



Academy of Medical Royal Colleges and Faculties in Scotland

EXTERNAL ADVISER SERVICE
ANNUAL REPORT 2023



Background

External Advisers have an important role to play in the consultant appointment process in Scotland, as governed by The National Health Service (Appointment of Consultants) (Scotland) Regulations 2009.

The regulations require that a single specialty External Adviser is present on each NHS consultant appointment panel in Scotland. The External Adviser is a full panel member providing specialty knowledge and an important external perspective throughout the recruitment process.

[The National Health Service \(Appointment of Consultants\) \(Scotland\) Regulations 2009](#)

[The National Health Service \(Appointment of Consultants\) \(Scotland\) Amendment Regulations 2010](#)

The Academy of Medical Royal Colleges and Faculties in Scotland (“The Scottish Academy”) has been contracted by the Scottish Government Health and Social Care Directorate to compile and maintain a list of External Advisers (EAs) for this purpose and to run a service to assign an EA per specialty consultant interview panel across Scotland.

This report to the Scottish Academy contains information on EAs requested, panels completed and cancelled over the previous years, details of panel activity and appointments made from 2023, the EA list and recruitment process, Scottish Academy service provision, along with issues raised and recommendations for improving the current service. The proceeding Appendix contains the data referred to in the report.

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Chair of the Academy of Medical Royal Colleges and Faculties in Scotland

Being involved with the External Advisors team is one of the perks of my job as Chair. Providing external advice to consultant appointment committees is an important action in governance which provides reassurance to appointee, the appointment panel and the appointee's prospective employer. Scottish law also mandates an external advisory system for consultant appointments. We are fortunate to have 500 consultant colleagues who are willing to give us their time and be external advisors (EAs). The fact that we have recruited 71 new EAs this year suggests that word has got out that being an EA is a fulfilling role. Feedback from external advisors and Board Human Resource teams is hugely supportive and appreciative of the External Advisors process, see the evidence on pages 4, 5 and 6 of this report. We include just five positive comments in this report, but could have filled a couple of pages. Many thanks to everyone for making this work so well.

There is always a "however". When you look at the data from 2023, you will note that there has been approximately 10% fewer requests for EAs and 10% fewer interviews arranged relative to 2022. If you then look at figure two you will see that there were fewer interviews when more than one candidate was appointed in 2023 (63) compared to 2022 (94). What this adds up to is fewer consultants being appointed in 2023 since 2018. Having started on a positive note early on in this annual reflection, the fall in number of consultant appointments gives me some discomfort. It may be a one-off result. But given our long elective waiting lists and pressures on urgent care in today's NHS Scotland, a sustained fall in recruitment of senior decision makers would be undesirable. We will watch this carefully in conjunction with colleagues in Scottish Government.

The EA process is not without logistic challenge. You may know that the first stage is identifying an EA, sharing the job description (JD) with them, resolving any issues before the JD is published and then applicants hopefully come forwards. The second stage then involves the interview. Usually, the same EA is involved in both stages but with the approval of the Scottish Government, we have now uncoupled the two stages. We have done this in response to the increasing proportion of interviews which are cancelled; in 2023 between 38-64% of interviews outside of Greater Glasgow and Clyde, Lothian and Golden Jubilee Boards were cancelled. This change in our process does not solve the problem of recruitment, but it makes the EA task easier by sparing them from re-approving the same JD when it used for a second (and third) interview which is rescheduled within 12 months of the initial JD. We look forward to reviewing the impact of this change during 2024. I will end by thanking the EAs, the Scottish Government, Human Resource teams around the country, the EA team in Edinburgh and RCPE for hosting the EA team.

Professor Steve Turner
Chair, Academy of Medical Royal Colleges and Faculties in Scotland
Consultant Paediatrician, NHS Grampian
April 2024



External Advisers

External Advisers are invited to assist with approximately 3 consultant advisory appointment committees per year. In 2023 there were 316 Active External Advisers and 178 Reserve External Advisors. Of these, 343 External Advisers supported 663 panels (including 91 reserves who supported 142 panels). To provide extra capacity, an additional 71 advisers were recruited in 2023.

