

Academy of Medical Royal Colleges and Faculties in Scotland

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External Adviser Annual Report 2012/2013

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1 Introduction

Under the National Health Service (Appointment of Consultants) (Scotland) Regulations 2009, external advisers are required for all consultant appointment panels in Scotland. The Scottish Academy has been contracted by the SGHD Workforce Directorate to compile and maintain a list of External Advisers (hereafter known as EAs) for this purpose and to run a service to assign one EA per consultant panel in Scotland. This service began in July 2009.

2012-2013 marks the fourth year of operation. In this period, 602 interview panels were arranged, broken down into 574 Consultant interviews, 20 Honorary Consultant interviews, 4 Salaried Dental interviews, 3 StR/SpR interviews and 1 Locum review. The Northern Ireland panels were the responsibility of the Edinburgh College this year, and there were a total of 32 panels arranged. For the purposes of this report, these panels have been included in order to give an accurate account of all activity for the reporting period.

The fourth year of operation has again been largely successful and again slightly busier, with a 20% increase in panel requests, and a 32% increase in the number of appointments made. There has also been a significant increase in the number of cancelled panels at 57%, which is representative of the rising request numbers, some ongoing communication and procedural issues with Health Boards, as well as continuing pressures on recruitment of consultants. Regardless, feedback from Health Boards and EAs remains generally positive.

This report contains information on panels arranged and completed over the year, appointments made, the EA list and Health Board recruitment process, the Scottish Academy service provision, along with issues raised and recommendations for improving the current service. The attached Appendix (**Section 8**) contains the figures referred to in the report.

2 Panels

Over the reporting period (1 July 2012 - 30 June 2013) 602 panels were arranged for consultant (and other) appointments in Scotland, though not all panels have resulted in appointment, either because they were cancelled, the preferred candidate did not accept the post, or the interview date was arranged for after the 30 June 2013 (and therefore not included in this report).

Figure 2.1 shows numbers for each specialty and categorizes the panels into three types: Completed (where interviews have taken place during the reporting period, but may have been arranged outwith this period), Arranged (all panels with interview dates after 30 June 2013) and Cancelled (where a panel did not progress to interview stage). It also shows the percentage of panels arranged to date that have been cancelled.

Disregarding the panels that have been arranged and have yet to complete, 26% of panels arranged that should have completed were cancelled, which is a rise from 20% in 2011-2012. For specialties where 10 or more panels have been arranged, only three specialties have experienced a cancellation percentage above 35%: Geriatric Medicine (22 panels, 50% cancelled), Gastroenterology (18 panels, 39% cancelled) and Public Health Medicine (14 panels, 36% cancelled).

Figure 2.2 shows the breakdown of Cancelled panels. The two primary reasons for cancellation of panels for this period (representing 30% each) are no applicants and the Health Board's postponement or rearrangement of dates. As a result of this increase in panel cancellations due to the Health Board's postponement or rearrangement of dates, we are working more closely with Health Boards suggesting how best they can reduce cancellation numbers.

Figure 2.3 shows the panels split into the same categories, but arranged instead by Health Board. Health Boards with 10 or more panels and cancellation percentages over 35% are Northern Ireland - Northern Trust (10 panels, 70% cancelled), Dumfries and Galloway (26 panels, 54% cancelled) and Grampian (69 panels, 36% cancelled).

Figure 2.4 shows the number of requests received per month. There has been a 27% increase in the number of panel requests, with no real significant drops outside of the usual (July, December) lulls, and an average of 45 panels per month, which is a significant increase from an average of 35 panels per month for the period 2011-2012. The number of interviews held has risen slightly from an average of 26 interviews per month in 2011-2012 to an average of 29 interviews per month for this reporting period.

3 Appointments

The majority of completed interview panels resulted in one or more appointments. **Figure 3.1** shows a breakdown of appointments by specialty. **Figure 3.2** shows the same information split by Health Board.

While these figures cannot represent a complete picture of consultant recruitment in Scotland (we remain reliant on information provided in feedback questionnaires), they provide a comprehensive indication of recruitment trends and show an overall 26% rise in consultant appointments from last year.

These consultant appointments break down as follows: New posts (203), Replacement posts (192) and Not Known (44).

Once again Greater Glasgow and Clyde recruited the highest number (95), with Lothian (80) and Tayside (46) following.

The highest recruiting specialties remain Anaesthetics (61, up from 46 in 2011-2012) as well as Obstetrics and Gynaecology (38). Other specialties showing appointments of 20 or more this year are: Clinical Radiology (27), General Psychiatry (26), Paediatrics (25).

3.1 DCC/SPA Splits

Figure 4.7 shows a breakdown of DCC/SPA splits across all reported appointments. A majority (57.6%) of appointments are made at a split of 9/1, which is an increase on 41.5% for 2011-2012.

4 External Advisers

4.1 EA List

Figure 4.1 shows the numbers (as of July 2013) of EAs in each specialty and by employing Health Board. The balance will shift as planned annual replacements are made. When the Scottish Academy established the list of EAs, it was decided that each EA would serve a four-year term. In order that replacements were staggered, EAs who began in 2009 and 2010 are now either finished or on a reserve list for their last year (and will be taken off in 2014). In September 2012, 42 EAs finished their agreed term of office and left the programme, to be replaced by 53 new EAs.

