

MEDICAL ACT SHARING OF INFORMATION

Medical Activities
by NHS Boards
during 2024-25



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Foreword

All NHS Boards in receipt of Medical ACT funding are required to submit an annual Accountability Report to NES; this includes all 14 territorial Health Boards, the State Hospital, Scottish Ambulance Service, National Waiting Times Centre and National Services Scotland (NSS), which reports on activity from the Scottish National Blood Transfusion Service (SNBTS).

This paper provides an overview of Medical ACT activities carried out by Health Boards between the start of April 2024 until the end of March 2025.

A central aim of this paper is to showcase the learning, innovation and expertise that Medical ACT funding has supported in Scotland's NHS, but also to highlight the future challenges and opportunities that exist for the clinical education of medical students.

We would be pleased to receive any comments relating to the content of this paper, which may be submitted to the following address: nes.medicalact@nhs.scot.



Figure 1: Medical ACT Team involved in producing this paper.

Executive Summary

This paper summarises Medical ACT activity across NHS Boards for the financial year 2024–25 and is based on the accountability reporting returns submitted to NES in September 2025 from 18 of 19 Boards.

The data confirm that governance structures remain well established, with most Boards operating Local ACT Working Groups that feed into Regional ACT Working Group structures and report onwards to NES. As in previous years, there is ongoing Board-level oversight of activities. This year in addition, several Boards have provided evidence of strengthened local processes that have improved the approach to bids development and improved alignment with ES bids review cycles.

Medical ACT funding continues to support a wide range of developments across the country, including expansion of simulation and digital teaching, creation of targeted teaching posts, enhancements to student support and wellbeing, and upgrades to teaching space and student accommodation. These initiatives are underpinned by an ongoing focus around innovation and provide opportunities for shared learning across Scotland.

The total available Medical ACT funding for 2024–25 was £137.3m, reflecting ongoing budget growth due to increased student numbers. However, these increases have also contributed to some of the common challenges reported by Boards, which included workforce pressures, capacity constraints and the need to sustain educational quality amidst high service demands. Boards also anticipate substantial curriculum driven changes arising in the coming years and have highlighted the importance of early-stage collaborative stakeholder involvement to mitigate against any impacts on the stability of Medical ACT funding, so that quality of education provision by Boards is not compromised.

NES remains very grateful to all Boards for sharing their data and for ongoing commitment to delivering high quality medical education to medical students across Scotland.

Summary of Financial Information from NHS Boards

Medical ACT funding is managed and distributed to the Boards via NES. Any changes to the funding are notified annually by the Scottish Government prior to the start of a new financial year. Distribution of funding is made according to an allocation model; this funding is regarded as a contribution towards the NHS Boards' costs of delivering clinical teaching to medical students but is not designed to reimburse the full costs incurred.

In 2024-25, the total Medical ACT budget was £137.3m, which represents an ongoing increase over several years primarily due to investment by the Scottish Government in additional student places, along with a focus on developing medical education in primary care. In 2024/25 Scottish Government provided £41m recurrently to NES for the additional student intakes since 2021/17.

Allocation

Medical ACT funding	Funding 2024/25	Increase 2024/25
ACT baseline Prior Year	£84,328,928	£0
NES baseline inflation increase		£0
16/17 (50) Widening Access expansion	£4,875,000	£0
21/22 (10) Widening Access expansion	£715,000	£195,000
22/23 (30) Widening Access expansion	£1,560,000	£585,000
23/24 (25) Widening Access expansion	£812,500	£487,500
19/20 (60) COMET/GPEP expansion	£5,850,000	£390,000
22/23 (25) GPEP expansion	£1,300,000	£487,500
20/21 (25) HCP Med Expansion	£1,909,375	£487,500
21/22 (155) General expansion	£11,082,500	£3,022,500
22/23 (5) HCP Med Expansion	£195,000	£73,125
22/23 (25) General expansion	£1,300,000	£487,500
23/24 (75) General expansion	£2,437,500	£1,462,500
18/19 (55) ScotGEM expansion	£4,345,000	(£27,500)
22/23 (15) ScotGEM expansion	£885,000	£292,500
Primary care increase*	£3,515,000	£0
Additional 115 non-recurrent intake (100 20/21 and 15 21/22)	£2,242,500	£0
Total Medical ACT Funding	£127,353,303	£7,943,125
Funding allocated outside the model		
20/21 HCP Med Yrs. 1-3 funding	(£1,438,125)	(£219,375)
Additional 115 non-recurrent intake	(£2,242,500)	£0
Funding reserved for national projects	(£1,944,373)	(£1,944,373)
Total Medical ACT Funding inside the model	£121,728,304	£5,779,377

Bids Trends

Medical ACT Bids 2024-25		
Category*	Number Approved	In-Year Cost
Equipment	116	£1,716,241
Teaching Posts	80	£1,673,522
GP Costs	41	£684,360
Other	30	£588,128
Teaching Sites	28	£1,107,501
Administration	27	£713,670
CTF	23	£1,224,161
Accommodation	9	£1,866,038
Training	8	£42,005
Widening Access	5	£77,955
Travel	4	£5,000

Note* Payments were also made for the following:

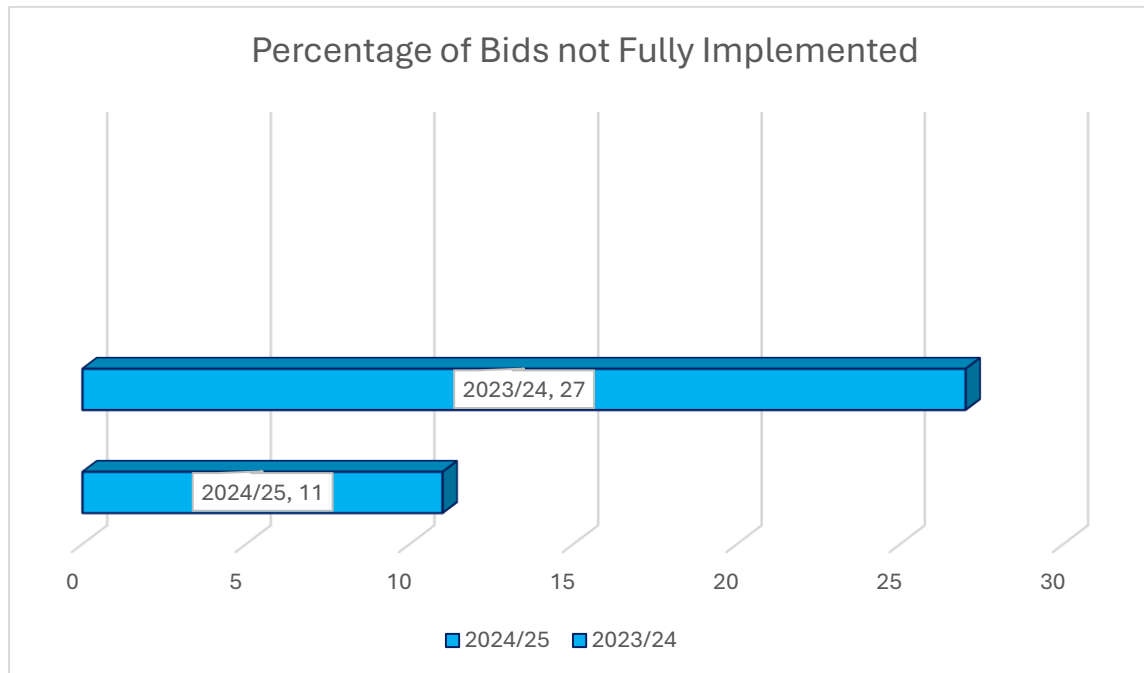
- Pay Uplift £8,594,927
- Pension Uplift £1,421,511
- HCP Medicine £934,000
- ScotGEM LIC 4 £1,042,667

<u>Category of Spend</u>	<u>Examples of bids</u>
Equipment	Laptops, Audiovisual equipment, Furniture, Simulation equipment – e.g. manikins, examination kit etc.
Teaching Posts	Consultant, Simulation Lead, Pharmacy & AHP Educator time
Administration	Usually posts - Office support, Project Manager, Librarian time
Clinical Teaching Fellow (CTF)	Posts, Staff development including PG Certificate Medical Education and study leave budgets
Other	Student hardship funds, increase in central costs, student accommodation basic supply costs, board discretionary funds, other one-off costs which don't fall into another category
GP Cost	GP coordinator post, increase to GP placement block costs (programme restructure extended teaching block)
Additional Pay Uplift	Additional pay uplift provided Boards
Teaching Sites	Upgrades to teaching accommodation, increasing capacity of teaching rooms
Accommodation	Property purchases, refurbishment, maintenance, new build projects - for student accommodation
HCP Medicine	HCP Medicine students funding allocation to Boards
Training	CPD for educators – budget for study leave
Widening Access	Undergraduate scholarship to support WA, WA equipment & fees
Travel	Travel costs to Medical ACT meetings i.e. NES Stakeholder Engagement Events

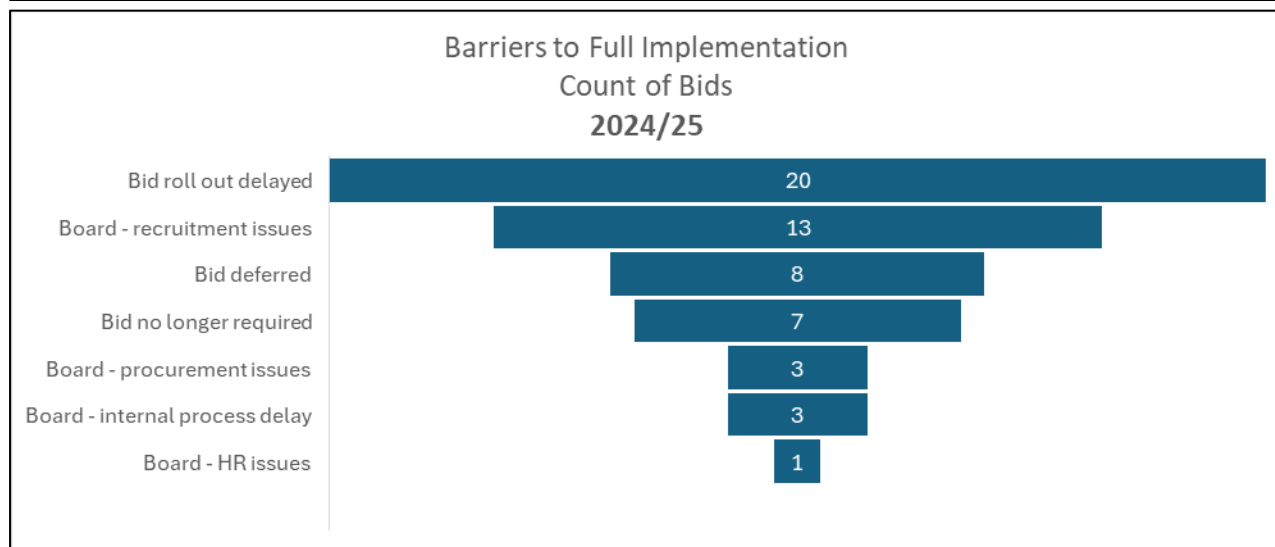
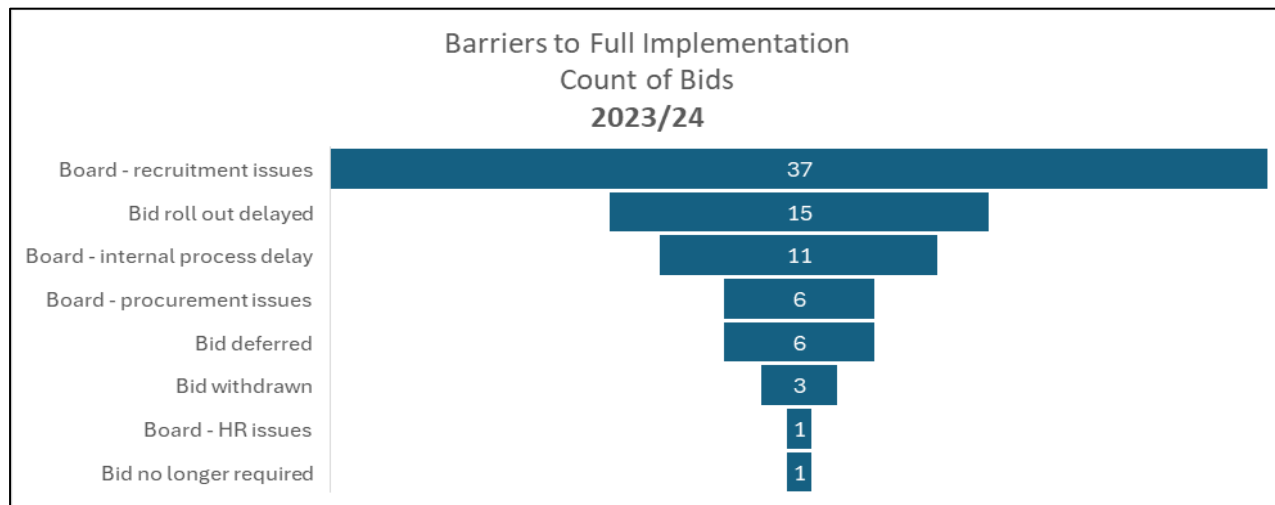
Bids not Fully Utilised

In section 2b we provide Boards with a breakdown of their approved Medical ACT bids in 2024/25. Boards were asked to confirm if the funding they received was fully utilised and where this was not the case, what barriers there were to implementation.

It was reported that 11% of bids were not fully implemented in 2024/25.



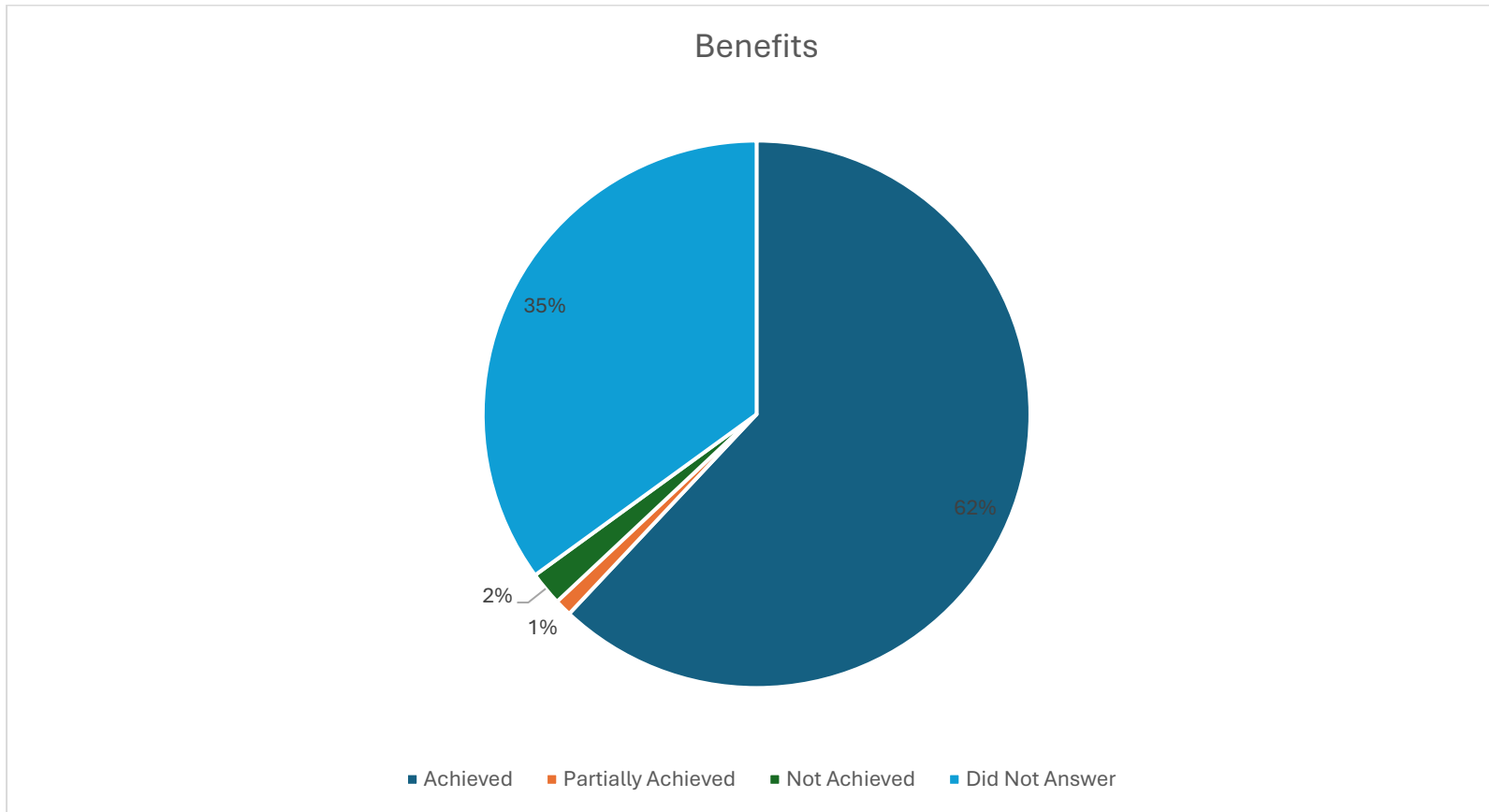
The outcomes of submitted bids from Boards is presented below. This includes high-level summary information around the main barriers to implementing bids.