At time of writing, there are 15 vacancies for External Advisers (EAs) across 7 specialties:

- 4 specialties which require 1 additional EA
- 2 specialties which require 2 additional EAs
- 1 specialty which requires at least 5 additional EAs

Appendix table one shows the number of active and reserve EAs in each specialty.

Scottish Academy Service to External Advisers

Feedback is requested from Health Boards and External Advisers regarding various aspects of the process both leading up to the interview and at interview stage. **Tables one, two and three** shows that the Health Boards, External Advisers and External Adviser Coordinators were all consistently rated high. Training for External Advisers should continue in order to maintain standards.

Table one. Feedback of Health Boards from External Advisers when asked:

“How would you rate the Health Board on the following:”

Average of 89% Positive (combined ‘Excellent’ and ‘Good’ ratings) across all categories:

	EXCELLENT	GOOD	FAIR	POOR	N/A
JOB PLAN/JOB DESCRIPTION	120	184	34	1	2
SHORTLISTING	117	174	29	14	7
JOB TRAIN	84	154	56	29	18
CHAIR OF PANEL	222	104	10	2	3
PERFORMANCE AT INTERVIEW	179	141	16	1	4
DECISION MAKING	189	136	13	0	3
OVERALL PROCESS	152	161	23	2	3



Table two. Feedback of External Advisers from Health Boards when asked:

“How would you rate the External Adviser on the following:”

Average of 89% Positive (combined ‘Excellent’ and ‘Good’ ratings) across all categories:

	EXCELLENT	GOOD	FAIR	POOR	N/A
JOB PLAN/ JOB DESCRIPTION	268	72	0	2	31
SHORTLISTING	266	74	3	2	28
JOB TRAIN	256	74	2	2	39
SUPPORT	264	63	1	2	43
ADVICE	261	60	1	2	49
RELIABILITY	273	69	1	1	29
PERFORMANCE AT INTERVIEW	250	62	0	2	59

Table three. Feedback of External Adviser Coordinators from Health Boards and External Advisers when asked:

“How would you rate the External Adviser Coordinators on the following:”

Average of 91% Positive (combined ‘Excellent’ and ‘Good’ ratings) across all categories:

	EXCELLENT	GOOD	FAIR	POOR	N/A
COMMUNICATION	509	169	7	3	26
SUPPORT	491	161	8	2	52
AVAILABILITY	498	151	6	1	58
GUIDANCE	461	160	7	1	85

General Feedback

- Superb input [from the EA] - helpful and supportive.
- [The EA] was excellent support at interview. We had to withdraw a candidate at interview due to misrepresentation on his application. [The EA’s] advice and guidance during these discussions and decision making was very helpful.
- Our contact point at the academy had a strong appreciation of the challenges to accommodate the requirements of all panel members linked to this appointment. This made the process, which was extended beyond normal timescales, much easier to facilitate. Their advice and guidance was helpful and much appreciated.
- This was a competitive interview with 5 candidates for 1 post. There was good pre-interview preparation to decide on questions and order of panel. Time-keeping was good. Individual scoring of candidates was undertaken and there was good discussion during selection process for the top two candidates.
- Well organised before and after interview stage. The interviews were run well by the chair with each panel member having a role. The use of presentations was useful and supplemented questions. Even though remote was interactive. Fair approach with ability to discuss pros and concerns about each candidate.



Issues Raised

Shortlisting:

- Short listing of candidates was concluded without the full participation of panel members, prior to candidates being invited for interview.
- I was not given access to short listing process with enough notice - only day before I managed to get an access which is not acceptable.
- I had to remind the panel that all members of the panel need to complete Job Train shortlisting rather than have one-to-one conversations within the Board.
- I was not notified to shortlist. Contacted dept as was aware the interview was coming up so managed to shortlist in time.