4.2 EA Induction and Training

The training for 2012-2013 comprised online content and guidance, which was made available to all new EAs. Feedback on this training has been mostly positive. We have also endeavoured to provide shadowing opportunities whenever requested. There has been interest in mentoring, where new EAs are provided with an established EA's contact details for reference, so we intend to initiate a pilot scheme for the new EAs in 2013.

The equality and diversity component of the EA training is still covered by the "Same Difference" package licensed by NHS Education for Scotland (NES). EAs are asked to complete this package when they begin the role if they require equality and diversity training. It is recommended that EAs update their equality and diversity knowledge at least once every three years, and NES will continue to provide briefings for EAs when there are changes to equality legislation.

4.3 EA Workload

In order to ensure that the list of EAs continues to effectively cover the demand for consultant recruitment, the number of panels that have been requested within each specialty continues to be monitored. EAs are expected to attend approximately 3 interview panels per year, and this number is used as the basis for suggesting changes to numbers of EAs within any given specialty.

Figure 4.2 shows the number of panel requests and number of EAs within each specialty, as well as the average number of panels attended. There has been a general increase in number of requests per EA (from an average of 2.2 in 2011-2012 to 2.4 in 2012-2013), with a number of specialties with more than 3 requests per EA. It is worth noting however that the average number of completed panels per EA remains the same as last year.

4.4 EA Performance

4.4.1 Acceptance Rates

Figure 4.3 shows a breakdown of invitations sent and accepted, arranged by specialty.

The following specialties have shown acceptance rates lower than the Scottish Academy target of 50%: Ophthalmology (48.7%), General Surgery (48%), Anaesthetics (46.3%), Trauma & Orthopaedic Surgery (45.2%), Acute Medicine (43.9%), Palliative Medicine and Respiratory Medicine (both 43.8%), Medical Oncology and Urology (both 41.7%) and Cardiology (37.9%).

No specialties have shown an acceptance rate below the 33% threshold set by Scottish Government.

While most EAs have fulfilled their duties as expected, a small number have either been unwilling or unable to do so. **Figure 4.4** shows 14 EAs who have not met the 33% acceptance rate, which is slightly lower than the same figure for last year (15).

4.4.2 Invitations and Response Duration

EAs are invited individually to avoid double acceptances and to ensure that panels are shared equally within a particular specialty. The target set by Scottish Academy for request response time is 2 working days from Date Advised. **Figure 4.5** shows the response times for 2012-2013, and the average response time remains the same as last year at 2.6 working days. The "No Response" number has halved since last year at 33 recorded.

4.4.3 HB Feedback on EAs

The Scottish Academy requests feedback from Health Boards on the EA's contribution to each stage of the appointment process. Health Boards are asked to rate the EA's contribution to commenting on the job description, short listing and interviews.

Figure 4.6 shows the average feedback scores given by Health Boards, which remains positive with a score of Excellent-Good overall. Response rates for Health Boards with more than 10 panels are relatively high, with Fife proving the lowest response rate (50%) and Ayrshire & Arran the highest (100%). It should also be noted that Lothian's response rate had improved considerably, from 25% (2011-2012) to this year's 61.4%. Indeed, overall response rates have risen significantly, from 63% in 2011-2012 to 74.2% for this reporting period.

4.5 EA Concerns

EAs are still concerned about the prevalence of 9/1 contracts, and there are still reports of job plans with a DCC/SPA split that does not comprise sufficient SPA time. Other concerns are a lack of communication and short notice when dealing with Health Boards, as well as a general lack of authority - EAs have complained that they have been excluded from votes, ignored on key issues and otherwise regarded as superfluous to the recruitment process. This is something we intend to monitor closely in the coming year.

5 Health Boards

5.1 Health Board Recruitment Process

EAs provide feedback on Health Board recruitment process at job description, short listing and interview stages. **Figure 5.1** shows the average ratings for each Health Board. Scores skew more towards Good than Excellent, with the recurring trend of the interview stage the highest rated overall. This is consistent with previous years. Response rates have dropped slightly from 67% to 64.1% (though the overall number of responses has increased) - something that will be monitored and hopefully improved over the forthcoming year.

5.2 Health Board Requests for EA

The guidance issued by Scottish Government and attached to the Consultant Appointment regulations calls for Health Boards to request an EA before an interview date has been set. This is happening in a slim majority of cases (54.3% of total panel requests give two or more dates as opposed to a single), but several Health Boards routinely request an EA after they have already fixed and arranged an interview date that is suitable for the other panel members. Single date requests are also the majority type when that request is outwith the agreed notice period.

Figure 5.2 shows a summary of Health Board not giving recommended notice. In 41 cases where panels have been arranged and a final interview date recorded, Health Boards have provided less than the SGHD-recommended 8 weeks' notice, which is an increase on last year's number (35).

Of those 41 cases, a majority have come again from Lothian (10), with the second majority from Greater Glasgow & Clyde (6). It should be noted that many of the panels with less than 8 weeks' notice originally had much tighter deadlines, and the ultimate interview date was amended to fit the guidelines. It should also be noted that many Cancelled panels are outwith the notice period.