Note: includes bids which weren't fully implemented and bids which were fully implemented but incurred slippage.

Section 2b also allows Boards an opportunity to provide any available results from bid evaluation and detail the anticipated benefits of the bid. Further details of these evaluations can be found in Appendix 1.

Boards were asked if the anticipated benefits of bids were achieved; in 62% of bids, the outcome was positive:



Slippage

Some degree of slippage is inevitable, and we would encourage all Boards to continue to monitor slippage for reporting to NES at an early stage, to support the wider Medical ACT budget. This will become more important in future years when less growth in the budget is anticipated.

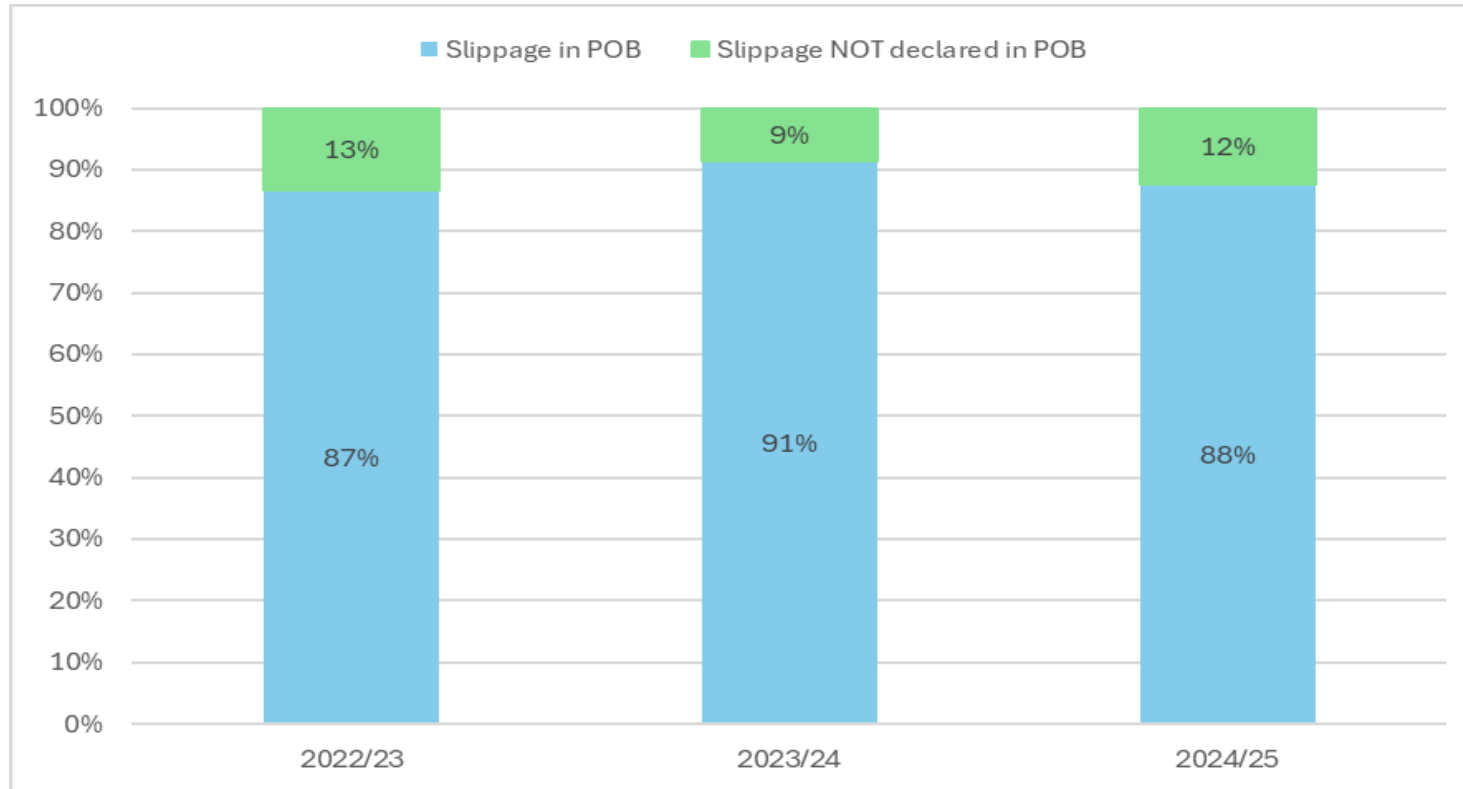
Total slippage has fluctuated over the past three years, with a clear peak in 2023/24. In 2022/23, the total slippage amounted to £2.54m, rising sharply to £5.26m in 2023/24, before falling again in 2024/25, to £2.69m, representing almost a 50% reduction from the previous year. While this improvement is encouraging, levels remain slightly above those reported in 2022/23, indicating ongoing pressures on Boards' ability to fully utilise Medical ACT funding within year.

	2022/23	2023/24	2024/25
Slippage declared in POB	(£2,202,622)	(£4,799,978)	(£2,354,495)
Slippage NOT declared in POB	(£337,785)	(£456,804)	(£331,947)
Total slippage	(£2,540,407)	(£5,256,782)	(£2,686,441)

Slippage declared in POB is when the NHS Board has informed NES of slippage in year and so that was reflected in the "Payment On Behalf" (POB) notice that is issued monthly. This is helpful as, if time allows, any residual funding can be reflected in the national slippage pot where it is available for use by other NHS Boards on a non-recurrent basis.

Slippage not declared in POB is when the NHS Board did not inform NES about the slippage in year but declared it within the Accountability Report. In this scenario, the funding has already been returned to SG and so is no longer accessible for other Boards to utilise.

Trends in Slippage Data 2022-2025



Summary of Narrative Responses from NHS Boards

Local Governance Arrangements

Boards were asked to provide details of any changes to their Medical ACT Governance arrangements, including details of the interface between local groups, regional Medical ACT groups and up to Board level. Full details can be found in Appendix 2. Areas of note for 2024/25 are:

- All Boards have agreed processes in place to discuss Medical ACT governance activities.
- Boards report a variety of governance pathways, with the introduction of some new groups this year to allow joined up conversations between stakeholders regarding education which include Medical ACT on the agenda. Examples of this include NHS Lothian's UG Educational Governance Group and NHS Grampian's reformed Medical and Dental Education Governance Group.
- Two Health Boards reported have set up Local ACT groups which are accountable to the RAWG. These allow for more in depth conversations especially prior to bids submission.
- NHS Lanarkshire tasked a Scottish Clinical Leadership Fellow to develop a standardised bid proposal form which allows departments to submit bid proposals to the local Medical Education Governance group for consideration. See Appendix 2 for further information
- NHS Fife and NHS Tayside have created new meeting processes to link in with the NES monthly bids review system. North and West RAWGs have created electronic approval processes, which allow the respective RAWGs to discuss and provide support to bids in a timely manner that work with NES deadlines thus facilitating timely review of bids.

Sharing Intelligence around use of Medical ACT Funding

In section 4B, NHS Boards were asked to provide details of any innovative Medical ACT funded activities that they found beneficial along with any and that could be transferrable to other Boards. Examples of the entries submitted are detailed below by theme, and full details can be found within Appendix 3.

Digital/Simulation

Board	Bid Name	Bid Purpose
NHS Ayrshire & Arran	Simulation Centre – Park Ward, Ailsa Site	The newly opened Simulation Centre at Park Ward has significantly enhanced our capacity to deliver high-quality, immersive medical education. The centre features a spacious simulated ward and an additional large training room, enabling a diverse range of simulation-based learning experiences.
NHS Grampian	Extended Reality Session	This has allowed us to establish a VR Lab, and our students have access to an online booking system. VR has become a powerful tool in our teaching. Key benefits are enhanced clinical anatomy teaching, spatial understanding, safe and repeatable practice, active and engaging learning online g, accessibility and flexibility and improved knowledge retention. We have received very positive feedback from our students.
NHS Lanarkshire	Simulation Course Development	We have developed and introduced a Recognition and Management of the sick child simulation course. This mirrors the adult course and helps students feel more comfortable in assessing an unwell child, especially if delivered earlier in the block, and provides long-term foundational skills and familiarity in this area The new Professionalism sim course has been welcomed by the students especially as it feels a less stressful introduction to sim compared to more heavily clinical orientated sessions.

Workforce

Board	Bid Name	Bid Purpose
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NHS Borders	Clinical Teaching Fellow	While many other boards have CTFs post this year marked the first appointment of a Clinical Teaching Fellow, funded through non-recurring ACT. The doctor employed had four years of post-grad training and integrated effectively into the team. His extensive clinical experience enabled him to navigate departmental structures with ease and engage productively with both tutors and trainees, thereby enhancing the quality of teaching. He collaborated with various departments, particularly in the development of simulation-based learning opportunities for students, adopting a multi-professional approach. Additionally, he continued to advance our widening access programme and actively engaged with local schools.
NHS Greater Glasgow & Clyde	Additional Staff	We utilised ACT funding to support additional Consultant PAs aimed at organisation and coordination of specialty teaching and vertical themes. Administrative posts were also funded in order to support coordination and administrative elements of UG teaching and to release clinician time to teach. Whilst posts were only filled fairly late in the financial year, these have already begun to have an impact locally.

Student Support/Wellbeing

Board	Bid Name	Bid Purpose
NHS Dumfries & Galloway	Bicycles	We continue to maintain 16 bicycles which are well used and necessary, as some accommodation is off the main DGR1 site and public transport in a rural area is often not optimal. The bikes also promote sustainable travel and contribute to overall student physical and mental wellbeing.
NHS Grampian	Evaluation of accessibility to clinical placement:	Evaluation of accessibility to clinical placement: 2-year projects which commenced in May 2024. Around 200 placements across Grampian and Highland assessed to date, identifying common areas of challenge, raising awareness providing suggestions for solutions. Whilst not yet concluded, we already see significant progress.
NHS Shetland	Student Hardship Fund	NHS Shetland introduced a student hardship fund. The cost of living in Shetland is often higher than on the mainland and students have to build up staple food supplies on arrival on the island as transporting essentials is not practical. More and more students have to work to help with cost of living and this can be difficult for students

		choosing remote and rural placements, as they can find it hard to get bank work (despite once for Scotland approach the paperwork and red tape seem to be make it very difficult). The student hardship fund has a supporting governance framework.
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Accommodation/Infrastructure

Board	Bid Name	Bid Purpose
NHS Forth Valley	Accommodation upgrades	NES supported the successful bid for modernisation and refurbishment of the whole building.
NHS Grampian	Teaching space upgrades	Upgrade of teaching rooms throughout ARI: Allows for increased capacity on placement as well as novel ways of delivering teaching by clinicians to a wider audience.

Equipment

Board	Bid Name	Bid Purpose
NHS Borders	Study Pods	The installation of study pods in the library has provided students with individual workspaces within a shared environment. This initiative has been well received, with positive feedback from those who have made use of the facilities.
NHS Fife	Nursing Anne Manikins x3	These manikins have allowed enhanced teaching over 3 sites; Victoria Hospital, Queen Margaret Hospital and Cameron Hub. They have offered a large range of training options that can enhance any training situation from the basics of catheterisation etc to more urgent care. Students from different universities placement in different modules have benefitted from practising skills using these manikins. They are individually much cheaper than manikins previously purchased.
NHS Greater Glasgow & Clyde	O&G birthing simulators	O&G birthing simulators to simulate real world scenarios via safe, replicable and wearable models; and foetus ultrasound trainers to support the learning of skills for second trimester foetal screening, enabling skills such as assessment of foetal size, and measurement of amniotic fluid volume etc.

New Ways of Working

Board	Bid Name	Bid Purpose
NHS Ayrshire & Arran	Pharmacist-Led Prescribing Education Pilot	<p>Paper-based prescribing training has become outdated with the shift to electronic prescribing. An online prescribing platform (BPSA), used nationally for the UK Prescribing Safety Assessment (UK PSA), was piloted as an alternative. Rolled out across 3rd- and 4th-year medical/surgical placements. Paper cases (2–3 per session) replaced by 12–15 shorter online cases.</p> <p>Students: found the system easy to use, valued real-time feedback, enjoyed engaging/realistic cases, felt better prepared for PSA, and requested more independent access. Facilitators: preferred the method, noted improved pacing and broader clinical coverage, and reported minimal IT issues.</p> <p>The pilot has been highly successful, modernising prescribing education, improving student engagement, and aligning with national standards. Since its launch, other Health Boards have expressed interest in adopting the approach. NHS Ayrshire & Arran has developed both delivery models and expertise in content creation that could be shared. Given regional interest, student demand, and the high costs of a single-board model, we recommend exploring expansion of this pilot beyond NHS Ayrshire & Arran in collaboration with the University of Glasgow.</p>
NHS Lanarkshire	Out of Hours (GP) Pilot	<p>We have successfully delivered along with Glasgow University colleagues a pilot for Out of Hours (GP) attachment for Glasgow university students, this has been well received and received positive student feedback, presented at local RAWG. This offered students an understanding of health care systems and acute Primary care presentations. It is hoped this will be embedded in the new Glasgow curriculum.</p>

Widening Access

Board	Bid Name	Bid Purpose
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NHS Orkney	Schools Liaison Project	This supports local pupils applying to medical school. In 2024/25 we had a new bid for a fund to help them attend interviews, travel off island with a parent, and also clothing. Parents were very grateful that this was available. 2 school pupils successfully gained entrance to Scottish medical school, commencing September 2025. There are 4 prospective applicants for the following year.
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Factors Affecting Use of Medical ACT in Boards

In Section 4C, NHS Boards were asked to provide details of any challenges which impacted the delivery of Undergraduate Medical Education in the Board along with an overview of any issues that prevented them using their full Medical ACT allocation. Only 3 Boards (could name them) fully implemented the funding for all of their bids with no slippage or barriers. Another 10 Boards indicated full implementation of bids funding but reported varying amounts of slippage. Only 3 Boards reported they had fully utilised all Medical ACT Funding with no slippage or barriers. Another 10 Boards indicated full utilisation of bids funding but reported varying amounts of slippage.