Communication/Planning:

- Communication from HR not particularly great prior to interview and I had to chase.
- Exact Venue and the time of the Interview wasn't made clear till the very end (despite emailing and asking about it well in advance). Though there was just one candidate, the Interview felt bit rushed. I was interrupted during the interview and unfortunately didn't feel welcome.
- It appeared that the whole process was undertaken at very short notice with very little co-ordination amongst the panel members and admin team. This resulted in very little time for the external advisor to incorporate due diligence in the process. It was a Consultant appointment and it was surprising how little preparation preceded the interview process.

Job Train: least positive ranking from EAs – 70% positive (Ranked 'Fair' by 56 and 'Poor' by 18)

- Job Train is not a very user friendly platform, important information about the candidates is there, but often difficult to find and lost in the generic application forms which don't always provide the required information for shortlisting decisions. Once I was able to find information from the candidates CV in a separate part of the website I could proceed with shortlisting decisions.
- There needs to be some serious thought put into the huge investment involved in a substantive consultant post appointment and the quite rudimentary information that is available at shortlisting through Job Train. Some clear guidance on using Job Train specific to consultant appointments would also help. I suspect flipping burgers at McDonalds is approached with more rigour.
- Job Train supplies v limited information in advance of a significant interview.

Conclusion

We continue to monitor feedback for quality assurance, seeking out areas for continuous improvement. Concerns regarding Job Train being as an unsuitable tool for assessing candidates will be raised with colleagues in Scottish Government. Overall, most remain happy with the process and prefer having the option of being able to attend either in person or remotely.



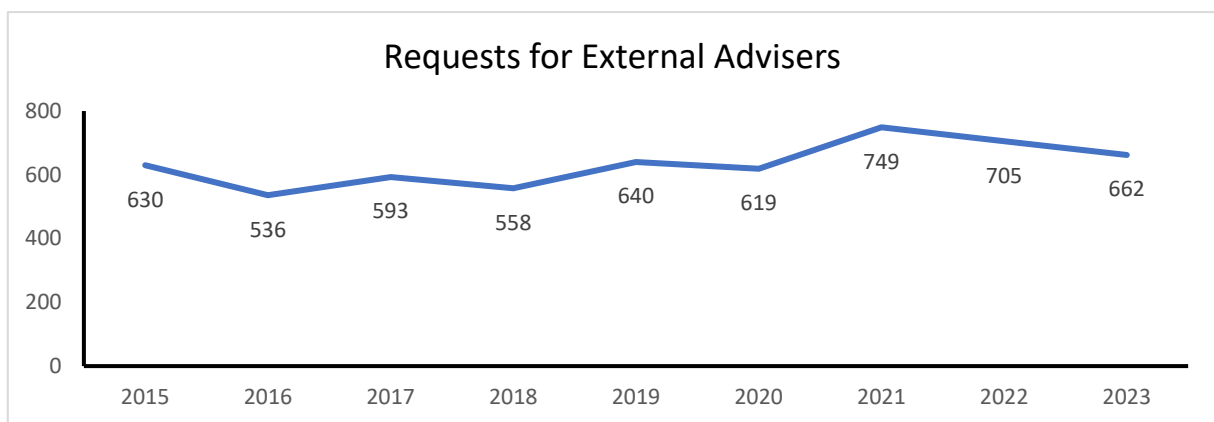
A few words about how the following data have been analysed

Requests for an External Adviser are “time stamped” when received, for example where a request is received in November or December and the subsequent panel is scheduled for the following year, the request for an EA is recorded under the current year and the Panel Outcome data is recorded under the following year. The number of appointments is higher than the number of panels where at least one candidate was interviewed – this is due to some panels appointing more than one candidate following interview. Supplemental table two presents the raw data for this figure. Data are presented from 2015 onwards since different reporting periods were used previously.

Panel requests

Between 2022 and 2023, the number of requests for an EA fell from 705 to 662 (figure one) and consultant appointments fell from 521 to 469 (figure two).