6 Scottish Academy Service

6.1 Service Provision

The guidelines attached to the Consultant Appointment Legislation give the EA Coordinators a 2-week (10 working day) target to find an EA upon receipt of a request. In this reporting period, 9 panels took longer than 10 working days to resolve, which is a significant drop from last year's number (21).

The biggest impediments to assigning an EA remain non-responsive EAs; Health Board intransigence and unrealistic proposed interview dates. School and public holidays are also a cause of delays, as many EAs are either out of the office or otherwise engaged. The rare occasions when an appropriate EA needs to be sourced from outside of the list (when specific sub-spec is required, for example) also result in a longer than average response time.

6.2 Support for EAs and Health Boards

Feedback on the Scottish Academy service remains positive, particularly from the recruiting Health Boards. **Figure 6.1** shows the feedback received from both EAs and Health Boards in response to the question: "Overall how would you rate the contact and support you had with/from the Academy during this appointment process?" There are two cases of negative feedback - one is the result of a Health Board misinforming an EA about panel dates, the other the result of a problematic panel where the Health Board acted outwith the agreed guidelines in order to secure an EA at short notice.

7 Recommendations and Conclusion

7.1 Recommendations for Service Provision

Last year's issues with notice periods and communication have been highlighted this year, and have in many cases become more serious.

The EA Coordinators will usually attempt to provide an EA in cases where we receive less than 8 weeks' notice, informing the recruiting Health Board that if we cannot source an EA quickly, further dates will need to be considered. Unfortunately, this has been perceived as a false limitation, with six weeks being the real timescale. As a result we have had to reject any request of six weeks or less.

As a result, some Health Boards have attempted to source their own EAs for short notice panels, as well as cancelled panels that are due to be readvertised. We have advised our EAs that requests should only come from the EA Coordinators, and Health Boards should not be approaching them direct.

NHS Lothian remains the main source of these issues, but we have noticed that a general lack of communication has spread to other Health Boards this year. Further to concerns expressed last year, the cancellation of panels is frequently not communicated until after the panel date (when feedback is sent), and in many cases changes to the panel date are not communicated until long after the fact.

These issues have already been communicated to Scottish Government, and we would strongly recommend that the guidelines be comprehensively refreshed. We intend to monitor and move forward on this in the coming year.

Finally, the Academy has pursued more detailed feedback capture with the introduction of online questionnaires. The EA Coordinator database has also been extensively remodeled to provide for more accurate and detailed data retrieval.

7.2 Conclusion

Overall, we are pleased to report that both Health Boards and EAs appear happy with the service provided by the Academy, especially considering the rising number of requests in the fourth year of operation. The Academy believes that working more closely with the Health Boards will result in continuous improvement in processes for both parties and this will be positively reflected in next years Annual report.

8. Appendix - Report Tables

Specialty	Completed	Arranged but not Completed	Cancelled	Total Panels	Appointments	% of Panels Arranged to date that have been cancelled
Acute Medicine	16	2	5	23	18	22%
Anaesthetics	32	5	7	44	61	16%
Cardiology	10	1	1	12	12	8%
Child & Adolescent Psychiatry	7	2	2	11	8	18%
Clinical Genetics	2	0	0	2	2	0%
Clinical Oncology	4	3	3	10	3	30%
Clinical Radiology	17	5	12	34	27	35%
Community Child Health	0	1	4	5	0	80%
Dental Public Health	1	1	0	2	1	0%
Dermatology	5	0	2	7	5	29%
Emergency Medicine	9	6	4	19	16	21%
Endocrinology & Diabetes Mellitus	7	0	1	8	8	13%
Forensic Psychiatry	4	0	1	5	3	20%
Gastroenterology	6	5	7	18	10	39%
General Medicine	3	2	3	8	3	38%
General Psychiatry	22	7	13	42	27	31%
General Surgery	19	2	7	28	21	25%
Genito-Urinary Medicine	2	0	0	2	2	0%
Geriatric Medicine	8	3	11	22	13	50%
Haematology	3	0	1	4	3	25%
Histopathology	12	2	4	18	16	22%
Immunology	2	0	1	3	2	33%
Infectious Diseases	1	0	1	2	1	50%
Medical Microbiology & Virology	7	1	3	11	6	27%
Medical Oncology	2	2	3	7	3	43%
Neurology	7	5	0	12	7	0%
Neurosurgery	4	0	0	4	7	0%
Nuclear Medicine	2	0	0	2	2	0%
Obstetrics & Gynaecology	18	4	4	26	38	15%
Occupational Medicine	2	1	2	5	2	40%
Old Age Psychiatry	9	1	4	14	10	29%
Ophthalmology	11	3	6	20	12	30%
Oral & Maxillofacial Surgery	3	3	0	6	4	0%
Oral Medicine	1	0	1	2	1	50%
Orthodontics	3	0	1	4	3	25%
Otolaryngology	6	1	1	8	5	13%
Paediatric Dentistry	1	0	1	2	2	50%
Paediatric Surgery	1	0	0	1	1	0%
Paediatrics	24	7	14	45	25	31%
Palliative Medicine	4	0	3	7	3	43%
Plastic Surgery	5	1	0	6	4	0%
Psychiatry of Learning Disability	3	3	0	6	3	0%
Psychotherapy	0	1	0	1	0	0%
Public Health Medicine	7	2	5	14	7	36%
Rehabilitation Medicine	1	0	0	1	1	0%
Renal Medicine	7	0	2	9	7	22%
Respiratory Medicine	11	0	6	17	11	35%
Restorative Dentistry	4	3	1	8	6	13%
Rheumatology	3	2	3	8	4	38%
Special Care Dentistry	2	0	1	3	2	33%
Trauma & Orthopaedic Surgery	11	3	3	17	13	18%
Urology	5	1	0	6	6	0%
Vascular Surgery	1	0	0	1	1	0%
TOTAL	357	91	154	602	458	26%

