future workforce. As the delivery of healthcare is becoming more multidisciplinary so we evolve our teaching and learning and offer a range of multidisciplinary events for students and staff groups for the NHS Lanarkshire workforce

This business case sets out the proposals for works to upgrade and redevelopment of the existing theatre Lecture theatre space / provision at METC.

We require more flexible teaching and learning spaces to deliver courses and programs for a range of staff and students, as well as further office space to release training rooms currently being used as office accommodation. The accommodation situation had arisen prior to Covid 19 pandemic, but has being significantly worsened by the necessary IPC precautions that have resulted. It is recommended that this is achieved through internal redevelopment works of the lecture theatre space and creation of open plan office area (with screens)

The attached business case details further information. The costs are high level at present. The redevelopment of the Lecture at METC to provide increased training and office accommodation has a projected completion of the beginning of the next academic year. It is essential that NHS Lanarkshire develop and sustain modern Simulation and Clinical Skills facilities for undergraduates, postgraduates and Trainers. Recent Covid 19 implication has increased the pressure for accommodation and the requirement that we continue to deliver training safely meeting Infection control and prevention requirements. We have the support of the Medical Directors and colleagues in the estates and finance departments. The Business case has progressed through our Board Capital Investment group and has been approved, including to go to tender once we have approval from NES. We have the support of the WOS regional group for our plan to fund this over 2 years of uplift . The remainder will be funded from the department, once exact costs are known. It is acknowledge that METC is used by undergraduate, postgraduate and Trainers in medicine and increasingly other healthcare professions as we work together we need to learn together. The redeveloped space and the staff using the office space (Clinical skills staff and Clinical Teaching Fellows) will be used by undergraduate medical students in excess of 50% of the time, especially if and when we on longer have access to the Louisa Jordan at SECC. The DME has had initial conversations with the DME of NHS GGC and confirmed we are keen to work collaboratively and we are represented in thr GGC SLWG.

c Provide detail of any in year ACT slippage received in 2020/21 from out with own health board

In 2020/21 NHS Lanarkshire received no ACT slippage from other health boards

NHS Scotland Medical ACT 2020/21 Accountability Report

NHS Board: Lanarkshire

SECTION 2 **General narrative on 2020/21 Medical ACT activity within your Board area:**

