

## Medical ACT Allocations 2026/27: Information for Boards

### Part 1: Summary of Changes for Implementation during 2026/27

#### 1. Reserved Funding

For 2026/27, £2m has been reserved from the Medical ACT budget prior to application of the Medical ACT allocation model. This will reduce the likelihood of funding being returned to Scottish Government in year and will be used to support the following:

- Administration support for the Scottish DME group as a recurring commitment.
- Funding for the NHS Scotland Academy (NHSSA) Senior Leads posts for the third year of attraction to medical careers and widening access projects in Boards. This funding was agreed, following a request from Scottish Government and support from NES Board in 2024/25.
- Development of resources coordinated by the LUMES group to support widening access. This was originally approved for funding during 2024/25 but was not allocated until 2025/26 when a payment of £41,208 was made, with a subsequent payment of £36,460 in 2026/27.
- £1.3m has been committed to support the impact of University of Glasgow curriculum changes in 2026/27 on a non-recurrent basis.

<b>Reserved Funding</b>	<b>Funding</b>
NHSSA Widening Access posts (3*8a costs)	263,161
Administration support for Scottish DME Group	26,290
Development of Widening Access Resource (LUMES)	36,460
Curriculum change (double running) Top Sliced costs	1,300,000
Supporting Boards' baseline with smoothing	374,089
<b>Total Reserved Funding</b>	<b>2,000,000</b>

**Table 1:** Proposed Reserved Funding Projects for 2026/27

#### 2. ScotGEM Programme

ScotGEM funding is allocated to Boards via the allocation model in line with other Primary Medical Qualification programmes. An exception to this is funding for the Year 3 LiC students, which is allocated in a similar way to Years 1-3 of Edinburgh HCP-Med programme (see below).

#### 3. Edinburgh HCP-Med and ScotGEM LiC Students

The 2026/27 allocation detailed does not include funding for students within Years 1-3 of the Edinburgh HCP-Med programme or ScotGEM Year 3 LiC students; these allocations will be notified to relevant Boards once placements have been confirmed to PSD Scotland by the programmes, as has been the

case in previous years. Health Boards are not required to raise bids for this funding. Funding for students in the later years of HCP- Med programme and ScotGEM will be incorporated into the model as usual.

#### **4. Primary Care Funding**

Medical ACT continues to receive funding recurrently from the Primary Care Division of Scottish Government (SG) to support patient centred teaching (Category A) within GP placements. For 2026/27, this will amount to £3.8m.

#### **5. Pay Inflation**

This will be allocated separately to Boards once pay agreements are in place, as in previous years. Pay inflation is only awarded for secondary care posts, however the Medical ACT team continues to raise with SG the issue of inflationary pay awards for primary care staff.

#### **6. Release of Additional Funding/Medical ACT Bids Submission**

Any Board in receipt of an increased allocation compared to the 2025/26 baseline allocation is required to follow the Medical ACT bids process to release additional funding. All such bids should be submitted through the Medical ACT Bids App, including those for the new ScotCOM programme. However, pending a technical solution which needs to be developed by PSD Scotland Digital, all ScotGEM related bids should still be submitted using the existing Excel format (same rules and timelines apply) until further notice.

Boards should refer to Appendix A and B for full details of the agreed bids submission process for 2026/27, which includes key dates and expected response times from PSD Scotland

#### **7. Deadlines for Use of Funding In-Year**

The deadline for use of Board funding in year will be 28<sup>th</sup> September 2026. Thereafter bids can still be created, however the available funding will move to a national position. National bids will have a deadline of 28<sup>th</sup> December, subject to the funding position and instruction from the Scottish Government. Full details of the annual bids allocation cycle can be found within Appendix B.

#### **8. Stakeholder Engagement**

Ongoing stakeholder engagement conversations around optimum strategic and effective use of Medical ACT funding will continue in 2026/27. The next meeting is scheduled for 9<sup>th</sup> June 2026, and a further date is expected towards the end of 2026. The purpose of these meetings is to work collaboratively with Boards and Medical Programmes to support the necessary changes in policy required to manage the funding. The focus for the foreseeable future will remain Measurement of Teaching reform.