Figure 2.1 - All Panels Arranged by Specialty

Candidate Withdrew	22
HB Postponed/Rearranged	46
No Applicants	46
No Reason Given	1
No Suitable Candidates	17
Other	22

Figure 2.2 - Cancellation Reasons

Health Board	Completed	Arranged but not Completed	Cancelled	Total Panels	Appointments	% of Panels Arranged to date that have been cancelled
Ayrshire & Arran	20	2	9	31	26	29%
Borders	9	2	4	15	9	27%
Dumfries & Galloway	12	0	14	26	16	54%
Fife	22	4	11	37	29	30%
Forth Valley	12	7	4	23	14	17%
Grampian	25	19	25	69	26	36%
Greater Glasgow & Clyde	65	19	15	99	101	15%
Highland	23	6	12	41	22	29%
Lanarkshire	30	7	8	45	44	18%
Lothian	70	9	16	95	91	17%
National Services Scotland	1	0	0	1	1	0%
National Waiting Times Unit	5	2	0	7	6	0%
Northern Ireland - Belfast	3	1	2	6	3	33%
Northern Ireland - Northern	3	0	7	10	3	70%
Northern Ireland - South East	2	0	1	3	3	33%
Northern Ireland - Southern	3	0	1	4	3	25%
Northern Ireland - Western	5	1	3	9	5	33%
Orkney	2	1	2	5	2	40%
Shetland	0	1	0	1	0	0%
State Hospital	1	0	0	1	1	0%
Tayside	40	9	20	69	47	29%
Western Isles	4	1	0	5	6	0%
TOTAL	357	91	154	602	458	26%

Figure 2.3 - All panels arranged by recruiting Health Board

Month	Requests Received	Interviews Held
July	33	21
August	44	31
September	42	22
October	34	28
November	54	30
December	34	29
January	53	25
February	44	28
March	44	35
April	61	39
May	51	29
June	48	39
TOTAL	542	356