Of the remaining Boards, the most significant challenges in 2024/25 resulted from workforce and recruitment pressures, capacity constraints, financial and administrative hurdles, and the ongoing need to sustain educational quality in the face of rising demand and limited resources.

Key Themes: Challenges Impacting Undergraduate Medical Education at Board level

1. Workforce and Recruitment Pressures

- Increased clinical service demands have made it difficult for staff to dedicate time to teaching and supervision.
- Recruitment and retention of teaching fellows, supervisors, and administrative staff have been challenging.

2. Capacity and Placement Constraints

- Rising student numbers have strained the availability of placements, accommodation, and supervision.
- Physical space limitations, such as insufficient teaching rooms or delays in estates work, have further restricted educational delivery.

3. Financial and Administrative Barriers

- Complex or slow Board approval processes for funding and discretionary spending have led to inefficiencies and delays in implementing educational initiatives.
- Uncertainty around funding allocations and the inability to carry forward funds for capital projects have hindered long-term planning.

4. Sustaining Educational Quality

- Boards have faced challenges in maintaining high-quality educational experiences amidst increased pressures and limited resources.
- Balancing service delivery with educational commitments has raised concerns about trainer burnout and the dilution of student learning experiences.

5. Rural and Remote Issues

- Boards in rural or remote areas have encountered unique challenges, such as accommodation shortages, reliance on temporary staff, and the need for sustainable travel solutions for students.

NES-Influenced Challenges Affecting Use of Medical ACT (2024/25)

It was acknowledged that Scottish Government delays in confirming the Medical ACT budget for 2024/25 had negatively impacted timely issue of Allocation Letters and reduced the window to use Medical ACT funding. However, we were also told Boards felt that NES positively influenced the outcome of several challenges in 2024/25 by supporting capital projects, providing advisory support, and advocating for systemic solutions.

1. Funding Approvals and Capital Projects

NES played a key role in supporting or approving bids for capital projects, such as the modernisation and refurbishment of educational facilities and student accommodation. Their involvement sometimes enabled Boards to proceed with essential upgrades that might otherwise have been delayed due to funding constraints, for example modernisation and refurbishment of student accommodation in NHS Fife.

2. Funding Decisions and Administrative Processes

NES decisions on whether to approve funding on a recurring or non-recurring basis had a direct impact on Boards' ability to plan and sustain educational initiatives. It was felt by some Boards that non-recurring approvals created uncertainty, making it harder to safeguard teaching components that depend on stable funding.

3. Advisory and Support Roles

NES provided ongoing advisory support to Boards, including guidance for new educational leaders and approval of key teaching posts. This support was noted as helpful in establishing or maintaining educational delivery, especially during periods of change or recruitment challenges.

4. Policy and Systemic Advocacy

NES was involved in discussions with national stakeholders to address systemic funding issues, such as pay uplifts for specific staff groups. While not all issues were fully resolved, NES's advocacy and engagement were recognised as important in seeking solutions to broader challenges affecting the use of Medical ACT.

Anticipated Changes to Undergraduate Teaching

In Section 4D, NHS Boards were asked to provide details of any confirmed or contemplated changes to undergraduate teaching or curriculum which could impact on future Medical ACT funding. NES is extremely grateful to Boards for the information they provided as this allows NES more time to consider any future implications to Medical ACT processes and policies. Conversations with Boards and Medical Programmes during 2024/25 have highlighted the importance of collaborative conversations between stakeholders at an early stage to avoid negative impacts on funding. Further details can be found in Appendix 4.

Conclusion

Overall, the 2024–25 Medical ACT funding cycle demonstrates strong commitment across Scotland's NHS Boards to deliver high-quality medical education despite ongoing pressures. The innovations and shared learning captured in this paper highlight significant progress, while the challenges identified, particularly around capacity, workforce and curriculum change, emphasise the need for continued national coordination and early, collaborative planning. Sustaining these partnerships will be essential to ensure Medical ACT funding continues to support effective, high-quality clinical education- for Scotland's medical students.

Appendices

Appendix 1: Bids Evaluation and Anticipated Benefits (listed by NHS Board)

Board	Proposal/Item Description	Detail Results of Evaluation	Achieved (Y/N)	Please Provide Details
NHS Ayrshire & Arran	GP with extended role (medical education)		Y	Teaching capacity and quality of teaching
NHS Ayrshire & Arran	Medical Education Administrator		Y	Management and organisation of teaching
NHS Ayrshire & Arran	Clinical Teaching Fellow Anaesthesia and Critical Care		Y	Teaching capacity and quality of teaching
NHS Ayrshire & Arran	Senior Clinical Teaching Fellow Surgical Specialties UHC		Y	Teaching capacity and quality of teaching
NHS Ayrshire & Arran	Clinical Teaching Fellow Orthopaedics		Y	Teaching capacity and quality of teaching
NHS Ayrshire & Arran	Clinical Teaching Fellow Anaesthesia and Critical Care		Y	Teaching capacity and quality of teaching
NHS Ayrshire & Arran	Clinical Teaching Fellow Surgery UHC		Y	Teaching capacity and quality of teaching
NHS Ayrshire & Arran	Senior Clinical Teaching Fellow Medical Specialties		Y	Teaching capacity and quality of teaching
NHS Ayrshire & Arran	Senior Clinical Teaching Fellow Surgical Specialties		Y	Teaching capacity and quality of teaching
NHS Ayrshire & Arran	Clinical Teaching Fellow Orthopaedics (UHC site)		Y	Teaching capacity and quality of teaching
NHS Ayrshire & Arran	GP ACT Increase in Vocational Studies Tutors		Y	
NHS Ayrshire & Arran	BPS online prescribing and e-learning pilot		Y	Teaching quality- evaluation and recommendation provided in word document
NHS Ayrshire & Arran	Increase in VS Tutor rate		Y	

NHS Ayrshire & Arran	Clinical Teaching Fellow		Y	Teaching capacity and quality of teaching
NHS Ayrshire & Arran	Simulation Training Ward		Y	Teaching quality- evaluation provided in word document
NHS Ayrshire & Arran	GP ACT - Increase in GP OSCE stations		Y	
NHS Ayrshire & Arran	COMET Student LCP Travel Costs		Y	
NHS Ayrshire & Arran	Practice Engagement Lead		Y	
NHS Ayrshire & Arran	Digital GP Lead		Y	
NHS Ayrshire & Arran	Increase in GP ACT teaching costs 2425		Y	
NHS Ayrshire & Arran	Increase in cost of GP ACT funded staff		Y	
NHS Ayrshire & Arran	West GP ACT Slippage		Y	
NHS Borders	Clinical Teaching Fellow			
NHS Borders	Domestic support for early access to student accommodation			
NHS Borders	SimMan maintenance			
NHS Borders	Laptops for medical students			
NHS Borders	Accommodation valuation			
NHS Borders	Paediatric simulation equipment			
NHS Borders	Laptops for medical students			
NHS Borders	Simulation equipment			
NHS Borders	Digital wayfinder for Education Centre			
NHS Dumfries & Galloway	Simulation Manikin Facial Overlays		Y	Supporting a more realistic simulation environment.

NHS Dumfries & Galloway	Simulation Faculty - Specialty Dr, 2 sessions		Y	Increased demand for simulation teaching across all undergraduate programmes due to student feedback and increased student numbers. Expanding the sim faculty supports all students, across all specialties and programmes, having timetabled simulation as part of their block experience.
NHS Dumfries & Galloway	CTF - PG Cert in Health Professions Education		Y	CTF in general surgery successfully completed the PG Cert. Postholder has remained in post for a further year and as such the knowledge gained continues to benefit the students for a further academic year.
NHS Dumfries & Galloway	Branched 4 Vessel Vascular Access Ultrasound Training Block Model		Y	Supporting clinical skills teaching with suitable equipment.
NHS Dumfries & Galloway	CTF - Psychiatry		Y	Previously the dept of psychiatry did not have a CTF and permanent staff were struggling to ensure ongoing high-quality teaching and block organisation due to time pressures. This role has allowed the postholder to have dedicated time to devote to delivering high quality teaching.
NHS Dumfries & Galloway	Maternity Leave cover for Sub Dean for Glasgow University		Y	Mat leave cover has been provided for the sub-dean role.
NHS Dumfries & Galloway	Bikes for student use		Y	Students continue to use the bikes in our fleet and feedback is very positive. This is especially important in rural areas where public transport is irregular. It also supports student wellbeing.
NHS Dumfries & Galloway	Maintenance costs for fleet of student bikes		Y	Ongoing maintenance of the student bike fleet allows the Board to ensure bikes are

				fit for purpose and meet all required safety standards.
NHS Dumfries & Galloway	Remote Ultrasound Teaching Probe		Y	Supporting teaching in point of care assessment and decision making.
NHS Dumfries & Galloway	Transfer Bag		Y	Supporting teaching with suitable equipment which reflects that which is available in clinical areas.
NHS Dumfries & Galloway	Augmented Reality Mats		Y	Supporting clinical skills teaching with suitable equipment.
NHS Dumfries & Galloway	Observation monitors		Y	Supporting clinical skills teaching with suitable equipment.
NHS Dumfries & Galloway	Lumbar trainers		Y	Supporting clinical skills teaching with suitable equipment.
NHS Dumfries & Galloway	Ultrasound		Y	Supporting teaching in point of care assessment and decision making.
NHS Dumfries & Galloway	Examination couches		Y	Supporting clinical skills teaching with suitable equipment.
NHS Dumfries & Galloway	Equipment to support OSCE exams		Y	Supporting exam delivery with suitable equipment.
NHS Dumfries & Galloway	Replacement equipment - US pads		Y	Supporting clinical skills teaching with suitable equipment.
NHS Dumfries & Galloway	Replacement of equipment - tube feeding simulator		Y	Supporting clinical skills teaching with suitable equipment.
NHS Dumfries & Galloway	Replacement equipment - US IV training arm		Y	Supporting clinical skills teaching with suitable equipment.
NHS Dumfries & Galloway	Arterial puncture trainer		Y	Supporting clinical skills teaching with suitable equipment.
NHS Dumfries & Galloway	Workplace adaptations for student (ScotGEM)		Y	Supported workplace adaptations for student in wheelchair.
NHS Dumfries & Galloway	Increased accommodation costs to reflect long term increase in student numbers (ScotGEM)		Y	Increased accommodation costs related to permanent increase in ScptGEM student numbers. Ensures

				Board can provide suitable accommodation.
NHS Dumfries & Galloway	Bikes (ScotGEM)		Y	Students continue to use the bikes in our fleet and feedback is very positive. This is especially important in rural areas where public transport is irregular. It also supports student wellbeing.
NHS Dumfries & Galloway	Digital stethoscopes (ScotGEM)		Y	Supports delivery of clinical teaching, allowing heart sounds to be recorded and analysed.
NHS Dumfries & Galloway	2024/25 Board slippage (ScotGEM)			Slippage
NHS Fife	ScotCOM Director of Medical Education	NA	Y	Role and time have been essential for start-up planning for ScotCOM.
NHS Fife	ScotCOM Project Manager	NA	Y	Role and time have been essential for start-up planning for ScotCOM.
NHS Fife	ScotCOM Administrator	NA	Y	Role and time have been essential for start-up planning for ScotCOM.
NHS Fife	Hub 1 Lead Senior Clinical Educator (SCE)	NA	Y	Role and time have been essential for start-up planning for ScotCOM.
NHS Fife	Hub 2 Lead Senior Clinical Educator (SCE)	NA	N	N/A
NHS Fife	ScotCOM DME and Development PAs for Forth Valley and Borders	NA	Y	Role and time have been essential for start-up planning for ScotCOM.
NHS Fife	ScotCOM Clinical Contribution to Development	NA	Y	Role and time have been essential for start-up planning for ScotCOM.
NHS Fife	ScotCOM Community Engagement	NA	Y	Roles and time have been essential to support various events such as school engagement in carousels that took place at the Cameron hub.
NHS Fife	ScotCOM SIM Centre Manager	NA	Y	Role has been essential to finalise the renovations of Cameron Education

				Hub and also prepare for the first cohort of ScotCOM students arriving.
NHS Fife	Med Ed Development Officer	NA	N	N/A
NHS Fife	Year 3 Module - ICU	NA	Y	Continues to provide learning opportunities for St Andrews students on placement. Positive feedback received.
NHS Fife	ACT Officer	NA	Y	Essential post to link between NHS Fife and the University of St Andrews.
NHS Fife	NHS Fife Edinburgh Lead 2PA	NA	Y	Continues to support various parts of the programme e.g. HCP-Med and contribute to year 4 Medicine
NHS Fife	Arclight Camera	NA	Y	Allows students to gain hands-on experience of skin lesion examination.
NHS Fife	Improvements to Education Centre	NA	Y	Environment noticeably warmer due to the installation of adding an additional window frame. This allows for a more comfortable study space for students and better working conditions for the receptionist in the Education Centre.
NHS Fife	St Andrews BSc Opticians Year 2 Placement	NA	Y	This module was introduced on a trial basis for St Andrews year 2 students. Given the positive feedback received, the placements will continue into the new academic year.
NHS Fife	Improvements to new educational area	NA	Y	Stud wall put up in new area provided to Medical Education allowing a bay to be transformed into a teaching classroom
NHS Fife	Improvements to new educational area (part 2)	NA	Y	Stud wall put up in new area provided to Medical Education allowing a bay to be transformed into a teaching classroom
NHS Fife	ScotCOM Clinical Contribution to Development	NA	Y	Numerous roles and time have been essential for start-up planning for ScotCOM.

NHS Fife	Essential Start Up Costs for Cameron using	NA	Y	Essential equipment to establish a working /simulation space that can enhance the undergraduate experience by ensuring workspaces are appropriate and sufficient for the task. IT to ensure workspaces are available/useful. Simulation consumables so that clinical skills can be repeated often all are beneficial for the undergraduate student.
NHS Fife	Early years nursery placement bid - year 2 students	NA	Y	This module was introduced on a trial basis for St Andrews year 2 students. Given the positive feedback received, the placements will continue into the new academic year.
NHS Fife	Cedar House Products	NA	Y	Cedar House is now fully equipped and furnished and will welcome students in July 2025
NHS Fife	Telepresence Suite Equipment Replacement	NA	Y	Equipment installed and working ensuring the room is equipped appropriately for teaching
NHS Fife	SimMan 3G PLUS	NA	Y	A high-quality manikin that can allows the undergraduate student to work through the entire A-E examination with enhanced actions such as breathing and talking - all the way through to live shocks with a defibrillator. Really beneficial for all aspects of the undergrad education.
NHS Fife	Newborn Rohan Birthing Baby	NA	Y	A major improvement on how we use baby manikins in the undergraduate world. This manikin feels and weighs like a newborn baby. This allows the students to know how to hold/dress a baby if they have never done

				so and that's before we get to the teaching aspect- a truly fab piece of kit.
NHS Fife	Infant Holly Advanced	NA	Y	A more advanced and older style baby that gives the learner more opportunity for hands on practical training with paediatrics and with the manikin size being around 5 months old has opened up a different paediatric aspect in regard to assessing them.
NHS Fife	Nursing Anne Simulator x3	NA	Y	Has benefitted the 3 sites with a continuity of equipment. We have ensured that we have a diverse population of manikins with 2 with darker skin tone which has opened up the conversation around medical equipment and the chances that certain equipment can read incorrectly with darker skin tones. This is essential for the undergraduate to understand from as early as possible. The manikin also has the ability to have differing clinical presentations which had added to their assessing (e.g. stoma's)
NHS Fife	Venepuncture and cannulation arms	NA	Y	The benefits of this purchase are that venepuncture and cannulation sessions can be set up in each site. This skill is vital for all undergraduate students to perfect and the practice/teaching that happens with this skill benefits them greatly when moving onto real patients.