## 9. Capital Funding

The Scottish Government Capital Position was issued to Boards in January 2026 and is outlined below.

*The NHS Scotland Capital Budget for 2026/27 will provide capital investment for the Portfolio's priority projects of the University Hospital Monklands, Princess Alexandra Eye Pavilion, the Belford Hospital, the Barra and Vatersay Community Campus, as well as contractual commitments relating to our construction programme.*

In view of this, PSD Scotland does not have the facility to convert Medical ACT revenue funding to capital on behalf of Boards during 2026/27. Boards will be notified during the year should this position change.

## Part 2: Medical ACT Operational Information for 2026/27

### The Medical ACT Allocation model

The principles driving the allocation model remain the same as for previous years. We have also continued to adopt an approach which minimises the impact on Boards of year-on-year changes to their allocations, except where additional funding is provided on the basis of specific increases to activity.

**Stage 1:** uses student numbers to derive a nominal amount to be allocated per student, which then feeds into Stage 2. At Stage 1 the basis for the student numbers is the Early Statistics Return from medical programmes within the first few months of an academic year to SFC. For 2026/27 the nominal amount allocated per student is £22,562. Details of numbers gaining entry to specific programmes during 2026/27 are outlined in Table 1 below.

Medical Schools	Aberdeen	Dundee	Edinburgh	Glasgow	St Andrews	ScotGEM	Total for Allocation Model	HCP Yrs. 1-3	Total
SFC 25/26 Actual students	1448	1161	1497	1890	118	286	6399	103	6502
St Andrews BSc					465		465		465
Less Non Recurrent students	(4)	(4)	(4)	(4)	0		(15)		(15)
<b>Actual students to be used in Model</b>	<b>1,444</b>	<b>1,157</b>	<b>1,493</b>	<b>1,886</b>	<b>583</b>	<b>286</b>	<b>6,849</b>	<b>103</b>	<b>6,952</b>
ScotCOM Cohort2 100%					55		55		55
St Andrews BSc reduction 17%					(55)		(55)		(55)
<b>Funded increase 26/27</b>									
22/23 (25) GPEP expansion	25						25		25
22/23 (30) Widening Access (25) General programme exp	10	10	10	10			40		40
22/23 (10) HCP Med expansion							0		0
23/24 (75) General expansion	15	15	15	15			60		60
23/24 (25) Widening Access expansion	7	7	8	8			30		30
St Andrews factor adjustment					(340)		(340)		(340)
<b>Total Students for Medical ACT recurrent funding</b>	<b>1,501</b>	<b>1,189</b>	<b>1,526</b>	<b>1,919</b>	<b>243</b>	<b>286</b>	<b>6,664</b>	<b>103</b>	<b>6,767</b>
% of students for Model funding	22.53%	17.84%	22.90%	28.80%	3.64%	4.28%	100.0%		

**Stage 2:** The actual costs incurred for GP teaching and for Travel and Subsistence costs are ringfenced for direct reimbursement as usual. Following this, the amount nominally allocated per medical programme has been distributed across Boards using the activity data provided by the Measurement of Teaching (MoT) exercise.

**Stage 3:** The information from Stage 2 is collated by Board to provide a total amount, following which PSD Scotland Finance applies a smoothing process to minimise any variance from the previous year's recurrent baseline. Boards should note that where smoothing has been applied, this implies a change in activity has occurred and therefore PSD Scotland Finance will have follow-up discussions to ensure stability in future years.

## Medical ACT Funding Overview

The total recurrent Medical ACT funding available for distribution 2026/27 is £153m; this represents an increase of £4.8m from 2025/26 levels. There remains £97k non-recurrent funding, which ceases after 2026/27.

Table 2 breaks down the component parts of the allocation with the increases compared to 2025/26.