Figure 2.4 - All panels arranged and interviews held by month

	Ayrshire & Arran	Borders	Dumfries & Galloway	Fife	Forth Valley	Grampian	Greater Glasgow & Clyde	Highland	Lanarkshire	Lothian	National Services Scotland	National Waiting Times Unit	Northern Ireland - Belfast	Northern Ireland - Northern	Northern Ireland - Southern	Northern Ireland - Western	Orkney	Shetland	State Hospital	Tayside	Western Isles	TOTAL	
Acute Medicine	2	0	0	1	1	0	0	0	2	6	0	0	0	1	0	1	1	0	0	0	3	0	18
Anaesthetics	2	2	2	3	1	1	20	1	7	14	0	3	0	0	0	0	0	1	0	0	4	0	61
Cardiology	0	1	0	0	0	1	3	0	0	1	0	1	1	0	1	0	2	0	0	0	1	0	12
Child & Adolescent Psychiatry	0	0	1	0	0	2	1	2	0	0	0	0	0	0	0	0	0	0	0	0	2	0	8
Clinical Genetics	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	2
Clinical Oncology	0	0	0	0	0	1	2	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	3
Clinical Radiology	3	1	0	0	3	5	9	0	1	3	0	0	0	0	0	0	0	0	0	0	2	0	27
Community Child Health	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Dental Public Health	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Dermatology	1	0	0	1	0	0	3	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	5
Emergency Medicine	1	0	0	4	0	0	2	0	2	4	0	0	0	0	0	0	0	0	0	0	3	0	16
Endocrinology & Diabetes Mellitus	0	0	0	0	0	0	3	0	1	3	0	0	0	0	0	0	1	0	0	0	0	0	8
Forensic Psychiatry	1	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	3
Gastroenterology	0	0	0	3	0	0	1	0	0	0	0	0	1	0	2	0	0	0	0	0	3	0	10
General Medicine	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	2	0	3
General Psychiatry	2	1	0	4	2	1	5	3	3	3	0	0	0	0	0	0	0	0	0	0	2	0	26
General Surgery	2	0	0	1	1	1	4	1	4	3	0	0	0	0	0	0	0	0	0	0	1	1	19
Genito-Urinary Medicine	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	2
Geriatric Medicine	0	0	0	2	1	0	5	0	3	2	0	0	0	0	0	0	0	0	0	0	0	0	13
Haematology	0	1	1	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	3
Histopathology	1	0	1	0	1	2	4	0	2	3	0	0	0	0	0	0	0	0	0	0	2	0	16
Immunology	0	0	0	0	0	2	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	2
Infectious Diseases	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	1
Medical Microbiology & Virology	0	0	2	0	0	0	2	2	0	0	0	0	0	0	0	0	0	0	0	0	0	0	6
Medical Oncology	0	0	0	0	2	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	3
Neurology	0	1	0	1	1	0	2	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	6
Neurosurgery	0	0	0	0	0	1	2	0	0	4	0	0	0	0	0	0	0	0	0	0	0	0	7
Nuclear Medicine	0	0	0	0	0	0	0	2	0	0	0	0	0	0	0	0	0	0	0	0	0	0	2
Obstetrics & Gynaecology	3	1	2	6	0	2	7	1	2	8	0	0	0	0	0	0	0	0	0	0	6	0	38
Occupational Medicine	0	0	1	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	2
Old Age Psychiatry	1	0	1	0	0	1	3	1	0	0	0	0	0	0	0	0	0	0	0	0	3	0	10
Ophthalmology	0	0	0	0	0	0	5	1	1	4	0	0	0	0	0	0	0	0	0	0	1	0	12
Oral & Maxillofacial Surgery	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	2
Oral Medicine	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1
Orthodontics	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	2
Otolaryngology	0	0	0	0	0	0	1	1	1	1	0	0	0	0	0	0	0	0	0	0	1	0	5
Paediatric Dentistry	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Paediatric Surgery	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	1
Paediatrics	2	0	0	0	0	1	4	1	7	8	0	0	0	0	0	0	0	0	0	0	1	1	25
Palliative Medicine	0	0	0	0	0	1	0	0	0	1	0	0	0	0	0	0	0	0	0	0	1	0	3
Plastic Surgery	0	0	0	0	0	0	1	0	0	1	0	0	0	0	0	0	0	0	0	0	2	0	4
Psychiatry of Learning Disability	1	0	0	0	0	0	1	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	3
Psychotherapy	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Public Health Medicine	0	0	2	0	1	0	0	0	0	1	1	0	0	0	0	0	0	0	0	0	2	0	7
Rehabilitation Medicine	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	1
Renal Medicine	1	0	0	0	0	1	0	0	0	0	0	0	1	1	0	0	1	0	0	0	0	0	5
Respiratory Medicine	1	0	0	2	0	0	1	0	0	4	0	0	0	1	0	1	0	0	0	0	0	0	10
Restorative Dentistry	1	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	2
Rheumatology	1	0	0	0	0	0	0	0	3	0	0	0	0	0	0	0	0	0	0	0	0	0	4
Trauma & Orthopaedic Surgery	0	0	2	0	1	1	0	1	2	1	0	2	0	0	0	0	0	0	0	0	1	2	13
Urology	0	0	0	1	0	0	0	2	1	2	0	0	0	0	0	0	0	0	0	0	0	0	6
Vascular Surgery	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1
TOTAL	26	8	16	29	14	27	95	21	44	80	1	6	3	3	3	3	5	2	0	1	46	6	439