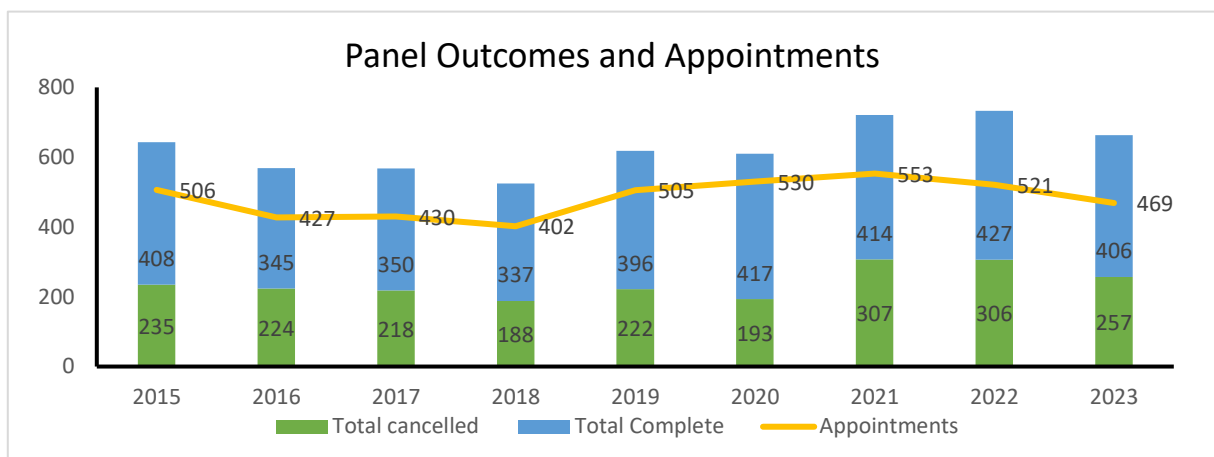
Figure one. The number of requests for an external advisor per annum.



Panel outcomes

There were 663 panels held in 2023, of which 406 made a total of 469 appointments, figure two. The year 2023 continued a trend of a reducing number of panels which made more than one appointment (109 in 2019 and 63 in 2023). There were an additional 257 panels cancelled in 2023 (306 in 2022). In 91% of cancellations, the cause was applicant related: no applicant in 160; no suitable applicant in 52; and applicants withdrew from 22 posts. See table four. Details of cancellations for individual Boards are provided on page 9.

Figure two. The outcome of panels per annum.





Panel cancellations

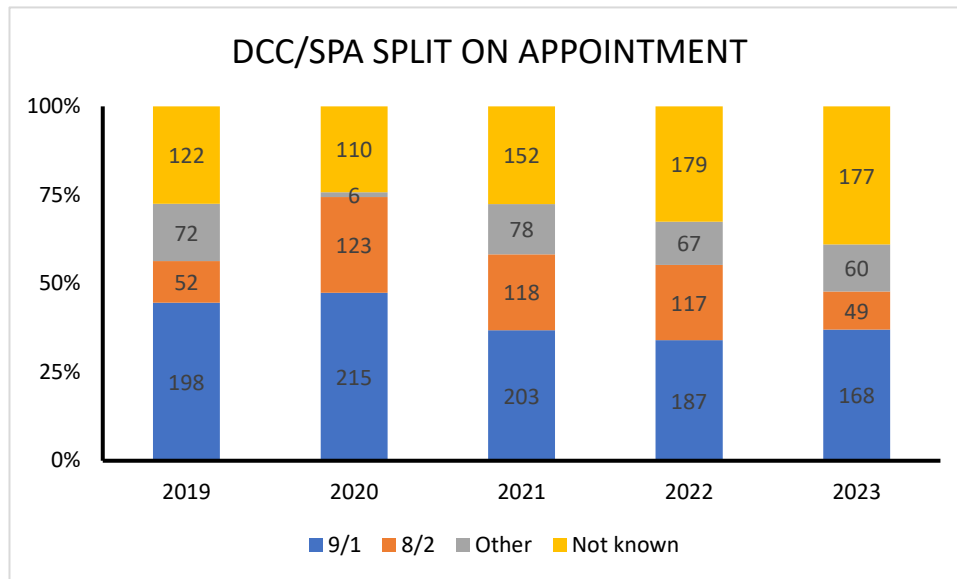
Table four. Reason for panel cancellations.