<b>Medical ACT funding</b>	<b>Funding 2026/27</b>	<b>Increase 2026/27</b>	<b>Funding 2025/26</b>
ACT baseline prior year	£100,436,446	£0	£100,436,446
16/17 (50) Widening Access expansion	£4,875,000	£0	£4,875,000
21/22 (10) Widening Access expansion	£975,000	£65,000	£910,000
22/23 (30) Widening Access expansion	£2,730,000	£585,000	£2,145,000
23/24 (25) Widening Access expansion	£1,787,500	£487,500	£1,300,000
19/20 (60) COMET/GPEP expansion	£5,850,000	£0	£5,850,000
22/23 (25) GPEP expansion	£2,275,000	£487,500	£1,787,500
21/22 (155) General expansion	£15,112,500	£1,007,500	£14,105,000
22/23 (25) General expansion	£2,275,000	£487,500	£1,787,500
23/24 (75) General expansion	£5,362,500	£1,462,500	£3,900,000
18/19 (55) ScotGEM expansion	£4,290,000	£0	£4,290,000
18/19 (55) ScotGEM expansion	£0	(£27,500)	£27,500
22/23 (15) ScotGEM expansion	£1,170,000	(£7,500)	£1,177,500
20/21 (25) HCP Med Expansion	£2,071,875	£0	£2,071,875
22/23 (5) HCP Med Expansion	£381,875	£97,500	£284,375
Primary care increase	£3,844,260	£207,900	£3,636,360
<b>Total Medical ACT Funding</b>	<b>£153,436,956</b>	<b>£4,852,900</b>	<b>£148,584,056</b>
<b>Additional 15 non-recurrent intake 21/22</b>	<b>£97,500</b>		<b>£942,500</b>

### 1. ACT funding streams for 2026/27

The component parts of the Medical ACT funding in Table 2 above, are described below:

#### a. Medical ACT Funding to Support Widening Participation within Medical Programmes

Additional adjusted entry/contextualised admissions to medical programmes per annum have been supported by the Scottish Government since August 2016.

#### **b. Primary Care Funding**

The funding for GP Category A placement teaching remains unchanged at £85 per student per session (with a maximum amount of £255 for 3 or more students). PSD Scotland will continue to highlight to Scottish Government the impact on the Medical ACT budget of no additional funding for Primary care inflationary uplifts.

### **2. Other Factors influencing the model: Ring Fenced allocations**

Within Stage 2 GP ACT costs remain ring-fenced along with student travel, accommodation and subsistence costs. This means that these costs are prioritised for allocation before stage 3 of the model.

### **3. Approval of Additional Allocations Funding**

- Any Board in receipt of an increased allocation in 2026/27 compared to the 2025/26 baseline allocation is required to follow the Medical ACT bid process to release additional funding.
- Responsibility for the review and recommendations of bids rests with the Regional ACT Working Groups, subject to confirmation by PSD Scotland that the principles on appropriate use of Medical ACT have been followed.
- Following smoothing, no Board has received an overall reduction in allocation which would bring them below their recurrent baseline position. Boards should continue to review all existing Medical ACT expenditure to ensure it remains a priority and represents best value for money.
- If NHS Boards decide to stop funding any existing ACT activities in 2026/27, this should be notified in advance to the relevant Medical Programme(s) and to PSD Scotland through the Regional ACT Working Group.

The detailed funding positions of individual Boards are outlined in the attached tables.

### **4. Medical ACT Funds to Support Capital Expenditure**

Medical ACT funding may be used to support the capital funding of proposals within NHS Boards. These are usually associated with either equipment or estates. Expenditure is classed as capital where it has a long-term benefit, and the initial purchase value is greater than £5,000. The main characteristic of such funding is that the assets involved may be used repeatedly over a long time period.

Given that the PSD Scotland budget is received as revenue only, use of Medical ACT funding in this way requires a revenue to capital transfer at Board level. As a result of

the Scottish Government capital budget being fully committed for 2026/27 (as outlined in Part 1), PSD Scotland does not have the facility to convert Medical ACT revenue funding to capital on behalf of Boards. However, Boards will be notified during the year should this position change.

## 5. Management of Slippage

Health Boards are responsible for identifying any in-year slippage associated with their Medical ACT funding. If the slippage identified can be used by the Board, discussion of proposals to utilise this should occur at a local Medical ACT group (or similar local education meeting). Written proposals should then be submitted to the appropriate Regional ACT Group.