Figure 3.1 - Consultant Appointments

	Ayrshire & Arran	Borders	Dumfries & Galloway	Fife	Forth Valley	Grampian	Greater Glasgow & Clyde	Highland	Lanarkshire	Lothian	National Services Scotland	National Waiting Times Unit	State Hospital	Tayside	Western Isles	TOTAL
Acute Medicine	0	0	1	0	0	0	1	0	0	1	0	0	0	1	0	4
Anaesthetics	0	0	0	1	0	7	10	0	1	8	0	0	0	4	0	31
Cardiology	0	1	1	1	0	0	1	0	1	0	0	0	0	1	0	6
Cardiothoracic Surgery	0	0	0	0	0	0	0	0	0	1	0	2	0	0	0	3
Chemical Pathology	0	0	0	0	0	0	1	0	0	0	0	0	0	1	0	2
Child & Adolescent Psychiatry	0	1	0	0	0	0	2	0	1	0	0	0	0	1	0	5
Clinical Genetics	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	1
Clinical Oncology	0	0	0	0	0	0	2	0	0	1	0	0	0	0	0	3
Clinical Pharmacology & Therapeutics	0	0	0	0	0	0	2	0	0	1	0	0	0	0	0	3
Clinical Radiology	0	0	0	0	0	2	1	0	1	2	0	0	0	0	0	6
Community Child Health	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	1
Dental Public Health	0	0	0	1	0	0	1	0	0	0	0	0	0	0	0	2
Dermatology	0	0	0	0	0	0	1	0	1	1	0	0	0	1	0	4
Emergency Medicine	1	0	0	0	0	0	1	1	0	2	0	0	0	1	0	6
Endocrinology & Diabetes Mellitus	0	0	0	0	1	0	3	0	0	1	0	0	0	0	0	5
Forensic Psychiatry	0	0	0	0	0	0	1	0	0	1	0	0	0	0	0	2
Gastroenterology	0	0	0	0	0	0	5	0	0	0	0	0	0	1	0	6
General Medicine	0	0	0	0	1	1	0	1	0	0	0	0	0	0	0	3
General Psychiatry	0	0	2	0	0	1	2	1	0	5	0	0	0	2	0	13
General Surgery	1	0	0	0	0	1	2	3	0	1	0	0	0	0	0	8
Genito-Urinary Medicine	0	0	0	0	0	0	1	0	0	1	0	0	0	0	0	2
Geriatric Medicine	0	0	0	0	1	2	3	0	0	0	0	0	0	0	0	6
Haematology	1	0	0	1	0	0	1	0	0	0	0	0	0	0	0	3
Histopathology	1	0	0	0	0	1	2	0	0	1	0	0	0	1	0	6
Immunology	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1
Infectious Diseases	0	0	0	0	0	0	0	0	1	1	0	0	0	0	0	2
Medical Microbiology & Virology	0	0	0	0	0	0	2	0	0	2	0	0	0	0	0	4
Medical Oncology	0	0	0	0	0	1	1	0	0	1	0	0	0	0	0	3
Neurology	0	0	0	0	0	1	2	0	0	1	0	0	0	0	0	4
Neurosurgery	0	0	0	0	0	0	3	0	0	1	0	0	0	1	0	5
Nuclear Medicine	0	0	0	0	0	0	1	0	0	0	0	0	0	1	0	2
Obstetrics & Gynaecology	0	0	0	1	0	2	3	0	0	0	0	0	0	2	0	8
Occupational Medicine	0	0	0	0	0	1	0	1	0	0	0	0	0	0	0	2
Old Age Psychiatry	0	0	0	0	0	0	3	0	0	1	0	0	0	1	0	5
Ophthalmology	0	0	0	1	0	1	1	1	0	1	0	0	0	0	0	5
Oral & Maxillofacial Surgery	1	0	0	0	0	1	0	0	1	1	0	0	0	0	0	4
Oral Medicine	0	0	0	0	0	0	1	0	0	0	0	0	0	1	0	2
Oral Surgery	0	0	0	0	0	0	0	0	0	0	0	0	0	2	0	2
Orthodontics	0	0	0	0	0	0	1	0	0	0	0	0	0	1	0	2
Otolaryngology	1	0	0	0	1	1	3	0	0	1	0	0	0	0	0	7
Paediatric Dentistry	0	0	0	0	0	0	1	0	0	1	0	0	0	0	0	2
Paediatric Surgery	0	0	0	0	0	0	2	0	0	1	0	0	0	0	0	3
Paediatrics	2	0	0	0	2	2	2	0	1	0	0	0	0	1	0	10
Palliative Medicine	0	0	0	0	0	1	2	0	0	0	0	0	0	1	0	4
Plastic Surgery	0	0	0	0	0	0	1	0	0	1	0	0	0	0	0	2
Psychiatry of Learning Disability	0	0	0	0	0	0	0	0	1	0	0	0	1	0	0	2
Psychotherapy	0	0	0	0	0	0	1	0	0	1	0	0	0	0	0	2
Public Health Medicine	0	1	0	0	0	0	0	0	1	1	1	0	0	0	0	4
Rehabilitation Medicine	0	0	0	1	0	0	0	0	0	1	0	0	0	0	0	2
Renal Medicine	0	0	0	0	0	1	1	0	0	1	0	0	0	0	0	3
Respiratory Medicine	0	0	0	0	0	0	2	0	1	1	0	0	0	0	0	4
Restorative Dentistry	0	0	0	0	0	0	1	0	0	1	0	0	0	1	0	3
Rheumatology	0	0	0	0	0	1	0	0	0	1	0	0	0	0	0	2
Special Care Dentistry	0	0	0	0	0	0	0	0	1	1	0	0	0	0	1	3
Trauma & Orthopaedic Surgery	2	0	0	0	0	1	3	1	0	2	0	0	0	0	1	10
Urology	1	0	0	0	0	1	3	0	0	1	0	0	0	0	0	6
Vascular Surgery	0	0	0	1	0	0	0	0	0	0	0	0	0	1	0	2
TOTAL	11	3	4	8	6	30	85	9	12	51	1	2	1	28	2	253