NHS Fife	Cameron Education Hub equipment	NA	Y	Each training model /trolley etc has benefitted the undergraduate and many ways. Each model can be utilised in a stand-alone teaching session or can be added to bigger teaching sessions within our simulated house e.g. a GP trainee is doing a house visit and they need to take blood- the arm could be in situ so there is no detraction from the scenario enabling greater immersion within the learning environment. The trolleys benefit through allowing clinical skills to be set up and moved in and out of position safely and easily.
NHS Fife	Queen Margaret Hospital Sim Centre equipment	NA	Y	Pelvic splints/binders have been very beneficial to have as it's real equipment for our students. It allows students to experience scenarios such as road traffic accidents so they can use the binders on manikins instead of just talking about it.
NHS Fife	Simulation equipment across sites	NA	Y	Benefitted the centres - Pat slides to allow the moving and handling of manikins be exactly the same as in real situations. Suture pads are allowing suture sessions to be easily set up in each site. Sim sleeve kits allow the recreation of different wound types- coupled with simulated blood products is enhancing the learning environment.
NHS Fife	Proximie Live Surgical Broadcast Equipment	NA	N	N/A

NHS Fife	Cedar House Residential Accommodation (capital funding paid direct to Board from SG)	NA	Y	Cedar House has been renovated and is ready to accommodate 20 medical students from July 2025.
NHS Fife	ScotCOM Cameron Hospital Development (capital funding paid direct to Board from SG)	NA	Y	The second half of the funding to complete the Cameron Education Hub has allowed to project to be finished and is now functional. ScotCOM students will join the hub in January 2026.
NHS Fife	2024/25 Board slippage (ScotGEM)	NA	Y	N/A
NHS Forth Valley	Undergraduate SIM - based on FY1 IR1 reports			
NHS Forth Valley	GP ACT Increase in Vocational Studies Tutors			
NHS Forth Valley	Increase in VS Tutor rate			
NHS Forth Valley	Re-banding of Undergraduate co-ordinator			
NHS Forth Valley	UG Administration Lead			
NHS Forth Valley	GP ACT - Increase in GP OSCE stations			
NHS Forth Valley	COMET Student LCP Travel Costs			
NHS Forth Valley	Practice Engagement Lead			
NHS Forth Valley	Digital GP Lead			
NHS Forth Valley	Increase in GP ACT teaching costs 2425			
NHS Forth Valley	Increase in cost of GP ACT funded staff			

NHS Forth Valley	Building works: Medical student accommodation at Falkirk Community Hospital			
NHS Forth Valley	West GP ACT Slippage			
NHS Greater Glasgow	O&G UG Simulation Lead			
NHS Greater Glasgow	Clinical Teaching Fellows			
NHS Greater Glasgow	HPE PG Cert			
NHS Greater Glasgow	GP ACT Increase in Vocational Studies Tutors			
NHS Greater Glasgow	QEUH Sub-dean			
NHS Greater Glasgow	Central Costs Uplift			
NHS Greater Glasgow	Increase in VS Tutor rate			
NHS Greater Glasgow	MSK Lead			
NHS Greater Glasgow	Undergraduate Administration			
NHS Greater Glasgow	Elderly Medicine Lead			
NHS Greater Glasgow	Widening Access Leads			
NHS Greater Glasgow	Emergency Medicine Co-Lead/Deputy Lead			
NHS Greater Glasgow	O & G Lead - Teaching Week			
NHS Greater Glasgow	Administration Support - O&G			

NHS Greater Glasgow	Part Task Trainers - Breast Models			
NHS Greater Glasgow	Suture Kits			
NHS Greater Glasgow	Control Laptops for Simulation			
NHS Greater Glasgow	CTF / Admin Laptops			
NHS Greater Glasgow	GP ACT - Increase in GP OSCE stations			
NHS Greater Glasgow	Medical Education Service/Business Manager			
NHS Greater Glasgow	Catheterisation Trainer Sets			
NHS Greater Glasgow	Neonatal Down's Syndrome Manikins			
NHS Greater Glasgow	Nasogastric Part Task Trainers			
NHS Greater Glasgow	Electronic Stethoscopes			
NHS Greater Glasgow	Airway Management Trainers			
NHS Greater Glasgow	Obstetrics and Gynaecology Clinical Skills Teaching			
NHS Greater Glasgow	Student Laptops			
NHS Greater Glasgow	Clinical Skills Consumables			
NHS Greater Glasgow	ENT Clinical Skills Equipment			
NHS Greater Glasgow	Clinical Lead - Head Neck and Neuro and Clinical Anatomy Liaison			

NHS Greater Glasgow	Educational Facilities at RAH			
NHS Greater Glasgow	Secure Storage and Charging Units			
NHS Greater Glasgow	Ophthalmology Clinical Skills Teaching			
NHS Greater Glasgow	Neurology Clinical Skills Equipment			
NHS Greater Glasgow	Expansion of GP OOH Teaching Programme			
NHS Greater Glasgow	COMET Student LCP Travel Costs			
NHS Greater Glasgow	Practice Engagement Lead			
NHS Greater Glasgow	Digital GP Lead			
NHS Greater Glasgow	Increase in GP ACT teaching costs 2425			
NHS Greater Glasgow	Increase in cost of GP ACT funded staff			
NHS Greater Glasgow	Discretionary Fund: Glasgow 16/12/24			
NHS Greater Glasgow	OSCE Support			
NHS Greater Glasgow	West GP ACT Slippage			
NHS Grampian	GP Clinical Teaching Hub (Forest Grove House lease)		N	Project delayed and no funding received for it yet
NHS Grampian	2 wte Physician Associates (spread 0.2 wte over 10 posts) to be distributed across departments to allow for significant increase in students		Y	

	and clinical placements and Category A teaching			
NHS Grampian	MBChB Clinical placement review project lead (4 sessions)		Y	
NHS Grampian	Maternity Leave cover for Senior Clinical Lecturer		Y	
NHS Grampian	NHS Clinical Portfolio Lead (2-year post over 3 ACT years)		N	Output has not achieved what we had hoped for, mainly due to limitations of the Medical School's MediCAL/IT dept, a key collaborator in this project, having other priorities within that 2-year fixed-term period. We will ask for a review at the end of the 2-year period in order to assess the needs going forward.
NHS Grampian	Student Preference Block Out Of Hours (OOH) GP		Y	
NHS Grampian	NHS Clinical Placement Support Lead (2-year post over 3 ACT years)		Y	
NHS Grampian	Remote consultation student clinics project lead (2-year post over 3 ACT years)		Y	
NHS Grampian	Evaluation of Accessibility to clinical placement / teaching areas – 2-year post/secondment over 3 ACT years		Y	well-received poster presentation at ASME in May 25; post holder also asked to report at RAWG on 30.09.25
NHS Grampian	Consultant Sessions to develop clinical cases for facilitated Case Based Discussions in Y1-3 MBChB – further 1-year extension for 2 post holders.		Y	

NHS Grampian	G1 - Team Lead for UG Clinical Skills & Director of Clinical Skills Centre		Y	
NHS Grampian	G2 - Clinical Lead for Extended Reality (ER) Technologies		Y	
NHS Grampian	G6 - Student Preference Block Out Of Hours (OOH) GP		Y	see evaluation in Part 1 of report
NHS Grampian	G7 - Senior Clinical Lecturers (Year 3 GP Tutors) 10% FTE x10		Y	
NHS Grampian	G9 - Year 3 GP Shadowing		Y	
NHS Grampian	G10 - GP Near Me		Y	
NHS Grampian	G3 - Maternity Leave cover for Senior Clinical Lecturer Year 1 GP Lead (20% FTE)		Y	
NHS Grampian	G4 - Sparkforms Software for Workplace Based Assessment and QA		Y	
NHS Grampian	G5 - Institutional subscription for VisualDX		Y	
NHS Grampian	G11 - Senior Years GP Placement Administration Coordinator: increase of existing 50% role to 100%		Y	
NHS Grampian	G12 - 50 PAs to be distributed across departments: remaining 15.5 PAs		Y	
NHS Grampian	G13 - Clinical Tutor for International Students (1 PA)		Y	
NHS Grampian	G14 - Emily test LISTEN training tackling GBV and sexual harassment in education		Y	

NHS Grampian	G15 - Aberdeen Anaesthesia Video Production		Y	
NHS Grampian	G16 - Ultrasound guided demonstration of vascular anatomy for medical students (Vscan Air SL)		Y	
NHS Grampian	G17 - Echocardiography for core cardiology competencies for medical students (Vivid iQ 4D v206)		Y	
NHS Grampian	G18 - Renovation of Royal Aberdeen Children's Hospital (RACH) 3rd floor Seminar Rooms (3)		Y	
NHS Grampian	G19 - Curtains rails, curtains and window blinds for Simulation Training Centre, ARI		Y	
NHS Grampian	G21- Flooring upgrade in Simulation Training Centre, ARI		Y	
NHS Grampian	G22 - Creation of Urology Teaching Hub		Y	
NHS Grampian	G23 - Increase in Clinical Skills Centre's Operating & Equipment budget		Y	
NHS Grampian	G24 - Student Welfare - increase from 1 to 2 sessions		Y	
NHS Grampian	G25 - Lead for Artificial Intelligence		Y	
NHS Grampian	G26 - Interprofessional education delivery for MBChB students with RGU healthcare students		Y	

NHS Grampian	G27 - Baird Family Hospital teaching space		N	Whilst it was necessary to order the equipment in 24/25, the facility itself is not yet open, as expected and previously indicated.
NHS Grampian	G28 - Upgrade of respiratory teaching room, ARI		Y	
NHS Grampian	G29 - Project Manager for GP teaching hub (2 years fixed-term, part-time)		Y	
NHS Grampian	G30 - Virtual Reality (VR) Anatomy Learning Software Avatar Medical Academy		Y	
NHS Grampian	G31 - Clinical Lecturer (as part of the Clinical Skills team) 1.0 WTE, up to 9 months		Y	
NHS Grampian	G32 - Lead for Inter-Professional Learning (IPL) (2-year pilot)		Y	
NHS Grampian	G33 - Software Developer Post in Learning Technologies Team		Y	
NHS Grampian	G35 - iPads for Year 4&5 students on clinical placements - top up devices before rolling replacement		Y	
NHS Grampian	G36 - Ascom phone for 4th year medical students in Reproduction Block		Y	
NHS Grampian	G37 - Family Planning Educator: Female Contraceptive Trainer		Y	
NHS Grampian	G38 - Clinical Facilitator: increase by 0.4 WTE		Y	

NHS Grampian	G34 - iPads for Year 4&5 students on clinical placements - rolling replacement programme		Y	
NHS Grampian	G39 - Additional equipment for Clinical Skills teaching		Y	
NHS Grampian	G40 - Lead for Artificial Intelligence in Clinical Practice – 2nd session (3 years initially)		Y	
NHS Highland	Clinical Practice educator time			
NHS Highland	ACT Admin Officer			
NHS Highland	ACT Admin Officer			
NHS Highland	Clinical Practice Educator (Psychiatry)			
NHS Highland	Electronic room booking system for Medical Education			
NHS Highland	Volunteer Patient Management system			system implemented and being used for ongoing management of VP programme. As yet, too early to evaluate impact but will continue to monitor through this academic year.
NHS Highland	Undergraduate Teaching Lead for Caithness General Hospital, Wick (1 PA)		Y	although delays in recruitment, we have already seen benefit of named lead with dedicated time to support co-ordination of local student placement activities while also supporting longer term planning and development work.
NHS Highland	Additional Deputy Director of Medical Education sessions (2 PA)		Y	this has supported an essential increase in capacity & resilience across medical education leadership team although this is part of a suite of action which have not yet all been able to be actioned, so maximum benefit not yet realised.

NHS Highland	Remote and rural programme leadership expansion		partial	additional deputy lead of programme appointed although delays in recruitment have meant full benefit not yet established, however work ongoing to further develop R&R programme with early years activity increased to promote R&R experiences from early stage
NHS Highland	Lead development and delivery of VR pilot - recurrent			
NHS Highland	Clinical placement review sessions		partial	developing detailed plans to support the anticipated increase in student numbers for A/Y 26/27
NHS Highland	Maternity cover for Year 4 GP block lead		Y	stability of block leadership
NHS Highland	Research into Remote and Rural and Sustainability			
NHS Highland	Professionalism/inclusion programme for students/trainees/trainers (staff time)			
NHS Highland	Pilot to develop and maintain a pool of actors for simulation to increase capacity and diversity		Y	has allowed recruitment of paid actors more aligned to demographic of simulation scenario/teaching aim but delayed implementation
NHS Highland	Student Hardship Fund		partial	there have been occasions where the student hardship fund has met a clear and urgent need and been able to support hardship caused or exacerbated by placement in Highland locations. It has been difficult to predict the funds required due to significant variation in need and ask, and in the timings of applications. We continue to review the process and liaise with student support

				teams to identify most appropriate route of support for individual students
NHS Highland	Raigmore Hospital Accommodation - increasing costs for service provision		Y	
NHS Highland	Virtual Clinical Experience sessions		Y	Evaluation indicated success of pilot with teaching well regarded by both students and rural faculty, allows early year student to get some insight into rural GP experience
NHS Highland	Faculty Development Day - 5th December 2024		Y	very positive development day with excellent engagement and feedback from faculty joining the event
NHS Highland	Replacement resuscitation equipment		Y	this has supported effective delivery of our ILS and resus training in context of increasing student numbers
NHS Highland	Secondary Care Outpatient Teaching Hub pilot			
NHS Highland	Hire of UHI Computer Rooms for PSA exam		Y	
NHS Highland	Clinical teaching for Diagnostics		Y	
NHS Highland	VR headsets and charging cabinets			
NHS Highland	e-Bikes and charging stores			
NHS Highland	iPads for Year 4&5 students on clinical placements - rolling replacement programme		Y	

NHS Highland	Convert existing office and store cupboard into teaching clinical consulting room			
NHS Highland	Chairs and tables for newly repurposed teaching room		Y	
NHS Highland	Medical mannequins		Y	
NHS Highland	Highland Student accommodation development (capital funding paid direct to Board from SG)		partial	this has allowed us to progress to stage 4 of the design/build with planning consent agreed and we continue to explore options to take through to completion
NHS Highland	Clinical Skills Support Worker (ScotGEM)		Y	
NHS Highland	Year 3 GCM (sick leave cover) (ScotGEM)		Y	
NHS Highland	Rental and service charges for Clinical Skills Centre (ScotGEM)		Y	
NHS Highland	Faculty Development budget (ScotGEM)		Y	supported faculty development activities
NHS Highland	Residential Accommodation costs (ScotGEM)		Y	
NHS Highland	Hire of UHI Computer Rooms for PSA exam (25% of the cost) (ScotGEM)		Y	
NHS Highland	Purchase of Interactive Touch Monitor (ScotGEM)		Y	
NHS Highland	Year 3 GCM (extension to sick leave cover) (ScotGEM)		Y	
NHS Highland	Furniture - chairs with tables (ScotGEM)		Y	
NHS Highland	ScotGEM Year 2 Lead maternity leave (ScotGEM)			