YEAR	NO APPLICANTS	NO SUITABLE CANDIDATES	CANDIDATE(S) WITHDREW	COVID -19	HB POSTPONED / REARRANGED	NO REASON GIVEN	OTHER	CANCELLED	% APPLICANT RELATED
2019	139	26	25	N/A	25	0	7	222	86%
2020	110	24	27	6	22	0	4	193	83%
2021	184	57	25	1	35	0	5	307	87%
2022	195	53	25	0	22	1	10	306	89%
2023	160	52	22	0	19	3	1	257	91%

Job descriptions

Where the job split was stated by the Health Board, 60% of jobs were appointed to with a 9:1 split in 2023, compared to 50% in 2022, figure three. The proportion of posts where the DCC:SPA split was unknown increased in 2023 and may partly explain the difference compared to 2022. Supplemental table three presents the raw data used for this figure.

Figure three. The split in direct clinical care (DCC) and supporting professional activities (SPA) 2019-2023.





Geographical spread of interviews

As in previous years, the largest number of interviews (124) took place in Greater Glasgow and Clyde, whilst in nine of the total of 22 organisations there were less than ten interviews arranged, table five. For organisations where at least ten interviews were arranged, between 14-64% were cancelled. When NHS Golden Jubilee and hospitals across Greater Glasgow and Clyde and Lothian (highlighted in grey below) were removed from the analysis, cancellation rates varied between 38-64%, table five.

Table five. The number of consultant appointment panels in each Health Board and University for 2023.

HEALTH BOARD	TOTAL	COMPLETED	APPOINTMENTS	CANCELLED	% CANCELLED
Ayrshire & Arran	25	16	17	9	36%
Borders	23	12	9	11	48%
Dumfries & Galloway	10	5	7	5	50%
Fife	38	21	30	17	45%
Forth Valley	45	26	37	19	42%
Golden Jubilee	14	12	15	2	14%
Grampian	69	35	49	34	49%
Greater Glasgow & Clyde	124	91	112	33	27%
Highland	75	27	37	48	64%
Lanarkshire	52	32	40	20	38%
Lothian	86	63	47	23	27%
Orkney	9	4	4	5	56%
Shetland	7	4	3	3	43%
State Hospital	1	1	2	0	0%
Tayside	50	31	36	19	38%
Western Isles	15	7	4	8	53%
NES Education for Scotland	1	1	1	0	0%
Public Health Scotland	6	6	8	0	0%
University of Aberdeen	4	3	3	1	25%
University of Dundee	1	1	1	0	0%
University of Edinburgh	5	5	5	0	0%
University of Glasgow	3	3	2	0	0%
Total	663	406	469	257	39%



Appointments by specialty

The busiest specialties continue to be General Psychiatry (65), Anaesthetics (53), Clinical Radiology (31), and Old Age Psychiatry (31).

Where there were 5 or more panels in 2023, there were:

- 12 specialties with >50% cancellations
- 17 specialties with 26-50% cancellations
- 10 specialties with 0-25% cancellations

Compared to the cancellations in the previous year, cancellations rose in 16 specialties and fell in 22 specialties.

Supplemental table four shows the number of panels across each of the specialties.

This report has been circulated to:

The Academy of Medical Royal Colleges and Faculties in Scotland
The Scottish Government Health and Social Care Directorate
NHS Education for Scotland (NES)
NHS Ayrshire & Arran
NHS Borders
NHS Dumfries & Galloway
NHS Fife
NHS Forth Valley
NHS Golden Jubilee
NHS Grampian
NHS Greater Glasgow & Clyde
NHS Highland
NHS Lanarkshire
NHS Lothian
NHS Health Scotland
NHS Orkney
NHS Shetland
NHS Tayside
NHS Western Isles
NHS 24
Public Health Scotland
University of Aberdeen
University of Dundee
University of Edinburgh
University of Glasgow

Contact and Support:

External Adviser Coordinators

T: +44 (0)131 247 3605

E: externaladvisers@rcpe.ac.uk

W: <https://www.scottishacademy.org.uk/external-advisers>



Appendix: Data Tables

Table one. The number of active and reserve External Advisors and the ideal required.