		Regional Group	
a	<p><i>Detail Health Board Involvement in Regional ACT group Meetings including:</i></p> <p>1. Roles/job titles who represent Health Board at RAWG 2. How attendance at RAWG is managed if staff are unable to attend i.e. use of deputies</p>	Word Count	
	<p>The health board have consistent engagement with the Regional ACT Group. At each meeting, the health board is represented by the DME and a Senior Finance Manager. If either representative is unable to attend, a suitable deputy is identified and will attend on their behalf. The Head of Medical School, University of Glasgow Medical School attends our Medical Education Governance group which is co- chaired by DME and Medical Director Acute services, undergraduate teaching and experience is a standing item on this agenda. The DME reports to the Board directly twice yearly, and to various committee's within the Board governance structure as appropriate. Regular email and phone contact with appropriate schools allow interim business to be dealt with in a time appropriate manner. Including for Glasgow University reviewing the quality data on a block by block basis such that we can address any concerns immediately and review progress in year</p>		150
b	<p><i>Detail decision making process at local and regional level for any new uses of Medical ACT funding e.g. local governance structure and how it feeds in to regional level.</i></p>		
	<p>The local decision-making process for any new uses of Medical ACT funding takes place at our local meetings were attendees include: Hospital subdean, associate and deputy Directors of Medical Education, Teaching Lead(s) and education centre manager, as well as the medical education manager. The DME has meetings with the management accountant (deputy director of finance, as do other members of the local ACT team on an ongoing and regular basis to ensure the local governance of the ACT spend. The DME meets with the Medical Director regularly. ACT funding and spend are part of the overall local governance processes for Medical education which are embedded in the board structures. All decisions at a regional level are made following consultation with our regional ACT officer followed by discussion and approval at the regional ACT group meeting which are now attended by a NES representative(s). In addition, there are monthly operational meetings between the curriculum team, health board management, DME/UG DME and ACT Officer to discuss a variety of relevant undergraduate issues including: the appropriate use of ACT funding, Red-Amber-Green reports and all other available forms of student and tutor feedback, MoT requirements and job planning.</p>		194
c	<p><i>Detail any new initiatives funded by Medical ACT only within the last 12 months</i></p>		
	<p>The major piece of work funding Medical ACT this year for the board was the following. This was a capital bid, which will provide substantial benefit to the board to facilitate the delivery of current and new programs of teaching and learning over coming years, and will allow the board to meet the demands of evolving curricula, additional medical student numbers and new and enhanced learning technologies and methodologies. The background to this development is summarised here: The Medical Education and Training centre (METC) was initially developed in 2009/10 at the Kirklands Hospital site. This provided NHS Lanarkshire with state of the art Simulation and Clinical skills facility which has enabled the department and teams across the board to develop and deliver a wide range of local, regional and national courses. We have significantly increased our provision of medical school undergraduate places from our 3 partner universities, provision of work experience events such as medical student for the day as well as deliver postgraduate training events for trainees and Trainers alike. This ensured we developed and supported for Lanarkshire from school through to career grade for the a future workforce. As the delivery of healthcare is becoming more multidisciplinary so we evolve our teaching and learning and offer a range of multidisciplinary events for students and staff groups for the NHS Lanarkshire workforce</p> <p>This business case sets out the proposals for works to upgrade and redevelopment of the existing theatre Lecture theatre space / provision at METC. We require more flexible teaching and learning spaces to deliver courses and programs for a range of staff and students, as well as further office space to release training rooms currently being used as office accommodation. The accommodation situation had arisen prior to Covid 19 pandemic, but has been significantly worsened by the necessary IPC precautions that have resulted. It is recommended that this is achieved through internal redevelopment works of the lecture theatre space and creation of open plan office area (with screens)</p> <p>The attached business case details further information. The costs are high level at present. The redevelopment of the Lecture at METC to provide increased training and office accommodation has a projected completion of the beginning of the next academic year. It is essential that NHS Lanarkshire develop and sustain modern Simulation and Clinical Skills facilities for undergraduates, postgraduates and Trainers. Recent Covid 19 implication has increased the pressure for accommodation and the requirement that we continue to deliver training safely meeting infection control and prevention requirements. We have the support of the Medical Directors and colleagues in the estates and finance departments. The Business case has progressed through our Board Capital Investment group and has been approved, including to go to tender once we have approval from NES. We have the support of the WOS regional group for our plan to fund this over 2 years of uplift. The remainder will be funded from the department, once exact costs are known. It is acknowledge that METC is used by undergraduate, postgraduate and Trainers in medicine and increasingly other healthcare professions as we work together we need to learn together. The redeveloped space and the staff using the office space (Clinical skills staff and Clinical Teaching Fellows) will be used by undergraduate medical students in excess of 50% of the time, especially if and when we no longer have access to the Louisa Jordan at SECC. The DME has had initial conversations with the DME of NHS GGC and confirmed we are keen to work collaboratively and we are represented in the GGC SLWG.</p>		595