NHS Highland	2024/25 Board slippage (ScotGEM)			
NHS Lanarkshire	GP ACT Increase in Vocational Studies Tutors	N/A		CENTRAL
NHS Lanarkshire	Supervisor job plan		Y	This funding has enabled us to further support departments to embed student supervision and teaching with job plans through job planning and our MOT processes
NHS Lanarkshire	Palliative Care CTF		Y	Post recruited and has evaluated well, with good student feedback, department feedback positive, and we have added to forthcoming bid to make post recurring.
NHS Lanarkshire	CTF or Speciality Doctor Surgical Specialties - ENT		Y	50:50 post recruited and detailed JD developed and agreed. Will support student expansion as planned and move to anticipated new curricula. Post recruited as SAS doctor
NHS Lanarkshire	CTF or Speciality Doctor Surgical Specialties - Ophthalmology		Y	50:50 post recruited and detailed JD developed and agreed. Will support student expansion as planned and move to anticipated new curricula. Post recruited as CTF doctor initially
NHS Lanarkshire	Speciality Doctor (Education) Emergency Medicine		Y	50:50 post recruited and detailed JD developed and agreed. Will support student expansion as planned and move to anticipated new curricula. Post recruited as SAS doctor
NHS Lanarkshire	Psychiatry / Next Gen CTF Support		Y	This has enabled continuation of individualised student programmes and delivery of simulation to all students on Psychiatry placements our next gen program now includes site visits supported by CTFs

NHS Lanarkshire	Clinical Lead Trainers		Y	The increase is enabling the delivery of a comprehensive education programme on site & in insitu opportunities.
NHS Lanarkshire	Technical support		Y	This is enabling technical support for courses insitu setting giving greater authenticity to sessions with students participating in realistic experiences using Human factors methodology
NHS Lanarkshire	PG CERT costs for CTF		Y	All of our posts are supported to register for an undertake a PG CERT
NHS Lanarkshire	Administration support (paediatrics)		Y	This has been developed and implemented with detailed job role. This has enabled a movement of established admin process to move from block lead and CTf to administration colleague, enabling further teaching delivery, support and innovation
NHS Lanarkshire	Increase in VS Tutor rate	N/A		CENTRAL
NHS Lanarkshire	GP ACT - Increase in GP OSCE stations	N/A		CENTRAL
NHS Lanarkshire	Expansion of GP OOH Teaching Programme		Y	A GP University lead programme, but NHS Lanarkshire colleagues have been a major contributor and delivered this teaching successfully
NHS Lanarkshire	COMET Student LCP Travel Costs	N/A		CENTRAL
NHS Lanarkshire	Practice Engagement Lead	N/A		CENTRAL
NHS Lanarkshire	Digital GP Lead	N/A		CENTRAL
NHS Lanarkshire	Increase in GP ACT teaching costs 2425	N/A		CENTRAL

NHS Lanarkshire	Increase in cost of GP ACT funded staff	N/A		CENTRAL
NHS Lanarkshire	Director of Medical Education Session		Y	Session has been embedded in DME job plan.
NHS Lanarkshire	Extending use of bed side Ultrasound		Y	This has added to the authenticity of examination during bedside teaching and the opportunity to participate in ultrasound use as a diagnostic tool
NHS Lanarkshire	Blinds for teaching rooms at UHM		Y	This has been commissioned and delivered, and has improved the environment for UG teaching on site
NHS Lanarkshire	Department Educational Leads		Y	This post has had a detailed JD and role developed, and has been recruited, the successfully candidate is in post and session is reflected in job plan.
NHS Lanarkshire	Webcams / dongles for hybrid and online teaching		Y	This has enabled wider use of online teaching improving interactions
NHS Lanarkshire	ENT Head camera		Y	The head camera enables students to visualise on a larger screen exactly what the operator is seeing and doing this has improved engagement with surgical procedures and quality of teaching
NHS Lanarkshire	Medical Education Website		Y	The commissioning and technical aspects of the website and linked servers has now been completed, and content uploaded, the website is live for a number of departments and is in process of going live for all departments and sites
NHS Lanarkshire	Orthopaedic Virtual Reality Teaching		Y	This has enabled engagement in emergent technologies as a potential teaching method, and is aligned with service developments
NHS Lanarkshire	UHM Education room Replacement Flooring		Y	This has been commissioned and delivered, and has improved the environment for UG teaching on site

NHS Lanarkshire	Paediatric Simulation equipment		Y	The equipment has been embedded in the paediatric teaching enhancing engagement and learning
NHS Lanarkshire	West GP ACT Slippage	N/A		CENTRAL
NHS Lothian	NHS Lothian Occupational Health Support to Edinburgh UG students			
NHS Lothian	Lothian Medical Education UG Restructure			
NHS Lothian	UG Capacity in Lothian Mental Health Settings			
NHS Lothian	Clinical skills facilitators to deliver core clinical and procedural skills (Uni and Board posts)			
NHS Lothian	Acute hospital prescribing skills (UoE Yr4)			
NHS Lothian	Simulation Support to UG education			
NHS Lothian	Teaching & Admin Capacity in Year 4			
NHS Lothian	Paediatric Teaching Capacity			
NHS Lothian	GP prescribing education (yr 6 MBChB GP)			
NHS Lothian	Teaching and Admin Capacity Yr 4 (see bid 1064)			
NHS Lothian	Clinical Skills Equipment for site-based Skills Facilitators (See Bid 887)			
NHS Lothian	Immersive Simulation Space for Medical UGs in Lothian			
NHS Lothian	UG Clinical Skills Capacity building #2			

NHS Lothian	UG Clinical Skills Capacity building #1			
NHS Lothian	Student Access to Digital Systems in SJH			
NHS Lothian	Respiratory Medicine Virtual Clinic Pilot (SJH) 24/25			
NHS Lothian	Capacity building using LUCS (GP out of hours)			
NHS Lothian	Enhancing Communication Skills & Conflict resolution			
NHS Lothian	Supporting UG Faculty Development in Lothian			
NHS Lothian	Cynefin SenseMaker Software			
NHS Lothian	Lothian HCP Med additional allocation			
NHS National Waiting Times Centre	Central Costs Uplift			
NHS National Waiting Times Centre	Central Costs Uplift			
NHS National Waiting Times Centre	NHS GJ Bid - Cons Time			
NHS National Waiting Times Centre	NHS GJ Bid - Digital			
NHS Orkney	Admin support for Medical Education - regrading		Y	Has allowed faculty to reduce time spent on admin tasks
NHS Orkney	Faculty Development Alliance		Y	Has allowed GPs / consultants to travel to the mainland to help run OSCEs as well as FDA courses
NHS Orkney	Equipment. Adult nasogastric / nasojejunal trainer		Y	Increase student competency prior to attending hospital wards

NHS Orkney	Balfour Hospital: Teaching for medical students (2 PA)		Y	An increase in consultant contribution to teaching has improved the student experience
NHS Orkney	Laptop purchase for Clinical Teaching Fellow		Y	
NHS Orkney	Financial support for prospective medical students		Y	Funding has assisted with the financial outlays for prospective medical students when applying for medical school - 2 Orkney school pupils have been offered a place in medical schools.
NHS Orkney	Equipment - Arterial Puncture Wrist		Y	Increase student competency prior to attending hospital wards
NHS Orkney	Refurbishment student accommodation - Graham House		Y	Improved student experience
NHS Orkney	NHS Orkney Cost share of G34 - iPads for Year 4&5 students on clinical placements		Y	
NHS Orkney	Medical Education Away Day delegate costs		Y	
NHS Tayside	0.5 DME Band 6 support			
NHS Tayside	SSC Supervisor			
NHS Tayside	Pathology UG Teacher	Teaching delivered for Y1-3, new SSC in diagnostic histopathology also introduced. Contributions to assessment and MMI also undertaken.	Y	Design and launch of Pathology Live, a livestreamed dissection teaching format developed from scratch, which is now a timetabled teaching component with planned expansion. A comprehensive digital pathology resource to support UG learning, also being developed.
NHS Tayside	SSC Clinical Co-ordinator			

NHS Tayside	Gateway Module Lead - Caring in Practice	All required teaching delivered with all 29 students passing. Teacher seen as an excellent role model for students.	Y	Partnerships formed with NHS Staff Bank and NHST Volunteering service, with 28 students completing training as NHST Healthcare Support Workers.
NHS Tayside	Gateway Module Lead - Healthcare in Context	All required teaching delivered with all 29 students passing. Teacher seen as an excellent role model for students.	Y	Partnerships formed with NHS Staff Bank and NHST Volunteering service, with 28 students completing training as NHST Healthcare Support Workers.
NHS Tayside	GP Patient Journey Recruiter	Successfully recruited additional volunteer patients to permit all students to engage in the patient journey experience. In addition, developed thank you card for students to give to their patient, as well as updating the patient information leaflet.	Y	Additional volunteer patients will permit all students to engage in the patient journey experience. Updated the patient information leaflet. Further improvements are being put in place for the next academic year.
NHS Tayside	IMG Induction Lead	These posts have enabled delivery of a support programme including a 5-day enhanced induction, monthly simulation-based sessions, supervisor development and active bystander workshops. Evaluation from August and February cohorts showed 96% of IMG participants learned something new, and over 70% intended to change practice. Supervisor feedback has also been positive, and the programme won 1st prize at the UK National Conference on IMG Support (Feb 2025). The IMG Leads directly contributed to the NES led national WINS day and also contributed to the NHS Tayside F1 and F2 training calendar.	Y	Planned benefits have been fully achieved: improved onboarding experience, earlier structured support for IMGs, better supervisor engagement, and growing national recognition. Outputs include conference presentations, joint delivery of sessions with GMC, partnership with NES on piloting pre-start questionnaires, and cross-board collaboration via the Scottish regions' IMG support Network Group (SING). In addition, a research publication looking at NHS Tayside's enhanced programme, is in final draft. This is expected to be published in a reputed international journal.

NHS Tayside	Educational Guidance & Support Tutor - Widening Access	Since October 2023 there has been over 250 individual contacts with Y1 students, (the most in any year of study) with 15% of all contact with student support known to be Widening Access.	Y	Greater support for Widening Access students.
NHS Tayside	Digital Signage slippage	Equipment now installed and functioning.	Y	Digital signage providing improved communication and information around Ninewells about medical education
NHS Tayside	Maternity Cover			
NHS Tayside	Y1-3 Clinical Experience Lead	Student feedback was universally positive. Students recognised the value of applying their classroom knowledge to real patients and were grateful to have the opportunity at such an early stage of medical school. Tutor feedback was universally positive, and students commented on how fortunate they felt to be given dedicated time with a consultant or senior doctor.	Y	Delivery of 4 structured clinical ward-based teaching sessions to all Y1 students in 24/25 academic year. Catch up sessions also delivered. Tutors for these sessions were provided from the medical floor with nearly all medical wards being involved. On the back of the success of last year's sessions we are planning to offer ward based clinical teaching to Y1, 2 & 3 this academic year.
NHS Tayside	CTF Rooms wiring upgrades	Original CTF room re-purposed. Funds re-used for new CTF room within new DoME office	Y	New, improved facility for CTFs.
NHS Tayside	PRI Student Accommodation Refurbishment	Previously dilapidated accommodation now upgraded. 15 new rooms plus communal facilities now available for students at PRI from July 2025.	Y	Good quality, safe, onsite student accommodation now available at PRI, reducing the need for expensive alternative accommodation and travel.

NHS Tayside	Lifecast manikins x 2	These highly realistic looking manikins have been used in different parts of the curriculum throughout years 1-5. Predominantly, they have been used for BLS and acute care sessions in the MBChB. We have not undertaken any formal evaluation of this resource, but students clearly enjoy sessions involving them.	Y	The degree of realism is always a talking point in sessions and clearly engages students, enhancing the experience and learning during the sessions. We have also used the lifecast manikins in conjunction with the Immersion room. Again, this has led to highly realistic and engaging sessions for the students.
NHS Tayside	Clinical Reasoning Teacher	No specific evaluation undertaken.	Y	A survey of clinical reasoning teaching throughout curriculum was undertaken, there was a staff development session, and additional curriculum development.
NHS Tayside	Radiotherapy Licence	VERT software used for delivery of simulated teaching.	Y	240 medical students, 40 junior doctors and 94 radiotherapy students all benefitted from using the VERT software, which provided accurate simulated 3D radiotherapy treatment.
NHS Tayside	Global Citizenship extended session	As a result of the Global Citizenship initiative there is continued communication with the Dental School, and collaboration with the Social Medicine Society.	Y	The Global Citizenship event is now coming up to its 4th year and has grown each year, by number of applications towards the awards and the number of posters we have been able to display.
NHS Tayside	MACHS Building L3			
NHS Tayside	CTF (MFE, Ophthalmology, Oncology)	Feedback from staff and students	Y	There have been benefits to UG teaching and support to the increasing number of students at Ninewells.
NHS Tayside	UOD Laptops	Laptops being used	Y	Improved facilities for delivery of teaching
NHS Tayside	CTF Study Leave budget	Various training and development opportunities were taken up ranging from conferences, subscriptions, online courses.	Y	Improved knowledge and understanding for CTFs, which can then be cascaded down to students.

NHS Tayside	DoME additional management staff	Appointments not made until 2025, meaning it will take time for a full evaluation. Early signs are positive as the team continue to deliver against Directorate aims and undertake additional work.	N	Improved support to DME and NHS clinicians.
NHS Tayside	CTF Room upgrade additional costs	Original CTF room re-purposed. Funds re-used for new CTF room within new DoME office	Y	New, improved facility for CTFs.
NHS Tayside	Long Term Sickness cover - Palliative Medicine	Y4 clinical teaching, Y4 tutorials, case discussions all delivered. Design and delivery of Palliative/Oncology session.	Y	Continuation of Y4 Palliative teaching.
NHS Tayside	Digital Signage	Equipment now installed and functioning.	Y	Digital signage providing improved communication and information around Ninewells about medical education
NHS Tayside	Prescribing Theme Lead	Continued development of prescribing curriculum across all years and delivery of teaching. Focus on developing Y4 prescribing curriculum, scoping of timetabling and potential topics. Liaison with ScotGEM programme to deliver suitable curriculum for S3/D4 students.	Y	Oversight, mapping and continuing development of prescribing curriculum across all years of the MBChB programme. Content delivery.
NHS Tayside	Immunology Teaching Lead & UG Teacher	Teaching was delivered on SSC Lab Medicine, Y5 case studies were marked, engagement with exam database, timetable for Y1-3 agreed for next AY.	Y	Teaching for 25/26 AY for Y1-3 to contain new content and different delivery with much more interactive sessions planned.

NHS Tayside	CCS Lead additional sessions	This new child health teaching session for all Y2 students, provided the opportunity to practice consulting with the parent of a young child and with an adolescent. To maximise authenticity, we use actors in these simulations. Informal student and staff feedback has been very positive.	Y	Informal student and staff feedback has been very positive, and the teaching will now be an ongoing part of the child health block.
NHS Tayside	Resuscitation Officer			
NHS Tayside	Additional ENT transfer cohort teaching capacity			
NHS Tayside	Little Anne & AED trainer kit	This resuscitation training equipment has been vital in the delivery of the acute care, BLS and ILS courses throughout the five years of the curriculum.	Y	This is a well-established and highly evaluated part of the clinical skills programme, and the equipment has continued to support these sessions for the students.
NHS Tayside	Leonardo Simulation manikin	The new Leonardo high-technology manikin was purchased to replace a 15-year-old manikin. Leonardo has allowed us to continue to deliver half a day of acute care teaching to all Y4 students (around 1000 hours of student use annually) and a RCUK BLS course to all Y5 students.	Y	As well as replacing the old equipment, having this new equipment has encouraged us to redesign the Acute Care strand of teaching in Y1-3. As a result, all students now receive Acute Care teaching for six hours in Y1 and four hours in Y2&3, often utilizing Leonardo. This is an increase of 8 hours of teaching per student, roughly 2000 additional student teaching hours.