PSD Scotland requires early notification of slippage to help with managing the budget and reducing underspend

- If the slippage amount is known at the time of the bid, it should be reflected in the bid submission.
- If slippage is recognised after bid is approved, then this should be notified to PSD Scotland and reported at the next Regional ACT Working Group. Slippage funding may then be released to allow the Board to make further bids.
- If there are still available funds, the amount of slippage available should be notified to PSD Scotland annually. For 2026/27 this will be 28<sup>th</sup> October for local bids.
- Proposals from all Boards will then be considered for use of slippage before a final date (to be notified).

## 6. Board Managed Fund (Formerly Discretionary Fund)

In 2024/25, Boards were given an option to have available a Board Managed Fund up to a total value of £5k, which was intended to support timely purchase of non-recurrent small value items without the need to submit a formal bid. This fund will remain available for 2026/27.

Key criteria for use of the fund are as follows:

- The amount available depends on a Board's total allocation. The value of an individual item purchased should not exceed £1000 and combined items should not exceed £5000.
- Boards should notify PSD Scotland if they wish to have a Board Managed Fund, emailing [nes.medicalact@nhs.scot](mailto:nes.medicalact@nhs.scot).
- A list of all items for funding via this route should be added to the agenda for each RAWG meeting. Each item purchased should have full details recorded including name, bids category, intended use, Board location and full breakdown of cost.

- All payments for the spend to date will be transferred from PSD Scotland via the next available PoB.
- A full summary of spending for each Board via the fund should be included in the Annual Accountability Report.
- Use of the fund will remain available to Boards until 31<sup>st</sup> December of the same financial year.
- If a Board uses up its entire fund before 31<sup>st</sup> December, but still has sufficient budget left, it will be possible to apply to PSD Scotland for release of a further £5k, assuming that no constraints around discretionary spending have been imposed by Scottish Government.

## Appendix A The Medical ACT Bids Cycle

# Proposed Medical ACT Bids Cycle

**DECEMBER - MARCH**  
Boards can submit bids for the following financial year.  
These will be subject to additional allocation amounts being confirmed



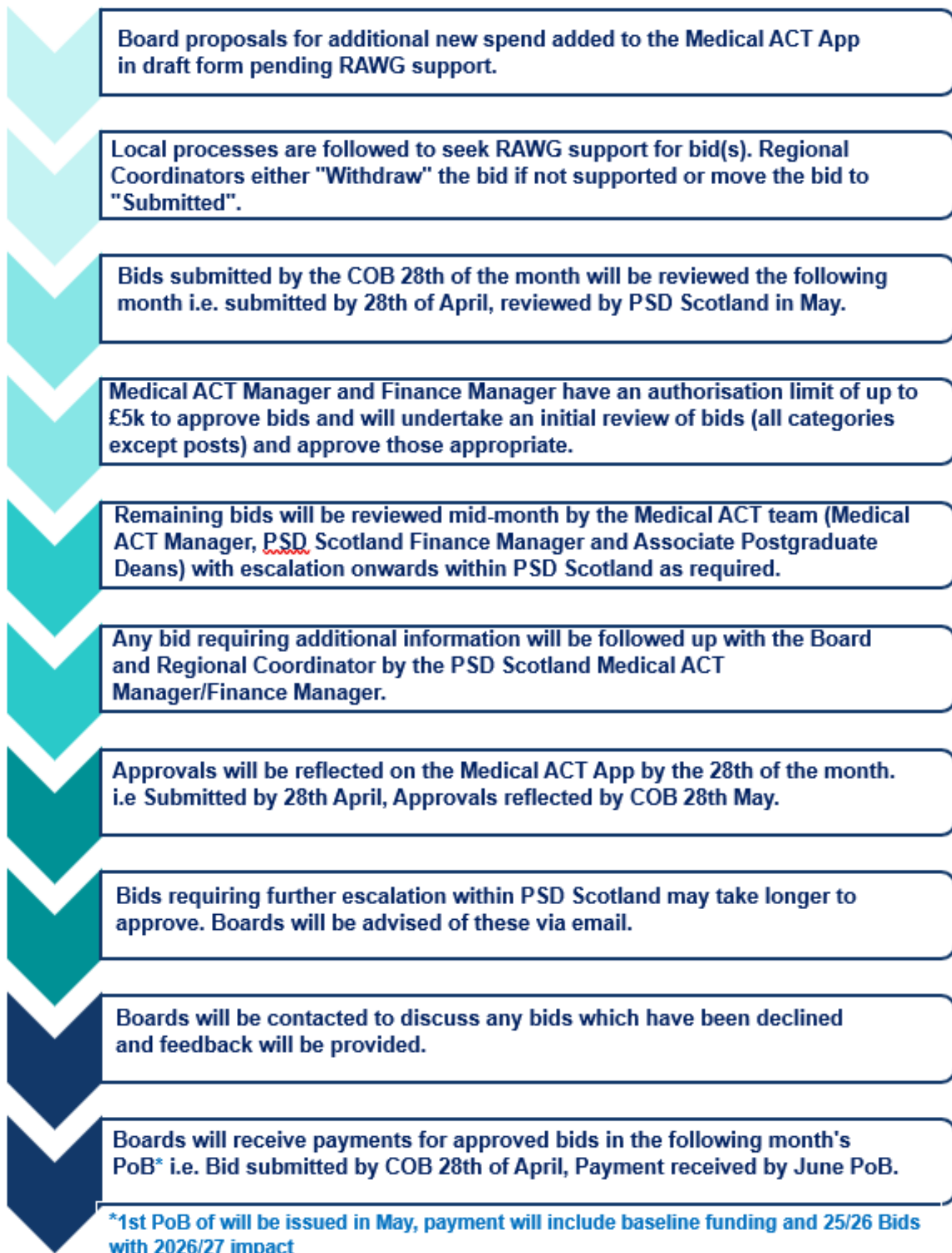
**APRIL - SEPTEMBER**  
Boards can submit bids utilising their funding available for bids.  
Bids can exceed a Board's initial allocation if funding is made available by other Boards within the region