d	<p><i>Detail use of Medical ACT funding within health board area for improvement of quality of teaching.</i></p>		
	<p>The year 20/21 has been a challenging year for all due to the ongoing COVID 19 pandemic, however NHS Lanarkshire has maintained the delivery of undergraduate teaching within the appropriate restrictions, we have been able to ensure the delivery of all curricula objectives, albeit that in common with many boards the case mix may have been affected by the patient populations presenting and able to be cared for during the various stages of the pandemic. The need to provide interim Foundation year 1 posts to support service during Covid proved invaluable from many perspectives. Whilst a huge amount of work for all involved, it saw unprecedented collaboration between universities, NES, GMC and Scottish Government colleagues with ourselves in NHS L and all boards. The FY1 role proved to be immensely valuable for both the young doctors and for the service both in terms of practical support but also learning. The doctors benefitted from a very well supported immersive experiential learning experience of their future roles. We introduced many initiatives using a range of ACT funded resources both fixed equipment and staff. Many of these initiatives will look to be embedded in the future. The FY1 work saw collaborative work locally between subdeans, Foundation program directors, supervisors and DDME's, who whilst always working together, collaborated to produce a transition experience which we hope to replicate going forward, and to embed into a clinical years teaching.</p> <p>We recognised that the delivery of the clinical years 3-5 were going to be challenging and complex with the anticipated (and actual) 2 and 3rd waves experienced by the country and central belt boards in particular. As a result we developed an intensive, immersive learning environment based on a foundation of an apprenticeship model. There was a deliberate move to minimise group teaching both respecting the prior learning in the pandemic of the students and to respect restrictions in the healthcare environment. The students were assigned a buddy (FY1/ 2), a student educator/mentor (CMT/IMT or equivalent and above) and Educational Supervisor per student. To support this our CTFs were in place to oversee the process and guide / support as well as develop Individual Learning Plans for each student on a weekly basis and draw up a resource of learning opportunities mapped to ILOs which can be shared with students and educators</p> <p>In some area we did require to split students into shifts and this had been prior approved by the universities. Where tutorials remained necessary then this was delivered over teams/zoom as long as no patient identifiable data is shared. Despite this we had significant pressure on accommodation is all of our 3 sites.</p> <p>I would formally like to thank the huge effort from not just Medical education staff, CTF's etc., but all the multidisciplinary staff on the acute sites led by the senior Management team. This level of support and commitment to continue to deliver undergraduate training despite the hospital dealing with unprecedented levels of activity particularly in Jan-March 2021 was exemplary and beyond any expectation and should be commended and recognised. Many staff were working in unfamiliar areas / under redeployment yet still supported medical undergraduates. The students themselves were enthusiastic, committed and engaged well with the teams and were valued during these attachments.</p> <p>To facilitate this and to maximise teaching opportunities we were able to train and support postgraduate trainees into being mentors / student educators. This is a formalisation of a role that many will undertake naturally. We are applying to the Academy for accreditation of this teaching program. This will meet their requirement for R o T when they are applying for and moving to career grade posts on completion of their training. It will give them excellent skills, confidence and enhance their CV.</p> <p>We continued to deliver our wide range of simulation and clinical skills courses both at METC, Kirklands Hospital as well as supporting a range of courses at Louisa Jordan with colleagues from NHS GGC and NES. Two courses are particularly note worthy are the Psychiatry simulation course and the Paediatric simulation course, both of which are innovative and appear to be highly valued by the students.</p> <p>We have continued to work on our MOT project and our other data sources so that we can increasingly reconcile going forward the allocation of general ACT monies to job plans and teaching activity as well as central infrastructure, administration and governance structures. We involved additional departments in this project, despite the Covid 19 the work was resumed and the Scottish Clinical Leadership fellow has completed significant work in this area. The DME is part of the senior managers group as well as regular AMD and site Chiefs meeting, this allows education to be given high profile such that there is continued high profile of education and the recognition of this in job plans, and ensuring the delivery and experience of undergraduate teaching remains high quality and improves as appropriate</p> <p>The developments over recent years, particularly ensuring that we had a lead in every department that undertook teaching has allowed us to ensure that undergraduate teaching has a suitably high profile in all areas needed, This linked with the large range of quality improvements in medical education generally has resulted in excellent undergraduate teaching data both in the NES data for the main DME report and the schools individual data. In the NES data set this year we had a very leave number of green flags in all fields, and very pleasingly we again had departments with 100% green flags / data sets. We have and continue to work across the board area with clinical leads to ensure that block leads / co-ordinator have or work toward specific time in job plan for this activity.</p> <p>Primary care continues to be an area we are focussing on, seeing it as integral to our strategic aims of developing schools pupils through our Next gen programs, delivering undergraduate education locally and further into postgrad training and subsequent career posts in the board area. The initial pilot work has been very encouraging and whilst interrupted by Covid we feel we are in a strong position to adapt to the new learning environments(s)</p>		1021