NHS Tayside	Transfer students practice OSCEs (Additional capacity)	A 5-station OSCE practice for organised for 29 students, covering clinical examination and patient consultation skills. Two parallel circuits were run with simulated patients and sessional assessors. Student feedback indicated an overwhelming positive response towards the OSCE practice organised, with students appreciating its value towards overcoming cultural barriers and significantly enhancing their confidence and competence in professional clinical practice across different contexts.	Y	As a consequence, transfer student performance in the Y3 summative OSCE exam has been remarkably better than the previous years with only two resits.
NHS Tayside	Urology Teaching Lead absence cover	Teaching cover delivered	Y	The cover is necessary to maintain UG teaching within the department in the absence of the current post-holder.
NHS Tayside	Palliative Medicine SSC	2 x Y3 SSC delivered and nominated for FAME award. Creation of Active Observation Tool specific for Angus SCC / Day Services / MacMillan Nurse Visits. Positive feedback from students and health professionals.	Y	This funding has enhanced UG teaching in Palliative Care and community-based care and expanded our teaching in Angus. We have been able to accommodate more student requests for SSCs and have more requests than we can accommodate.
NHS Tayside	Network cabling for Dermatology teaching room	Funds re-purposed for new DoME office	N	Improved facilities for DoME team
NHS Tayside	Upgrade to Neurology seminar room	Equipment being used		Improved facilities for delivery of teaching
NHS Tayside	DoME Office relocation	New office opened February 2025	Y	Improved facilities for DoME team
NHS Tayside	Uplift in GP sessional hourly rate	Uplift applied	Y	This bid was to standardise sessional clinical tutor payments within UOD and benchmark with NES sessional rates (as they were at the time of bid submission). This allowed consistency of funding provision across different elements of the

				MBChB curriculum and keeps UOD on an equitable footing with other educational roles nationally, facilitating recruitment and retention.
NHS Tayside	Upgrade of ENT Resource room	Equipment being used		Improved facilities for delivery of teaching
NHS Tayside	CTF + PGCME + Study Leave (Renal, Endocrinology)	Feedback from staff and students	Y	Improved knowledge and understanding for CTFs, which can then be cascaded down to students.
NHS Tayside	Y4 Clinical Placement support	A detailed evaluation of the placement support package delivered was undertaken by a CTF. This ascertained that since the introduction of this care package, numbers of students accessing student support for mental health issues reduced by 52%. Over 77% of students surveyed found the course relevant, with 57% feeling better equipped to deal with their wellbeing.	Y	Reduced use of student support services, improved understanding and wellbeing of students.
NHS Tayside	Professional fees for Ninewells accommodation building works			
NHS Tayside	Maternity cover - GP	Teaching cover delivered	Y	Continuity of critical teaching sessions for students.
NHS Tayside	MBChB Away Day	Attendee feedback found sessions very engaging, interesting and relevant to teaching roles. Good overview of curriculum.	Y	Knowledge sharing for staff, networking opportunities, tailored workshops
NHS Tayside	Upgrade of AMU teaching room	Equipment being used	Y	Improved facilities for delivery of teaching

NHS Tayside	Additional sessional GP Clinical Communication Skills (CCS) tutors and actors	Actors are a highly valued contribution to our CCS teaching sessions in Y2 & 3 to permit the teaching of more complex, sensitive or emotive clinical scenarios in which volunteer patients are unsuitable.	Y	Actors permit the teaching of more complex, sensitive or emotive clinical scenarios.
NHS Tayside	Diabetes workshop	Workshop developed as an OSCE style workshop with a variety of stations including diabetes emergencies, insulin prescription, sick day rules etc. Positive feedback received from students.	Y	Plans to continue to deliver this to Medicine 2 student cohort every 4 weeks with ongoing plans to deliver additional to the foundation assistantship Y5 students. Positive feedback with students feeling much more confident in terms of diabetes management as a result.
NHS Tayside	Resuscitation Officer add. 0.6WTE			
NHS Tayside	Clinical Skills equipment - PRI	The equipment is being used for mock OSCEs at PRI.	Y	In the 2025/26 academic year the equipment will be used for simulated teaching.
NHS Tayside	Skin models and Colourimeter	The skin and eye models are being utilised in teaching.	Y	The models enhance understanding of the anatomy with their 3D structure, and the experience is highly valued by the students/staff.
NHS Tayside	Electives Lead add. Sessions			
NHS Tayside	Palliative Medicine LTS cover	Teaching cover delivered	Y	
NHS Tayside	Ian Lowe centre AV equipment	Equipment being used	Y	Improved AV & IT facilities for delivery of teaching
NHS Tayside	Upgrade of Plastics teaching room			
NHS Tayside	UOD Laptops	Laptops being used	Y	Improved facilities for delivery of teaching
NHS Tayside	Increased actor costs	Increased costs due to VAT now paid	Y	Actors permit the teaching of more complex, sensitive or emotive clinical scenarios.
NHS Tayside	Plastics suturing kit			

NHS Tayside	Intravenous Fluid Workshop	This is an innovative learning activity, which ensures medical students graduate with the ability to accurately assess fluid status of a patient and safely prescribe intravenous fluids. The workshop includes theory, case application and simulated scenarios. The workshop has been a huge success, and we feel meets a previously unmet need in our senior students ahead of graduation.	Y	This workshop has been delivered to all Y5 students in the academic year 2024/25
NHS Tayside	Cameras and laptop	Equipment being used	Y	
NHS Tayside	Gateway - Orientation to Clinical Skills Lead	The postholder has been involved in the organisation of student shadowing placement and assessment (oral presentations, workbooks and reports) for 29 Gateway students.	Y	All of the students have successfully passed the Gateway 'orientation to clinical studies' module for this academic year.
NHS Tayside	Infant manikin	Equipment ready for use.	Y	Infant manikin to be used for 25/26-year Paediatric Emergencies Simulation teaching.
NHS Tayside	Teaching equipment	Equipment being used	Y	Various consumable items were purchased for teaching of Dermatology and Emergency Medicine. These contributed to improved teaching for students,
NHS Tayside	Widening Access equipment & Fees	The funding was well used with 96 stethoscopes ordered, and fees paid for the following: dissection fees for 85 students; PVG fees for 29 students, revision course fees for 30 students.	Y	Greater access for Widening Access students to equipment and activities integral to the medical programme.
NHS Tayside	DoME Office relocation costs top up	Office being fully utilised	Y	Improved facilities for DoME team
NHS Tayside	Upgrade of Respiratory teaching room	Equipment being used	Y	Improved facilities for delivery of teaching

NHS Tayside	Urology absence cover continuation	Teaching cover delivered	Y	The cover is necessary to maintain UG teaching within the department in the continued absence of the current postholder.
NHS Tayside	Teaching Support Technician	Postholder engaged on temporary contract	Y	Post provided great technical IT assistance to NHS staff. Role now funded on a recurrent basis.
NHS Tayside	Personal alarms for students	Alarms ordered in May 2024, but supplier failed to fulfil order. Money refunded and alternative supplier sought.	N	
NHS Tayside	AI Software Developer	Developer delivered an MCQ Generator application which facilitated the development of exam questions	Y	Exam questions generated from MBChB learning material. Plans are to develop more powerful question generating tools.
NHS Tayside	Replacement of AV kit	Equipment being used	Y	Improved facilities for delivery of teaching
NHS Tayside	GP Sessional rate uplift	Uplift applied	Y	This increase of sessional tutor payments was to benchmark the further increase to NES sessional rates as of December 2024.
NHS Tayside	GP Salary uplift	Uplift applied	Y	This increase to GP salaries for substantive clinical educator roles was brought about as a result of NHS pay awards. This keeps GP clinical educators on an equitable footing with other clinical educator pay scales, facilitating recruitment and retention. All relevant posts currently filled.
NHS Tayside	Additional Y3 GCM (ScotGEM)	The postholder received positive feedback from students and has undergone successful annual appraisal by the Academic Lead GCM.	Y	NHS Tayside continues to have larger student numbers in Y3, so that this post remains vital to the ongoing successful delivery of the programme locally.

NHS Tayside	Additional session of GP QI time (ScotGEM)	2 postholders recruited to this role.	Y	We have recruited 2 GPs on a 0.5PA basis which has resulted in ongoing successful delivery of HI teaching across this larger cohort of students.
NHS Tayside	Clinical Skills Y3&4 Lead (ScotGEM)			
NHS Tayside	2024/25 Board slippage (ScotGEM)			
NHS Shetland	Clinical Development Fellow Support - recurrent funding	The CDF posts has been instrumental in hosting increased numbers of medical students in 24/25. The feedback from the medical students on the standard of teaching provided in Shetland as being consistently of high quality. The CDF post has been	Yes	On going high quality education delivery for medical students by NHS Shetland.

NHS Shetland	Clinical Development Fellow (2) Support	central to NHS Shetland being able to host increased numbers of medical students in surgery, medicine and general practice. The ability of NHS Shetland to host increased numbers of students in Shetland fits with NHS Educations for Scotland ethos of increased exposure of medical students to remote and rural practice.	Yes	
NHS Shetland	Increase Study Budget	Allows for staff to have trainer skills		Values trainers and provides access to trainer courses
NHS Shetland	Student Accommodation basic supplies	Coming to Shetland is expensive and this fund has allowed the students to get basic staple foods on arrival	Yes	Helps with student wellbeing
NHS Shetland	Chest Manikin for chest tube insertion and needle decompression practice	Used for teaching and training as well as by the students for things like prescribing exam	Yes	Allows for high quality simulation sessions
NHS Shetland	Increased funding for consultant sessions to support undergraduate teaching and ILS provision	All students get ILS in Shetland	Yes	Allows Shetland to provide required training
NHS Shetland	Cost share of G34 - iPads for Year 4&5 students on clinical placements	As per agreement with university for cost share	Yes	Ongoing medical student placements
NHS Shetland	Student Hardship Fund	This has been beneficial for student in need and has helped a student in financial crisis. The governance process worked well.	Yes	Aid for students in financial need

NHS Shetland	Replacement furniture for student accommodation	The replacement furniture was selected based on durability, comfort, and space efficiency to meet the needs of student accommodation.	Yes	The replacement furniture improved the overall living experience for students by offering greater comfort and functionality.
NHS Shetland	Creation of Clinic Room for Students	Used in teaching and training sessions and simulation	Yes	Allows for high quality simulation sessions and patient history and examination
NHS Shetland	Equipment for Medical Student Clinic Space	Used in teaching and training sessions and simulation	Yes	Allows for high quality simulation sessions and patient history and examination
NHS Shetland	New Flooring for Medical Student Clinic Room	Used in teaching and training sessions and simulation	Yes	Allows for high quality simulation sessions and patient history and examination
NHS Shetland	Refurbishment of student accommodation	The replacement furniture was selected based on durability, comfort, and space efficiency to meet the needs of student accommodation.	Yes	The replacement furniture improved the overall living experience for students by offering greater comfort and functionality.
State Hospital	Secretarial Support for Undergraduate Education	N	Y	Secretarial post adequately funded for work carried out.

Appendix 2: Local Governance

Board	Previous Year (2023/24)	Changes (2024/25)
NHS Ayrshire & Arran	<p>RAWG is attended by the Director of Medical Education (Dr Hugh Neill) and the Senior Finance Manager with responsibility for ACT (Ian Ferris). Currently deputies are not used but normally one of the representatives is able to attend. The DME and Senior Finance Manager meet regularly to review Medical ACT.</p> <p>ACT funding and how it is used is considered by each of the Specialty Training Quality Management Groups (TQMG) who are invited to bid for funding. The Medical Education team (DME and ADMEs) consider bids from the TQMGs and wider opportunities for ACT funding to support undergraduate teaching across multiple areas.</p>	<p>Hugh Bunyan, Management Accountant, supports management of the ACT budget alongside Ian Ferris.</p> <p>Otherwise no changes needed.</p>
NHS Borders	<p>Decisions regarding the use of Medical ACT monies is discussed within the medical education team initially. Once the proposal is agreed at this level it is then brought to the board through the medical director for approval. Once approval is agreed this is followed by discussions with appropriate departments (if necessary) to carry out the required piece of work relating to the proposal. The proposal is then discussed at regional group for approval before proceeding. NHS Borders is represented by the DME (Dr Olive Herlihy), Medical Education Manager (Kath Liddington) and local Finance representative (Donna White) for ACT at Regional ACT meetings. If the DME is unable to attend, then this is delegated to the ADME (Dr Andy Duncan). Finance and Med Ed manager will liaise to ensure the presence of one or the other. The only change to this process for 2024 was advertising and filling vacant posts in Med Ed funded by ACT. Previously these posts went through the grip and control process, but the finance director has clarified the process for posts externally funded</p>	<p>Dr Andy Duncan has retired and the new ADME is Dr Mat Topping</p>

<p>NHS Fife</p>	<p>The DME, ADMES and Medical Education Manager meet regularly to discuss spending new ACT monies whether it be recurring or non-recurring. Spending requests can come from this core team or the wider medical education team such as the Clinical Skills Facilitator, Simulation Centre Manager or Local Module Leads. Bids are then entered into the Fife spreadsheet held by the St Andrews ACT Officer and presented to the RAWG for NES to consider. Once approved, discussion is had with the finance team and if there are items to be purchased this is then actioned. All bids are saved on an internal spreadsheet for accountability purposes.</p> <p>In order to ensure purchases made from ACT are beneficial to teaching, e.g., the use of sim models, we collect feedback after teaching and make amendments to sessions if necessary. There is a sim equipment database being created and remains a work in progress.</p>	<p>In the last year the Local St Andrews ACT Group (LSAG) has been set up. The group consists of members from NHS Fife, NHS Borders, NHS Forth Valley and the University of St Andrews. The aim of the group is to ensure transparency and accountability in delivery of Medical ACT between the parties involved. The group is accountable to RAWG. It is hoped that bids will be discussed and approved at LSAG, entered into the TURAS app, and then RAWG can be used to seek clarity on bids, but also focus on other items other than bids.</p>
<p>NHS Grampian</p>	<p>Grampian is one of five Boards aligned to the North Regional Medical ACT Working Group (RAWG) and has representation on the RAWG. It therefore contributes to the decision-making process for new funding of the North Boards, to curricular discussions and a wide variety of other regional and national issues.</p> <p>LAWG meetings are generally scheduled ahead of RAWG meetings so that the LAWG members can consider upcoming RAWG items and Grampian's position/requirements in good time. In addition to the LAWG meetings, we also have a number of ad-hoc meetings throughout the year with relevant members of the group regarding specific proposals and aspects of the budget out with these formal meetings.</p> <p>We have monthly meetings between our ACT Manager, Senior Finance Manager and UG DME to ensure contemporaneous communication around spending.</p>	<p>The DME attends the NHSG Medical Directorate meeting.</p> <p>DME attends NHSG/UOA Education and Training Sub-group</p> <p>DME attends NHSG reformed Medical and Dental Education Governance Group (MDEGG)</p>