Figure 4.1 - EA List Coverage

	Active EAs	Panel Requests	Completed Panels	Panel Requests per EA	Completed Panels per EA
Acute Medicine	4	23	16	5.8	4.0
Anaesthetics	31	44	32	1.4	1.0
Cardiology	6	12	10	2.0	1.7
Cardiothoracic Surgery	3	0	0	0.0	0.0
Chemical Pathology	2	0	0	0.0	0.0
Child & Adolescent Psychiatry	5	11	7	2.2	1.4
Clinical Genetics	1	2	2	2.0	2.0
Clinical Oncology	3	10	4	3.3	1.3
Clinical Pharmacology & Therapeutics	3	0	0	0.0	0.0
Clinical Radiology	6	34	17	5.7	2.8
Community Child Health	1	5	0	5.0	0.0
Dental Public Health	2	2	1	1.0	0.5
Dermatology	4	7	5	1.8	1.3
Emergency Medicine	6	19	9	3.2	1.5
Endocrinology & Diabetes Mellitus	5	8	7	1.6	1.4
Forensic Psychiatry	2	5	4	2.5	2.0
Gastroenterology	6	18	6	3.0	1.0
General Medicine	3	8	3	2.7	1.0
General Psychiatry	13	42	22	3.2	1.7
General Surgery	8	28	19	3.5	2.4
Genito-Urinary Medicine	2	2	2	1.0	1.0
Geriatric Medicine	6	22	8	3.7	1.3
Haematology	3	4	3	1.3	1.0
Histopathology	6	18	12	3.0	2.0
Immunology	1	3	2	3.0	2.0
Infectious Diseases	2	2	1	1.0	0.5
Medical Microbiology & Virology	4	11	7	2.8	1.8
Medical Oncology	3	7	2	2.3	0.7
Neurology	4	12	7	3.0	1.8
Neurosurgery	5	4	4	0.8	0.8
Nuclear Medicine	2	2	2	1.0	1.0
Obstetrics & Gynaecology	8	26	18	3.3	2.3
Occupational Medicine	2	5	2	2.5	1.0
Old Age Psychiatry	5	14	9	2.8	1.8
Ophthalmology	5	20	11	4.0	2.2
Oral & Maxillofacial Surgery	4	6	3	1.5	0.8
Oral Medicine	2	2	1	1.0	0.5
Oral Surgery	2	0	0	0.0	0.0
Orthodontics	2	4	3	2.0	1.5
Otolaryngology	7	8	6	1.1	0.9
Paediatric Dentistry	2	2	1	1.0	0.5
Paediatric Surgery	3	1	1	0.3	0.3
Paediatrics	10	45	24	4.5	2.4
Palliative Medicine	4	7	4	1.8	1.0
Plastic Surgery	2	6	5	3.0	2.5
Psychiatry of Learning Disability	2	6	3	3.0	1.5
Psychotherapy	2	1	0	0.5	0.0
Public Health Medicine	4	14	7	3.5	1.8
Rehabilitation Medicine	2	1	1	0.5	0.5
Renal Medicine	3	9	7	3.0	2.3
Respiratory Medicine	4	17	11	4.3	2.8
Restorative Dentistry	3	8	4	2.7	1.3
Rheumatology	2	8	3	4.0	1.5
Special Care Dentistry	3	3	2	1.0	0.7
Trauma & Orthopaedic Surgery	10	17	11	1.7	1.1
Urology	6	6	5	1.0	0.8
Vascular Surgery	2	1	1	0.5	0.5
TOTAL	253	602	357	2.4	1.4

Figure 4.2 - Panel requests and interviews completed per External Adviser

Specialty	Invitations	Accepted	% Accepted
Acute Medicine	41	18	43.9%
Anaesthetics	82	38	46.3%
Cardiology	29	11	37.9%
Child & Adolescent Psychiatry	13	9	69.2%
Clinical Genetics	2	2	100.0%
Clinical Oncology	11	9	81.8%
Clinical Radiology	50	29	58.0%
Community Child Health	6	5	83.3%
Dental Public Health	4	2	50.0%
Dermatology	8	6	75.0%
Emergency Medicine	24	19	79.2%
Endocrinology & Diabetes Mellitus	10	6	60.0%
Forensic Psychiatry	4	3	75.0%
Gastroenterology	29	16	55.2%
General Medicine	13	7	53.8%
General Psychiatry	69	37	53.6%
General Surgery	50	24	48.0%
Geriatric Medicine	35	18	51.4%
Haematology	3	3	100.0%
Histopathology	21	15	71.4%
Immunology	4	3	75.0%
Infectious Diseases	1	1	100.0%
Medical Microbiology & Virology	15	11	73.3%
Medical Oncology	12	5	41.7%
Neurology	21	11	52.4%
Neurosurgery	5	4	80.0%
Nuclear Medicine	1	1	100.0%
Obstetrics & Gynaecology	31	24	77.4%
Occupational Medicine	5	4	80.0%
Old Age Psychiatry	22	14	63.6%
Ophthalmology	39	19	48.7%
Oral & Maxillofacial Surgery	6	6	100.0%
Oral Medicine	2	1	50.0%
Orthodontics	3	3	100.0%
Otolaryngology	14	7	50.0%
Paediatric Dentistry	1	1	100.0%
Paediatric Surgery	1	1	100.0%
Paediatrics	66	38	57.6%
Palliative Medicine	16	7	43.8%
Plastic Surgery	7	7	100.0%
Psychiatry of Learning Disability	8	5	62.5%
Psychotherapy	1	1	100.0%
Public Health Medicine	24	13	54.2%
Rehabilitation Medicine	1	1	100.0%
Renal Medicine	16	8	50.0%
Respiratory Medicine	32	14	43.8%
Restorative Dentistry	8	7	87.5%
Rheumatology	7	6	85.7%
Special Care Dentistry	3	3	100.0%
Trauma & Orthopaedic Surgery	31	14	45.2%
Urology	12	5	41.7%
Vascular Surgery	1	1	100.0%
TOTAL	920	523	56.8%

Figure 4.3 - Panel requests and External Adviser acceptance rates by specialty

Specialty	Number
Acute Medicine	2
Anaesthetics	2
Cardiology	3
Clinical Radiology	3
General Psychiatry	3
General Surgery	3
Geriatric Medicine	1
Medical Oncology	1
Ophthalmology	2
Otolaryngology	1
Paediatrics	1
Palliative Medicine	1
Renal Medicine	1
Trauma & Orthopaedic	1
TOTAL	14