NHS Scotland Medical ACT 2020/21 Accountability Report

NHS Board: Lanarkshire

SECTION 3 Detail Funding Confirmation 2020/21

a Confirmation that your Board have used the 2020/21 additional funding as agreed by NES (details to include full summary that reconciles to submissions to NES) or identify any changes made in-year.

ACT Officer

Proposal/item description	Unit cost (£)	Capital (Y/N)	Recurring (£)	Non-recurring (£)	Total (£)	Implemented? (Y/N)	Slippage (£)
Development of METC to meet Expanded Undergraduate teaching Program and Changes due to Covid 19. Agreement with NES to utilise additional uplifts across financial years 2020-21 and 2021-22 to provide capital cover for project. Work partially complete in 2020-21. £396k in 2020-21, with further £396k in 21-22.		Y		£396,000 in 2020-21	£792,000	Partially. Total reflects uplift based on 2020-21 allocation.	

b) Provide detail below for each item of additional expenditure;

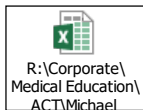
Regional Group

Proposal/item description	Has an evaluation/ review been undertaken? (Y/N)	If yes, details results of evaluation/review	If no, detail why	Is investment to continue in future years?

c) Please attach a revised base-line budget for 2020/21 which reconciles to your 2019/20 base-line budget submitted to NES plus the additional recurring funds received in year.

ACT Officer

Enter details.....



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NHS Board: Lanarkshire	
SECTION 4	Use of Measurement of Teaching Data and Financial Allocations
Please refer to https://www.scot.nhs.uk/education/medical-act/medical-act-performance-management-framework	
a	Please provide a breakdown of your Boards' 2020/21 ACT allocation by speciality/department or other clinical service grouping used locally. This should reconcile to the total ACT funds identified in 1a above. As noted in 4a the DME, Undergraduate DME and our Scottish Clinical Leadership Fellows have been working on models to identify ACT sessions in job plans. Whilst we do not routinely fully roll over our ACT costs by the requested speciality / department as requested, as we undertake the work through the process highlighted in 4a and recently agreed with Medical Directors of Acute and Primary Care Divisions we should in the same process be able to present the ACT funding fully for this section. For University of Glasgow the data is presented via site and department as ACT funding (table in 4b) however the data for other partner schools is not as complete, as shown. The Clinical Teaching Fellows are fully (100%) Medical Education roles in Lanarkshire with 1 or 2 sessions given to maintain clinical skills. Currently these are group mainly by site, they are shown below as a total, we will undertake review of their job plans to allocate by department.
b	Please detail the number of ACT funded teaching sessions identifiable in job plans (shown by consultant and other teaching staff) in each speciality/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. Please find below the ACT funded sessions that we are able to confirm are in job plans at this present time. We are undertaking a project on Measurement of Teaching and reconciliation to be able to identify all undergraduate / ACT funded sessions in job plans. The DME, Undergrad DME and our Scottish Clinical Leadership Fellows over the last 2-3 years have been developing and piloting models to look at this accurately and efficiently and in a way acceptable to all involved - service, management, clinical colleagues, HR and external including BMA in our initial project via job planning tools. We have reached a stage where we are able to start to work with individual departments confident with our models, have been able to triangulate different approaches and identify sessions funded by ACT both pre and post NES allocation model. The DME met recently with senior management colleagues and gained approval to approach site chiefs of medicine and department CDOs to take this work forward. Unfortunately this step has been delayed by COVID.