	<p>There are regular monthly meetings between the Medical School's curriculum team/Teaching Dean, undergraduate DME and ACT Manager, to discuss and co-operate on a variety of relevant issues such as: the appropriate use of ACT funding including the review of specifically agreed consultant sessions, RAG reports and other forms of student and tutor feedback, MoT requirements and impact, job planning, potential issues of NHS service pressures on UG teaching and conversely changes in curriculum and its impact on the provision of clinical teaching.</p> <p>There is also a TUTELAGE committee with wide representation from NHS clinical specialties and management and University colleagues, whose remit includes the governance of clinical teaching as well as liaison with the LAWG on the use of ACT monies and to encourage services to apply for appropriate funding. It meets three times a year. Relevant matters are discussed at Grampian's Medical & Dental Education Governance Group which reports through the Staff Governance Committee to the Board.</p> <p>The DME attends the NHSG Medical Directorate meeting.</p> <p>The DME reports directly to Associate Medical Director for Workforce and Education who reports to NHSG Medical Directorate meetings. DME attends this meeting when required.</p>	
NHS Greater Glasgow & Clyde	<p>The DME attends the University of Glasgow quality management meetings. The DME, UoG Head of School, Head of the Undergraduate Medical School and the Post Graduate Dean attend the NHSGGC Medical Education and Staff Governance meeting chaired by the Board Medical Director/Deputy Medical Director.</p> <p>These meetings take place 3-4 times per year</p>	<p>No significant changes.</p> <p>The Meeting Education and Staff Governance Group meeting is chaired consistently by the</p>

	<p>The DME reports to the Board Staff Governance Committee meeting twice a year on all training matters including undergraduate students. These structures provide governance and assurance about medical student training and learning.</p> <p>Regular meetings with the Head of the Undergraduate Medical School, their deputy, and the School Manager take place at which all matters ACT related are discussed - these are scheduled monthly meetings, but ad hoc meetings also take place to accommodate any urgent issues.</p> <p>NHS Greater Glasgow and Clyde has consistent engagement with and representation at the Regional ACT group. The DME, Programme and Business Manager and senior finance support routinely attend meetings of this group. Where the DME is unable to attend, we ensure that the Directorate Programme and Business Manager is able to attend.</p>	<p>Board's Deputy Medical Director (Corporate Services).</p>
<p>NHS Highland</p>	<p>The ACT budget is discussed at NHS Highland Medical Education Governance committee which meets every quarter with attendance from senior leadership and medical education teams.</p> <p>Throughout the year issues can arise at local level within clinical departments e.g., staffing pressures, service changes which can have an impact on medical education, and our department continues to work with those areas to support the delivery of teaching, which may require non-recurring or recurring ACT funding, or approval for changing how existing ACT funding is being spent. In addition to this there is the National Survey, national RAG report and university feedback processes for undergraduate medical education which can influence how ACT funding is used. ACT spend is reported through the Highland and islands University of</p>	<p>No significant change but we are reviewing our education governance meeting structure to ensure most efficient use of clinical leadership time and capacity.</p>

	<p>Aberdeen Tutelage meeting (chaired by NHS DME) and ensure key university faculty are reviewing quality indicators and identifying opportunities to respond which may require ACT bids. Combined undergraduate and postgraduate local educational governance meetings are held within directorates to discuss survey feedback data and action plans related to undergraduate teaching will help to identify priorities for ACT bids. Bids for ACT funding are discussed within the board by a small committee consisting of DME/UG ADME, medical education Service manager, university representative, teaching fellow +/- senior representation from the clinical skills team, and those with local approval will be submitted to the RAWG.</p>	
<p>NHS Lanarkshire</p>	<p>The DME through the department management meetings (formal) and 1:1 meetings with Undergraduate senior team will develop the bids which are then developed and managed with the Deputy Director of Finance and the Medical education manager. The finalised bid is presented to Regional MAWG.</p> <p>The delivery and quality management are formally reviewed and reported by Medical Education Governance group. MEGG is co-chaired by the DME and Medical Director of the Acute Division and reports to the Quality Planning and professional Governance group which reports to the NHS Board</p> <p>DME, ADME, medical education manger will complete reconciliation documents from Regional MAWG, and NES reviewed and signed by DOF.</p> <p>DME reports to Executive Medical Director with regular 4-6 weekly 1:1 meetings, where ACT is discussed as required and appropriate. The DME now reports quarterly in common with other groups to the Quality Planning and Professional Governance group, with 3 interim reports and an annual main report.</p>	<p>We have established regular departmental meetings to specifically discuss ACT and undergraduate delivery and quality on a quarterly basis, which will as necessary feed into the governance structure e.g. MEGG, either through a DME update and DDME UG report.</p> <p>The Scottish Clinical leadership fellows have this year created a form / bid proposal document for departments and or colleagues involved with UG teaching and learning to complete to request consideration for ACT funding, these will be reviewed by the above group</p>

NHS Lothian	<p>Our Board governance of medical education and training (including the oversight of Medical ACT) is illustrated in the org chart at point 2. Specific to ACT governance, the Lothian DME and Service manager meets with the NHS Lothian Finance lead for ACT (and R&D) monthly. The Lothian lead has regular meetings with the UoE ACT officer, and all 4 members meet prior to each as per 22/23. In addition, for 23/24 the appointment of a Business Manager for Lothian Medical Education has facilitated more regular discussions with service line finance managers & clarity on ACT budgets. We are supported by a senior finance lead from NHS Lothian.</p> <p>Regional ACT meeting (3 times/year) usually with the MBChB Programme director prior to the allocation meeting in June or September.</p> <p>In addition, for 23/24 the appointment of a Business Manager for Lothian Medical Education has facilitated more regular discussions with service line finance managers & clarity on ACT budgets. We are supported by a senior finance lead from NHS Lothian.</p>	<p>As per 23/24</p> <p>In addition, our newly established UG Educational Governance Group (NHS Lothian & UoEdinb) will have its first official meeting on Nov 12th '25</p> <p>See appendix for role and remit of the governance group</p>
National Waiting Times Centre	None provided.	Governance for Medical ACT is via the above structure. From 2025 there will be an annual review with the Director of Finance, Medical Director and Director of Medical Education. The report from this meeting is submitted to the Board.
NHS Tayside	Local ACT meetings are usually chaired by the DME, and also attended by a Deputy DME, an Associate DME, Medical Education Manager, ACT Officer, Medical Education Co-	RAWG meetings are now more streamlined as they don't discuss bids in any great detail, as these are discussed at LACT and

	<p>Ordinator, and various University of Dundee representatives. Local ACT meetings also have a quoracy requirement which was reviewed in 2021 as part of the terms of reference review.</p> <p>All bids (including re-assignment of sessions and new bids) are reviewed and refined by the ACT Officer before being submitted to the Local ACT meeting, where they are scrutinised and reviewed before being approved as appropriate. Local meetings are also serviced by NHST DME team admin support. Once approved all new bids are then submitted to NES for review, prior to the next Regional ACT Working Group where the bids will be formally discussed, and formal approval decisions then made by NES. It was agreed with NES towards the end of the 2021/22 financial year that new bids could be agreed by the DME without holding additional regional meetings and then forwarded to NES via email for approval in order to spend NHST's 2021/22 ACT allocation.</p> <p>Changes were implemented in 2024/25. These relate to a revised Terms of Reference for RAWG meetings, with bids now discussed at Local ACT meetings, leaving more time to discuss strategic issues at RAWG meetings. Meetings will be held three times per year.</p>	<p>then submitted to NES via TURAS. This frees up more time to discuss other issues.</p>
State Hospital	Not provided.	Medical Act forms part of reports on Medical Education to the Board.

Appendix 3: Sharing Intelligence around Medical ACT

Board	Bid Name	Details
NHS Ayrshire & Arran	Pharmacist-Led Prescribing Education Pilot, Simulation Centre – Park Ward, Ailsa Site	<p>1. Pharmacist-Led Prescribing Education Pilot (NHS Ayrshire & Arran)</p> <p>Background: Paper-based prescribing training has become outdated with the shift to electronic prescribing. An online prescribing platform (BPSA), used nationally for the UK Prescribing Safety Assessment (UK PSA), was piloted as an alternative.</p> <ul style="list-style-type: none"> • Implementation: • Rolled out across 3rd- and 4th-year medical/surgical placements. • Paper cases (2–3 per session) replaced by 12–15 shorter online cases. • Feedback collected via MS Forms and facilitator discussions. • Key Findings: • Students: found the system easy to use, valued real-time feedback, enjoyed engaging/realistic cases, felt better prepared for PSA, and requested more independent access. • Facilitators: preferred the method, noted improved pacing and broader clinical coverage, and reported minimal IT issues. • Benefits: • Web-based, reliable, widely used system with updated drug bank. • Simulates real-life prescribing errors. • Flexible for in-person, online, or self-directed learning. • Enables catch-up and ongoing practice. • Challenges: • Cost: individual student licenses are required, making the model costly and inefficient for single boards when placements last only 5 weeks. • Access: students need a suitable device. This was not a barrier in the pilot as most used personal devices, but board-owned laptops should be retained to ensure equity. • Conclusion: <p>The pilot has been highly successful, modernising prescribing education,</p>

		<p>improving student engagement, and aligning with national standards. Since its launch, other Health Boards have expressed interest in adopting the approach. NHS Ayrshire & Arran has developed both delivery models and expertise in content creation that could be shared. Given regional interest, student demand, and the high costs of a single-board model, we recommend exploring expansion of this pilot beyond NHS Ayrshire & Arran in collaboration with the University of Glasgow.</p> <p>2. Simulation Centre – Park Ward, Ailsa Site (Opened 1st April 2025). Partly funded through Medical ACT. The newly opened Simulation Centre at Park Ward has significantly enhanced our capacity to deliver high-quality, immersive medical education. The centre features a spacious simulated ward and an additional large training room, enabling a diverse range of simulation-based learning experiences. We run Undergraduate Skills and Drills and Deteriorating Simulation as below for each of our rotational 3rd and 4th Year Medical Students:</p> <ul style="list-style-type: none"> • Day 1 – Skills and Drills: Airway management; CPR and defibrillation; sick patient assessment; communication and escalation; and optional venepuncture and cannulation. • Day 2 – Deteriorating Patient Simulation: Student-led objectives; Familiarisation with SimMan and environment; Four full simulations with structured debriefs; and structured debriefs focusing on technical and non-technical skills. <p>In addition, within this space medical students are involved in:</p> <ul style="list-style-type: none"> • 5EM Course: Emergency medicine training • Mental Health Simulations • CONnECT Course: Conversation on Emergency Care and Treatment - Designed to build MDT confidence in end-of-life discussions • International Medical Graduates (IMG) simulation-based sessions • Cross site Critical Care Simulations <p>The simulation ward has also supported multidisciplinary training by benefiting a wide range of staff groups. It has been used by ANPs (Hospital at Night and Community), Ayrshire Urgent Care Service,</p>
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		<p>physiotherapists, and for paediatric simulation. It also hosted faculty development, FY1 deteriorating patient training, ILS/BLS sessions, and venepuncture and cannulation training.</p> <p>Instructor feedback since moving to Park Ward has been positive, noting that the space is fit for purpose with improved teaching flow, increased student capacity, and more engaging, realistic simulations. The flexibility of the facility has supported a range of training needs, and the bright environment and surrounding gardens have contributed to staff and learner wellbeing. Student and staff feedback indicates high satisfaction with the training delivered in this setting.</p>
NHS Borders	CTF post, Laptops procured and installation of study pods	<p>While many other boards have CTFs post this year marked the first appointment of a Clinical Teaching Fellow, funded through non-recurring ACT. The doctor employed had four years of post-grad training and integrated effectively into the team. His extensive clinical experience enabled him to navigate departmental structures with ease and engage productively with both tutors and trainees, thereby enhancing the quality of teaching. He collaborated with various departments, particularly in the development of simulation-based learning opportunities for students, adopting a multi-professional approach. Additionally, he continued to advance our widening access Programme and actively engaged with local schools. This role also plays a key part in preparing for the implementation of SCOTCOM in 2026, particularly in supporting foundation-level training. The confirmation of continued funding for this post at a more senior level is reassuring for the team, as a Clinical Teaching Fellow with this level of experience can operate with greater autonomy—an important asset within a small team.</p> <p>Laptop computers were procured for student use during placements and assistantships. These devices were stored in the previously acquired iPad lockers, allowing for secure registration and tracking when issued to individual students. While not all students opted to use the laptops, those</p>

		<p>who did provided positive feedback regarding their utility and convenience.</p> <p>The installation of study pods in the library has provided students with individual workspaces within a shared environment. This initiative has been well received, with positive feedback from those who have made use of the facilities.</p>
NHS Dumfries and Galloway	CTF posts, maintaining 16 bicycles and annual contribution to the Doctors' Mess	<p>We have appointed ACT funded CTFs for ScotGEM year 4 (Waqas Hussain) and Psychiatry (Aleks Poziemaska) together with a CDF in O&G (Anna-Maria Liepner) to support teaching and supervision in these clinical areas.</p> <p>We continue to maintain 16 bicycles which are well used and necessary, as some accommodation is off the main DGRI site and public transport in a rural area is often not optimal. The bikes also promote sustainable travel and contribute to overall student physical and mental wellbeing.</p> <p>We continue to make an annual contribution to the Doctors' Mess, which ensures a comforting supply of coffee, tea and snacks during breaks and the opportunity to spend some down time with the resident doctors.</p>
NHS Fife	Nursing Anne Manikins x3	<p>Nursing Anne Manikins x3 - these manikins have allowed enhanced teaching over 3 sites; Victoria Hospital, Queen Margaret Hospital and Cameron Hub. They have offered a large range of training options that can enhance any training situation from the basics of catheterisation etc to more urgent care. Students from different universities on placement in different modules have benefitted from practising skills using these manikins. They are individually much cheaper than manikins previously purchased.</p>
NHS Forth Valley	Accommodation upgrades	<p>Medical student accommodation works – NES supported the successful bid for modernisation and refurbishment of the whole building using money from slippage.</p>
NHS Grampian	Evaluation of accessibility to clinical placement, an extended reality session, international student support and teaching space upgrades	<ul style="list-style-type: none"> Evaluation of accessibility to clinical placement: 2-year projects which commenced in May 2024. Around 200 placements across Grampian and Highland assessed to date, identifying common areas of challenge,

		<p>raising awareness providing suggestions for solutions. Whilst not yet concluded, we already see significant progress and anticipate sharing intelligence through a report/presentation at the North RAWG in September 2025.</p> <ul style="list-style-type: none"> Extended Reality Session: Has allowed us to establish a VR Lab and our students have access to an online booking system. <p>VR has become a powerful tool in our teaching. Key benefits are enhanced clinical anatomy teaching, spatial understanding, safe and repeatable practice, active and engaging learning online eg accessibility and flexibility and improved knowledge retention.</p> <p>We have received very positive feedback from our students. We are currently also awaiting approval from IT to introduce an integrated VR - AI platform which will enable students to prepare for interactions with patients and colleagues and enhance their communication skills.</p> <ul style="list-style-type: none"> International Student Support: Role is evolving but has started looking at ways to improve the bridging course for international students as well as addressing issues such as communication skills, disciplinary concerns, exam resits and has a supportive pastoral element vital to the success of our international students. Upgrade of teaching rooms throughout ARI: Allows for increased capacity on placement as well as novel ways of delivering teaching by clinicians to a wider audience.
NHS Greater Glasgow and Clyde	CTF posts, Consultant PAs, Administrative posts and equipment / kit purchased to support teaching	<p>The use of CTFs continues to have a positive impact on student feedback. The additional ACT funding secured to increase our Clinical Teaching Fellow complement has been hugely beneficial; the quality of CTFs was regarded locally as excellent and they were highlighted as a major asset. We have been able to begin to explore their use in some smaller specialties where increasing demands on clinical staff time limit capacity to provide high quality teaching.</p> <p>We utilised ACT funding to support additional Consultant PAs aimed at organisation and coordination of specialty teaching and vertical themes. Administrative posts were also funded in order to support coordination and</p>