**29 SEPTEMBER - 28 DECEMBER**  
Health Boards can submit national Bids.  
(non-recurrent bids only)

**2026 / 27**

- Phase 2 dates April to 28<sup>th</sup> September 2026
- Phase 3 dates 29<sup>th</sup> September to 28<sup>th</sup> December 2026, subject to the funding position and instruction from the Scottish Government.

## Appendix B Medical ACT Process



## Appendix C Agenda for Change Pay Scales

When submitting a Medical ACT bid, the midpoint of Agenda for Change pay scale should be used.

<b>Mid Point including on costs 2026/27</b>	
Band 1	
Band 2	£39,109
Band 3	£42,437
Band 4	£46,417
Band 5	£50,003
Band 6	£61,311
Band 7	£74,687
Band 8A	£95,917
Band 8B	£112,345
Band 8C	£133,090
Band 8D	£153,836
Band 9	£182,186

## **Appendix D Allocation of NHS Boards to Regional Groups**

### **North Regional ACT Working Group**

NHS Grampian  
NHS Highland  
NHS Orkney  
NHS Shetland  
NHS Western Isles  
University of Aberdeen Medical School (including GP Enhanced Programme)

### **St Andrews Regional ACT Working Group**

NHS Fife  
Scottish Ambulance Service  
University of St Andrews Medical School (including BSc & ScotCOM programmes)

### **Dundee Regional ACT Working Group**

NHS Tayside  
University of Dundee Medical School

### **Edinburgh Regional ACT Working Group**

NHS Borders  
NHS Lothian  
NSS (SNBTS)  
State Hospital  
University of Edinburgh Medical School (including Edinburgh HCP-Med)

### **West of Scotland Regional ACT Working Group**

NHS Ayrshire and Arran  
NHS Dumfries and Galloway  
NHS Forth Valley  
NHS Greater Glasgow and Clyde  
NHS Lanarkshire  
NHS National Waiting Times Centre (formerly Golden Jubilee Hospital)  
University of Glasgow Medical School (includes COMET)

### **ScotGEM Regional ACT Working Group**

NHS Dumfries and Galloway  
NHS Fife  
NHS Highland  
NHS Tayside  
University of Dundee Medical School  
University of St Andrews Medical School