Speciality/ Department	ACT funding received in 2020/21 £'000	ACT Funded PAS (consultants)	ACT Funded PAS (other staff)	2019/20 Mot Hours Cat A (if available)	2019/20 Mot Hours Cat B (if available)
DME	26.78	2			
Deputy DME	40.17	3			
Subdeans (Glasgow/ Edinburgh/ Dundee)	53.56	4			
Lead Clinical Trainers - A&E	107.12	8			
Lead Clinical Trainers - Anaesthetics	40.17	3			
Lead Clinical Trainers - Care of the Elderly	13.39	1			
Lead Clinical Trainers - Medicine	40.17	3			
Lead Clinical Trainers - Obs & Gyn	26.78	2			
Lead Clinical Trainers - Renal	40.17	3			
Lead Clinical Trainers - Respiratory	6.70	0.5			
Lead Clinical Trainers - Surgery	13.39	1			
Lead Clinical Trainers - T&G	26.78	2			
Lead Clinical Trainers - Old Age Psychiatry	6.70	0.5			
Lead Clinical Trainers - Well Being	13.39	1			
Lead Clinical Trainers - Well Being Fixed Term	26.78	2			
Lead Clinical Trainers - Primary Care	26.78	2			
Consultant Teaching - Psychiatry	26.78	2			
Consultant Teaching - Medicine	13.39	1			
Undergraduate Co-ordinator in ENT	6.70	0.5			
Undergraduate Co-ordinator in Paediatrics	6.70	0.5			
Undergraduate Co-ordinator in Medicine	13.39	1			
Undergraduate Co-ordinator in Surgery	13.39	1			
Lead Clinical Trainers - Paeds	66.95	5			
Clinical Teaching Fellows	979.43		12		
Clinical Skills Consultant	93.73		0.7 WTE		
Senior Clinical Skills Specialist	91.83		2 WTE		
Clinical Skills Specialist	118.25		2.8 WTE		
Clinical Skills Technician - Band 5	37.08		1 WTE		
Clinical Skills Technician - Band 4	65.92		2 WTE		
Business Support Manager	37.08		0.8 WTE		
Admin Support - Band 5	37.08		1 WTE		
Admin Support - Band 4	187.54		6.3 WTE		
Admin Support - Band 3	39.73		1.33 WTE		
Centrally funded initiatives					
General practice / Primary Care	447				
Totals	2796.33				

SCHOOL	SITE	SPECIALTY	ACT Funding	Glasgow Allocation 20.21		Category	Category B Hours	Tot Hrs	hours/ site
				ACT PAS - Consultant	ACT PAS - Other				
UOHSMS	No Site Spec		87733				993	998	92
UOHSMS	Lanarkshire	Diagnostics	23724				259	299	92
UOHSMS	Kirkcaldy	Ana/Resus/Skills	108454				1184	1184	92
UOHSMS	Kirkcaldy	Other	4095				44	44	92
UOHSMS	HH	No Spec	13419				146.5	146.5	92
UOHSMS	HH	EmerMed	150750			1116	663	1079.5	92
UOHSMS	HH	Medicine	239717			2183	434.5	2617	92
UOHSMS	HH	MRK	86669			873	39	396	92
UOHSMS	HH	Opth	99368			912	173	1084.8	92
UOHSMS	HH	Surgery	221992			1989	435	2423.5	92
UOHSMS	HH	No Spec	14959			0	203	203	92
UOHSMS	HH	EmerMed	178528			1455	484	1949	92
UOHSMS	HH	ENT	111278			912	393	1214.8	92
UOHSMS	HH	Medicine	284005			2528	772.5	3100.5	92
UOHSMS	HH	Surgery	177658			1407	533	1939.5	92
UOHSMS	Lanarkshire	Psychiatry	129156			1164	246	1410	92
UOHSMS	WGH	No Spec/Other	13984			0	149.5	149.5	92
UOHSMS	WGH	Paeds	222268			1874	892	2426.4	92
UOHSMS	WGH	EmerMed	152010			1407	263	1659.5	92
UOHSMS	WGH	Medicine	222450			1989	440	2428.5	92
UOHSMS	WGH	MRK	118503			1116	179	1294.5	92
UOHSMS	WGH	OB&G	203306			1795	425	2219.5	92
UOHSMS	WGH		187268			1761	389	2154.5	92
UOHSMS	WGH	Surgery	306646			24010.5	8501	53811.5	92
GP ACT			468147						

NB £10k extra added non-recurring from Regional slippage to accommodate COVID related curriculum changes.