		<p>administrative elements of UG teaching and to release clinician time to teach. Whilst posts were only filled fairly late in the financial year, these have already begun to have an impact locally.</p> <p>A range of equipment/kits were purchased to support teaching including</p> <ul style="list-style-type: none"> • Part task breast model trainers for our teaching fellows to offer more opportunities for students to practice clinical skills on patient sensitive areas. • ophthalmology teaching arms for slit lamps to support improved clinical exposure through allowing students to experience more detailed eye examinations. • Catheterisation sets to support teaching of male and female catheterisation, incorporating some basic AR technology. • Nasogastric part task trainers - anatomically correct nasogastric insertion manikins that offer three routes for EN tubes and allow training with real liquid foods. • O&G birthing simulators to simulate real world scenarios via safe, replicable and wearable models; and foetus ultrasound trainers to support the learning of skills for second trimester foetal screening, enabling skills such as assessment of foetal size, and measurement of amniotic fluid volume etc. • AV equipment to improve educational facilities by enabling digital approaches to teaching.
NHS Highland	To support clinical placement capacity	<p>Bids in recent years support clinical placement capacity through clinician sessional time and recruitment of a project manager have been beneficial in allowing us to develop plans to support the anticipated increase in students from 2026. Managing increased numbers is complex with both faculty and infrastructure requirements, and while we have been able to make long terms plans to support the increase, we continue to face challenge in progress property / infrastructure proposals – both through capacity of core team, access to support from other directorates and the impact of current capital funding availability.</p>

NHS Lanarkshire	Pilot for Out of Hours (GP) attachment, recruited 2 Speciality doctors SAS grades, developed and introduced recognition and management of the sick child simulation course and a new Professionalism sim course	<ul style="list-style-type: none"> • We have successfully delivered along with Glasgow University colleagues a pilot for Out of Hours (GP) attachment for Glasgow university students, this has been well received and received positive student feedback, presented at local RAWG. This offered students an understanding of health care systems and acute Primary care presentations. It is hoped this will be embedded in the new Glasgow curriculum. • We have successfully recruited 2 Specialty doctors SAS grades in 50@50 posts, with 50% CTF duties and 50% clinical, funded by service. This has been done in ENT and ED, and we aim to deliver similar Paediatrics in the next year. This has many benefits particularly in smaller specialties; it allows a more clinically experienced doctor to deliver teaching, provides resilience to teaching delivery, not being reliant on annual recruitment, and provides an alternative route of career choice within medical education, one which can be very successful and allow the doctor to progress in seniority and experience within education. • We have developed and introduced a Recognition and management of the sick child simulation course. This mirrors the adult course and helps students feel more comfortable in assessing an unwell child, especially if delivered earlier in the block, and provides long-term foundational skills and familiarity in this area. • The new Professionalism sim course has been welcomed by the students especially as it feels a less stressful introduction to sim compared to more heavily clinical orientated sessions.
NHS Lothian		<ul style="list-style-type: none"> • Improving induction and onboarding for undergraduate students in NHS Lothian • Improving undergraduate surgical experience in NHS Lothian • Undergraduate Ideas Exchange • ACT-funded consultant posts • Undergraduate Scholars • NHS Lothian Undergraduate Hybrid Clinics

		<ul style="list-style-type: none"> Enhancing Capacity to Host UG Students in Lothian Using Community Placements
National Waiting Times Centre	Upgrade of teaching facilities and capacity building	The Golden Jubilee has historically under invested in its undergraduate teaching programme. This year ACT funding has been focused on a basic upgrade of teaching facilities and capacity building. This has included increased consultant teaching time, refurbishing the library, updating medical education webpages and new computer equipment. It is hoped that more innovative bids will follow the 1-2 years of capacity building. At this stage the Golden Jubilee is benefiting from shared intelligence from other boards – for example mirroring the Educational Pods utilized by the GGC team.
NHS Orkney	Schools Liaison Project	Our schools liaison project continues with a local GP practice. This supports local pupils applying to medical school. In 2024/25 we had a new bid for a fund to help them attend interviews, travel off island with a parent, and also clothing. Parents were very grateful that this was available. 2 school pupils successfully gained entrance to Scottish medical school, commencing September 2025. There are 4 prospective applicants for the following year.
Scottish National Blood Transfusion Service		No Information Provided
NHS Tayside		No Information Provided
NHS Shetland	Student Hardship Fund	NHS Shetland introduced a student hardship fund. The cost of living in Shetland is often higher than on the mainland and students have to build up staple food supplies on arrival on the island as transporting essentials is not practical. More and more students have to work to help with cost of

		<p>living and this can be difficult for students choosing remote and rural placements, as they can find it hard to get bank work (despite once for Scotland approach the paperwork and red tape seem to be make it very difficult).</p> <p>The student hardship fund has a supporting governance framework. In 2023/24, the fund was used once for a student in need.</p>
The State Hospital	Bus trip and Secretarial input to organise the programme	<p>A bid was considered to fund a bus trip for 50-55 Edinburgh medical students several times per year to visit the hospital. Unfortunately, we were not provided with proposed dates for the trip with enough notice to book the necessary facilities at the hospital to accommodate the students.</p> <p>Another bid was successful for funding secretarial input to organise the programme.</p>
NHS Western Isles		No Information Provided

Appendix 4: Anticipated Changes to Undergraduate Medical Teaching

We asked Boards: Please provide details of any anticipated changes to undergraduate medical teaching in your Board in the forthcoming academic year which could impact on use of Medical ACT.

Board	Confirmed Changes	Changes being Considered
NHS Ayrshire & Arran	No significant changes anticipated for 25/26 year but significant changes to the Glasgow curriculum will have a massive impact in 26/27 when there is a period of transition involving students on both the old and new curriculum	Blank
NHS Borders	The Orthopaedic Department has commenced hosted students from the University of Edinburgh during the 2024–2025 academic year	Hosting of SCOT COM students in 3 practices for M-LIC July 2026 Foundation prep Jan 2027
NHS Dumfries & Galloway	Glasgow's New Curriculum Glasgow are required to make major changes to their curriculum to meet the demands of the GMC and the Medical Licensing Agreement (MLA). This is mainly to accommodate a 50% increase in the number of medical students, while continuing to ensure that all UK medical graduates demonstrate a consistent level of core knowledge, skills, and behaviours necessary for safe practice. I have summarised the likely changes to undergraduate medical teaching in Dumfries in the column on the right	The new 3rd year from Jan 2026 There will be 4x5 week 3rd year Medicine and Surgery blocks starting second week in January 26. This will lead to a five-week overlap for 3rd and 4th year that month. Glasgow accept that we aren't in a position to accommodate six additional Medical and six additional Surgical students and will place the 3rd years elsewhere. We might however be in a position to take students who live locally. Veronika Flaskarova will look at postcodes. This would require a discussion with Kate and a temporary increase in Educational Supervision for this one overlap block only The new 4th year from Sep 2026 The new 4th year is going to be 9x4 week subspecialty blocks including GP, O&G, Psych, Paediatrics, Cardio/Neurology, MSK, Oncology/Frailty, SSC and Emergency Medicine, from September 2026. Difficult to

	<p>see exactly how or where we will or can fit into this unless we were to offer 'Emergency Medicine' blocks that rotate up to 8 students, 2 per specialty, through ED, AMU, SAU and Critical Care between September and December 2026, for one year only. This will depend on whether the ILOs for Emergency Medicine can be delivered in AMU, SAU and Critical Care settings. Malcolm will get back to us about this. Critically important for Dumfries is that we don't lose a year of ACT funding.</p> <p>The new 5th year from Aug 2027 This will start on 16 Aug 27 with 2x10 week Senior Medicine and Senior Surgical blocks (students will come back for two weeks after Christmas). The Senior Medicine block will be essentially unchanged and will include a week of Oncology at the end of each block. The Senior Surgical block will now include surgical subspecialties that we can't offer, namely ENT, ophthalmology, vascular, urology and paediatric surgery. We have suggested the Surgical block rotates students to Dumfries for 5 weeks general surgery and to Glasgow for 5 weeks of subspecialties. Malcolm said he believes this could work. Again, critically important for us is that we don't lose a year of ACT funding.</p> <p>Spreading the cost of GP Transition Funding to support curriculum change Glasgow are submitting a proposal to SG for additional GP funding to the tune of £1.3 million. I was under the impression that if SG decide not to fund this then Glasgow would want to spread the cost across the WoS boards. Malcolm was able to reassure us that this is not the case. If SG don't fund then Glasgow will revert to plan B which is likely to be online learning.</p>
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		<p>ACT funding Ellie Biddulph from NES and Evelyn Laing from ACT recognise that we can't lay off CTFs for a year during the transition to the new curriculum and are working on a plan that will protect our ACT funding. Malcolm Shepherd said he was confident about this.</p>
NHS Fife	<p>Introduction of ScotCOM in January 2026 has brought significant changes to the department – increased funding, increased staffing and increased estate.</p>	<p>Medical Education will be significantly impacted by the ScotCOM Programme until it reaches a steady state. The phased introduction of students will begin with 40 students (at time of writing) arriving in January 2026 for Hub 1 teaching, followed by 41 students (at time of writing) in the transition cohort 2 in January 2027, and a direct entry cohort of 55 expected in January 2028. These figures are provisional and may change depending on exam outcomes and other influencing factors. ScotCOM will require increased funding, staffing, resources, and infrastructure to support the growing educational demands and ensure high-quality delivery.</p>
NHS Forth Valley	<p>UoG curriculum changes will have a significant impact on the capacity and ability for the ED and O&G units to support the double running in next academic year (Sept26-March27). To ensure appropriate staff and student support will almost certainly need temporary ACT funding to provide CTF support in the relevant department and also additional temporary monies for consultant supervision (EPA). The Medical and Surgical double running is a shorter time frame in much larger areas, so we hope to work locally to support this within the current supervisor footprint</p>	<p>Not completed</p>

<p>NHS Grampian</p>	<p>Significant increase in student numbers reaching clinical years in 2025/26 and 2026/27 academic year which cause significant clinical placement capacity issues</p> <p>Changes to UG teaching in Dr Gray's Hospital, Elgin, due to changes in available student accommodation WEF August 2025, following the unexpected termination of our student accommodation lease which created several challenges.</p> <p>WEF 2025/26 academic year:</p> <p>Reduced Y5 hospital-based placements in Elgin, with placement numbers directly informed by available accommodation.</p> <p>Completely revised Y4 hospital-based teaching: Reducing time in Elgin to 2 days a week, via arranging minibus twice weekly for student transport. This is a novel way of delivering teaching and we will closely monitor staff and student feedback.</p> <p>(Both Y4 & Y5 changes have direct impact on Aberdeen hospitals where additional capacity needs to be found.)</p>	<p>UoA & NHSG educational teams are considering capacity issues; several 2025/26 ACT proposals to develop and upgrade clinical teaching space and put in place additional staff resource.</p> <p>Continued development and increase of simulation teaching and training</p> <p>Considering novel concepts (requiring curricular changes), e.g. the GP UG Teaching Centre (previously GP Teaching Hub), which is a complex project and aimed for implementation WEF 26/27 academic year.</p>

	<p>Back to private accommodation for GP placements, which is both expensive and limited.</p> <p>Additional Clinical Teaching Fellow specifically for Dr Gray's (1-year pilot)</p>	
NHS Greater Glasgow & Clyde	Increased teaching within specialty blocks, such as psychiatry, oncology, frailty and O&G.	The most significant anticipated changes to UG medical teaching for the financial years 2025/26 and 2026/27 relate to the UoG Medical School curriculum re-design. In its current format this will see increased costs associated with GP teaching placements for a two-year period. Without non-recurrent funding support from SG, this will place significant demand on the ACT funding allocated to the Board.
NHS Highland	<p>Increased University of Aberdeen student numbers</p> <p>Expansion of student numbers across all Programmes</p> <p>Identified need to support clinical debrief session</p>	<p>Review of Year 5 GP placements to create additional capacity, including potential development of primary care teaching hub model which will require additional GP teaching capacity and accommodation infrastructure.</p> <p>Expansion of GP placement capacity including developing new placements in Dunoon/ Cowal community hospital, requiring investment in infrastructure and ongoing teaching/T&A costs.</p> <p>Increased use of VR simulated scenarios with group debrief to support exposure to key clinical scenarios and explore human factors elements, alongside interprofessional teaching to promote clinical teamwork</p> <p>Recruitment of clinical debrief lead</p>

NHS Lanarkshire	Public Health Block in proposed new Curricula, this block will be in year 3, clinical block. Its will be an asynchronous delivered week of Public Health teaching based on GMC MLA outcomes and curricula ILO drawn from University ILOs across curricula and expert published sources. It will be a modular course initially delivered my mixed modality online platform. NHS Lanarkshire will deliver to the whole year	Not completed
NHS Lothian	Year 4 increase to 40 weeks (from 30) Year 5 Increase to 35 weeks (from 30) New 5-week module in Year 5 (start Aug '26) with faculty required; unknown clinical focus or setting.	Community placements expanding in MOE, Psychiatry and General Medicine Enhanced clinical skills and simulation capacity for all clinical years LUCS test becoming permanent
National Waiting Times Centre	Increased student numbers Move to more small group bedside teaching after student feedback Move to increase cardiology component of undergraduate timetable after student feedback and poor OSCE scores for cardiology stations in early year exams (prior to cardiology/CT block).	Move to cath lab teaching via facilitated livelink sessions after student feedback. Additional study space (Acoustic Pods)
NHS Orkney	Not completed.	We are concerned about ScotGem students. They access the Balfour, the CTF, and the teaching there. However, there is no contract between NHS Orkney and ScotGem – like there is between Aberdeen medical school and NHS Orkney. In addition, there is no funding for secondary care placements of ScotGem. This impacts upon the number of Aberdeen medical students that we can take.

		We are considering no longer allowing ScotGem to have placements at the Balfour Hospital in lieu of any contractual arrangements.
Scottish National Blood Transfusion Service	Two additional teaching hours will be delivered in 25/26 to accommodate ScotGEM students.	
NHS Tayside	Not completed	None planned but given the University of Dundee's financial constraints, we are reviewing requirements to ensure best utilisation of ACT funding.
State Hospital	Not completed	We were in discussions with Edinburgh University to organise a bus trip for 50-55 students several times per year. We weren't given enough notice of dates to book the necessary facilities this year. We are in discussion about arranging this next year, however, we are advised that class sizes have increased above 55. This is the maximum number of students that we could accommodate in any one trip so it is likely that this proposal will not go ahead now.
NHS Western Isles	N/A	N/A
NHS Shetland	NHS Shetland has a need to refurbish the student accommodation in order to provide more modern accommodation – on-suite facilities as well as an accessible flat. Work has begun on this as well as conversations with ACT team at NES. As part of the planning work issues with the structure of the building has been found and there is currently work undergoing to see if the building needs underpinning or if it is best to replace this. NES ACT is aware of this as meetings have been happening between NHS Shetland and NES. The possible impact may be that the building needs to close and NHS Shetland will have to find alternative accommodation for the medical	Not completed.

	<p>students. As part of the increased student numbers a deputy DME role has been created – the purpose of this is twofold:</p> <ol style="list-style-type: none">1. To aid with increased student numbers2. To succession plan around the DME role. <p>The teaching and training simulation rooms are in the Gilbert Bain Hospital. The Gilbert Bain Hospital is about to undergo major external structural work and this is going to have an impact on patient areas which will have to be decanted. The result of the patient decant is that the teaching and training space will have to become a patient space. Education and training will have to move into a temporary space (a modular unit in the car park). It is hoped that this will not impact on the ability to provide teaching and training but we have to recognise that it will create additional strain on staff. Another aspect that is being consider is the potential damage to kit in the move and the reduced space which means kit will have to be packed up between teaching session and this could result in damage to kit.</p>	
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