Specialty	ACTIVE EAs	RESERVE EAs	ALL EAs	2023 REQUESTS	EAs Required
Acute Medicine	8	8	16	17	6
Anaesthetics	19	10	29	53	18
Cardiology	5	4	9	14	5
Cardiothoracic Surgery	3	0	3	2	1
Chemical Pathology	2	1	3	1	1
Child & Adolescent Psychiatry	9	1	10	20	7
Clinical Genetics	2	1	3	1	1
Clinical Oncology	3	2	5	9	3
Clinical Pharmacology & Therapeutics	1	1	2	0	0
Clinical Radiology	16	6	22	31	11
Community Child Health	3	1	4	2	1
Dental Public Health	2	2	4	1	1
Dermatology	3	3	6	8	3
Emergency Medicine	6	5	11	18	6
Endocrinology & Diabetes Mellitus	5	4	9	10	4
Forensic Psychiatry	6	1	7	11	4
Gastroenterology	8	4	12	7	3
General Medicine	10	4	14	14	5
General Psychiatry	15	13	28	65	22
General Surgery	16	6	22	22	8
Genito-Urinary Medicine	2	0	2	2	1
Geriatric Medicine	9	6	15	19	7
Haematology	9	2	11	15	5
Histopathology	6	4	10	17	6
Immunology	2	0	2	2	1
Infectious Diseases	1	3	4	4	2
Medical Microbiology & Virology	4	2	6	9	3
Medical Oncology	3	5	8	7	3
Neurology	4	3	7	7	3
Neurosurgery	5	1	6	3	1
Nuclear Medicine	0	1	1	0	0
Obstetrics & Gynaecology	11	5	16	27	10
Occupational Medicine	0	4	4	5	2
Old Age Psychiatry	10	4	14	31	11
Ophthalmology	5	4	9	17	6
Oral & Maxillofacial Surgery	3	2	5	1	1
Oral Medicine	3	0	3	1	1
Oral Surgery	4	3	7	4	2
Orthodontics	3	3	6	6	2
Otolaryngology	6	2	8	10	4
Paediatric Cardiology	2	0	2	0	0
Paediatric Dentistry	1	1	2	1	1
Paediatric Surgery	2	1	3	1	1
Paediatrics	13	14	27	24	8
Palliative Medicine	4	3	7	6	2
Plastic Surgery	3	2	5	4	2
Psychiatry of Learning Disability	3	1	4	6	2
Psychotherapy	2	2	4	5	2
Public Health	11	1	12	28	10
Rehabilitation Medicine	3	0	3	5	2
Renal Medicine	3	2	5	6	2
Respiratory Medicine	7	3	10	16	6
Restorative Dentistry	2	3	5	5	2
Rheumatology	4	2	6	10	4
Special Care Dentistry	6	4	10	23	8
Trauma & Orthopaedic Surgery	8	4	12	11	4
Urology	5	3	8	16	6
Vascular Surgery	5	1	6	3	1
Total	316	178	494	663	223



Table two. Trend Data: Panel outcomes per annum.

YEAR	CANCELLED	COMPLETE	APPOINTMENTS	TOTAL
2015	235	408	506	643
2016	224	345	427	569
2017	218	350	430	568
2018	188	337	402	525
2019	222	396	505	618
2020	193	417	530	610
2021	307	414	553	721
2022	306	427	521	733
2023	257	406	469	663

Table three. Trend Data: 2015 – 2023 DCC/SPA Split on appointment

YEAR	9/1 SPLIT	8/2 SPLIT	OTHER	NOT KNOWN
2015	316	44	48	78
2016	241	64	68	48
2017	196	69	55	109
2018	178	67	70	114
2019	198	52	72	122
2020	215	123	6	110
2021	203	118	78	152
2022	187	117	67	179
2023	168	49	60	177



Table four. The number of consultant appointment panels convened in 2023, stratified by speciality. Percentage change from 2022 is presented for those specialties where there were at least five panels.