Subject	Year	No. of Students	Edinburgh Allocation 19-20					Grand Total
			Block 1	Block 2	Block 3	Block 4	Block 5	
Medicine	Year 6	1	36	36				72
Psychiatry	Year 6	1	12	12	12	12	12	72
Student Ambassadorship Placements	Year 6	1	24					24
Chng Life and Health	Year 5	1	12	12	12	12	12	72
Psychiatry	Year 5	1	12	12	12	12	12	72
			72	96	36	36	36	312

Lanarkshire	Student Placement Weeks	Category B Teaching	Dundee Allocation 19-20													
			Type 1	Type 2	Type 3	Type 4	Type 5	Type 6	Type 7	Type 8	Type 9	Type 10				
	154						5							168	Total	Prep Time
														173		5

Student placement weeks = 36 students for 10 blocks in Gen Med at Wishaw General
 Type 5 - 3 hrs in Site Supervisor's Assignment Marking - Block 1+2 - 1 Student
 Type 10 - Site Supervisor 14 and 15

Category A Hours are just your placement weeks by speciality multiplied up by the NES figure for hours per week. In the 20-21 allocation letter they gave this as 9.7 hrs. per week. This has been used as the proxy for this column.
 There was no MOT data collection for the last period because of the impact of COVID. As agreed the MOT submission was the same as 19-20 with substantive changes.

The table here represents
 - Updated Category B (teaching youth clinical placements) if applicable
 - actual and planned clinical placement numbers

As usual this data only includes Glasgow elements - teaching from SCOTGEM and other Schools still needs to be added AND any new information on funded Pas included within the table.

The Cat B adjustments reflect new recurring roles - Pastoral Care/GenPsych and Primary Care Pas

NHS Scotland Medical ACT 2020/21 Accountability Report

NHS Board: Lanarkshire

SECTION 5 **Detail any new initiatives being planned or you hope to achieve using Medical ACT funds within forthcoming year.**

We are entering Year 2 of our upgrade and development of our Medical Education and Training centre at Kirklands Hospital as per our ACT bid for this year and 19/20. This will create more flexible teaching and learning spaces to deliver courses and programs for a range of staff (faculty) and students, as well as further office space to release training rooms currently being used as office accommodation. The accommodation situation had arisen prior to Covid 19 pandemic, but has being significantly worsened by the necessary IPC precautions that have resulted. This is being achieved through internal redevelopment works of the lecture theatre space and creation of open plan office area (with screens). We are aiming to open the redeveloped centre in August 2021 in time for the start of the academic year, however timelines have lengthened due to building material supply issues, experienced by most at this time (April- July 2021). We are aiming to take forward our program(s) of Psychiatry simulation for our undergraduates. We have been and will continue to the regional delivery of the Paediatric Simulation program. The challenges from the COVID 19 pandemic are by no means over and our successful changes to undergraduate teaching and learning delivery will be further embedded, reviewed and further developed as required by the feedback. We are aiming to install single "phone booth" type sound proofed spaces for undergraduate students to undertake either virtual consultations or learning on at least 2 of our 3 acute sites. We hope to continue to take forward our development of teaching in primary care and increase the number of placement offered at undergraduate level with support for practices based on our learning from current evaluation. We ran a very successful program of reflective based sessions for both interim FY1 and FY1 in the 20/21 year and these have evaluated very well. This work will continue as we work to support the transition of colleagues from undergraduate to postgraduate trainee, this work is introduced in Preparation for practice to enable greater understanding and benefit during the transition into FY1, and would benefit from the medical schools co-ordinating in time there similar curriculum allocation to this, such that all boards were more likely to have a greater number of trainee who would start FY1 in their board.

The continued and improving quality of Medical education in NHS Lanarkshire provides an opportunity to develop additional undergraduate places in the area, working with partner universities

Signed:

Print name:

Director of Finance

Date:

Signed:

Print name:

Director of Medical Education

Date:

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