Figure 4.4 - EAs not meeting 33% acceptance rate (having received 3 or more invitations)

Response	Number	Work Days	Average Response Time
Accepted	523	1464	2.8
Declined	317	827	2.6
TOTAL	840	2291	2.7

Figure 4.5 - EA average response durations and number of 'no responses' recorded

Health Board	Job Description	Short Listing	Interviews	# Responses Rcvd	Completed Panels	% Responses Rcvd
Ayrshire & Arran	1.0	1.0	1.0	20	20	100.0%
Borders	1.5	1.5	1.5	4	9	44.4%
Dumfries & Galloway	1.0	1.0	1.0	11	12	91.7%
Fife	1.3	1.4	1.2	12	22	54.5%
Forth Valley	1.8	2.0	2.0	6	12	50.0%
Grampian	1.3	1.2	1.3	16	25	64.0%
Greater Glasgow & Clyde	1.0	1.0	1.0	59	65	90.8%
Highland	1.9	1.9	1.4	19	23	82.6%
Lanarkshire	1.0	1.0	1.1	23	30	76.7%
Lothian	2.0	1.9	1.9	43	70	61.4%
National Services Scotland	1.0	3.0	1.0	1	1	100.0%
National Waiting Times Unit	1.3	1.3	1.0	3	5	60.0%
Northern Ireland - Belfast	2.0	1.6	1.6	3	3	100.0%
Northern Ireland - Northern	2.0	2.0	1.5	2	3	66.7%
Northern Ireland - South East	3.0	3.0	3.0	1	2	50.0%
Northern Ireland - Southern	1.0	1.0	1.0	1	3	33.3%
Northern Ireland - Western	1.0	1.0	1.2	5	5	100.0%
Orkney	2.0	2.0	2.0	1	2	50.0%
State Hospital	3.0	3.0	3.0	1	1	100.0%
Tayside	1.6	1.6	1.5	31	40	77.5%
Western Isles	1.0	1.0	1.0	3	4	75.0%
TOTAL	1.6	1.6	1.5	265	357	74.2%

Figure 4.6 - Health Board feedback on EA contribution

(1 = Excellent, 2 = Good, 3 = Adequate, 4 = Inadequate and 5 = Poor)

Split	Draft JD	Advertised	Appointed
9/1	241	221	189
8.5/1.5	8	8	7
8/2	19	18	15
7.5/2.5	6	6	6
7/3	0	0	0
Other	26	23	22
Not Known	28	52	89
TOTAL	328	328	328

Figure 4.7 - Reported DC/SPA Splits (where appointed)

Health Board	Job Description	Short Listing	Interviews	# Responses Rcvd	Completed Panels	% Responses Rcvd
Ayrshire & Arran	2.5	2.1	1.9	15	20	75.0%
Borders	2.3	1.8	1.8	4	9	44.4%
Dumfries & Galloway	1.8	1.8	1.5	11	12	91.7%
Fife	2.7	2.6	2.3	15	22	68.2%
Forth Valley	1.5	1.1	1.5	8	12	66.7%
Grampian	2.2	2.3	2.0	14	25	56.0%
Greater Glasgow & Clyde	2.2	1.9	1.7	45	65	69.2%
Highland	2.1	1.9	1.8	14	23	60.9%
Lanarkshire	1.9	1.5	1.7	18	30	60.0%
Lothian	2.3	2.3	2.1	43	70	61.4%
National Services Scotland	-	-	-	0	1	0.0%
National Waiting Times Unit	3.0	2.6	1.4	5	5	100.0%
Northern Ireland - Belfast	2.5	2.5	2.0	2	3	66.7%
Northern Ireland - Northern	3.0	2.0	1.0	1	3	33.3%
Northern Ireland - South East	3.0	2.0	1.0	1	2	50.0%
Northern Ireland - Southern	2.0	1.3	1.0	3	3	100.0%
Northern Ireland - Western	2.5	2.0	2.0	2	5	40.0%
Orkney	1.5	2.5	1.5	1	2	50.0%
State Hospital	3.0	3.0	2.0	1	1	100.0%
Tayside	2.3	1.4	1.5	23	40	57.5%
Western Isles	3.0	2.5	2.5	3	4	75.0%
TOTAL	2.4	2.1	1.7	229	357	64.1%

Figure 5.1 - External Adviser feedback on Health Board process
(1 = Excellent, 2 = Good, 3 = Adequate, 4 = Inadequate and 5 = Poor)

	Number	% of panels with a final interview date
Less than 8 weeks' notice	41	9%
Less than 6 weeks' notice	8	1.7%
Total Panels with a final interview date (357 completed + 91 arranged)	448	

Figure 5.2 - Health boards not giving recommended notice

	Excellent	Good	Adequate	Inadequate	Poor	Total Responses	% Response
EA Feedback	88	110	30	1	0	229	64.1%
HB Feedback	178	71	15	0	1	265	74.2%

Figure 6.1 - Feedback on Scottish Academy service provision