Specialty	Total	Completed	Appointments Made	Cancelled	% Cancelled 2023	% Cancelled 2022	% Difference
Acute Medicine	17	7	6	10	59%	48%	11%
Anaesthetics	53	36	47	17	32%	36%	-4%
Cardiology	14	9	9	5	36%	7%	29%
Cardiothoracic Surgery	2	2	2	0	0%	0%	N/A
Chemical Pathology	1	1	1	0	0%	0%	N/A
Child & Adolescent Psychiatry	20	5	4	15	75%	41%	34%
Clinical Genetics	1	1	2	0	0%	0%	N/A
Clinical Oncology	9	6	7	3	33%	58%	-25%
Clinical Pharmacology & Therapeutics	0	0	0	0	0%	0%	N/A
Clinical Radiology	31	23	40	8	26%	28%	2%
Community Child Health	2	2	2	0	0%	33%	N/A
Dental Public Health	1	1	1	0	0%	17%	N/A
Dermatology	8	3	3	5	63%	75%	-13%
Emergency Medicine	18	17	30	1	6%	13%	-7%
Endocrinology & Diabetes Mellitus	10	4	5	6	60%	67%	-7%
Forensic Psychiatry	11	7	6	4	36%	50%	-14%
Gastroenterology	7	5	4	2	29%	30%	-1%
General Medicine	14	5	4	9	64%	75%	-11%
General Psychiatry	65	23	25	42	65%	63%	2%
General Surgery	22	17	16	5	23%	16%	7%
Genito-Urinary Medicine	2	2	2	0	0%	33%	N/A
Geriatric Medicine	19	12	14	7	37%	52%	-15%
Haematology	15	7	7	8	53%	36%	18%
Histopathology	17	13	15	4	24%	54%	-30%
Immunology	2	0	0	2	100%	100%	N/A
Infectious Diseases	4	4	3	0	0%	50%	N/A
Medical Microbiology & Virology	9	5	5	4	44%	92%	-47%
Medical Oncology	7	5	5	2	29%	56%	-27%
Neurology	7	3	4	4	57%	0%	57%
Neurosurgery	3	2	2	1	33%	0%	N/A
Nuclear Medicine	0	0	0	0	0%	0%	N/A
Obstetrics & Gynaecology	27	20	26	7	26%	14%	12%
Occupational Medicine	5	0	0	5	100%	50%	50%
Old Age Psychiatry	31	7	5	24	77%	69%	8%
Ophthalmology	17	11	15	6	35%	64%	-29%
Oral & Maxillofacial Surgery	1	1	1	0	0%	14%	N/A
Oral Medicine	1	1	1	0	0%	100%	N/A
Oral Surgery	4	4	4	0	0%	0%	N/A
Orthodontics	6	2	1	4	67%	43%	24%
Otolaryngology	10	5	8	5	50%	80%	-30%
Paediatric Cardiology	0	0	0	0	0%	0%	N/A
Paediatric Dentistry	1	1	1	0	0%	0%	N/A
Paediatric Surgery	1	1	1	0	0%	0%	N/A
Paediatrics	24	20	24	4	17%	42%	-25%
Palliative Medicine	6	4	4	2	33%	29%	5%
Plastic Surgery	4	4	5	0	0%	50%	N/A
Psychiatry of Learning Disability	6	4	2	2	33%	0%	33%
Psychotherapy	5	3	3	2	40%	33%	7%
Public Health	28	24	25	4	14%	44%	-29%
Rehabilitation Medicine	5	5	3	0	0%	100%	-100%
Renal Medicine	6	6	7	0	0%	0%	0%
Respiratory Medicine	16	13	11	3	19%	28%	-9%
Restorative Dentistry	5	4	3	1	20%	30%	-10%
Rheumatology	10	5	6	5	50%	25%	25%
Special Care Dentistry	23	17	18	6	26%	13%	14%
Trauma & Orthopaedic Surgery	11	10	16	1	9%	15%	-6%
Urology	16	7	8	9	56%	57%	-1%
Vascular Surgery	3	0	0	3	100%	33%	N/A
Grand Total	663	406	469	257	39%	42%	-3%