



Department of
**Health, Social Services
and Public Safety**

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AN ROINN

**Sláinte, Seirbhísí Sóisialta
agus Sábháilteachta Poiblí**

MÁNNYSTRIE O

**Poustie, Resydènter Heisin
an Fowk Siccar**

Northern Ireland Clinical Excellence Awards Committee

***Annual Report
2007-2008***

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FOREWORD

This is the third annual report of the Northern Ireland Clinical Excellence Awards Committee (NICEAC). The report covers the period 1 April 2007 to 31 March 2008.

This year the process was once again a highly competitive one, with a total of 108 applications for higher awards and only 17 awards available for allocation. The committee found its task of deciding which consultants should be recommended for awards an extremely difficult one, particularly given the large number of excellent consultants who had applied. However, the committee was unanimous in its final recommendations for awards.

This document reports on the work of the committee during 2007-2008 and analyses the distribution of higher awards across the consultant population. It also includes a list of the names of the consultants recommended by the committee for higher awards in 2007-2008.

The committee has a quality assurance and monitoring role over the local awards process. At the time of publication of this report only one trust had submitted a report on the outcome of their lower awards for 2007-2008. This is disappointing and we are therefore unable to include any analysis of the lower awards process in this report. We will report on the outcome of the lower awards at a later date.

In our last annual report the committee commented on its concerns about the lack of lower awards and the difficulty this created for the scheme to operate consistently and continuously from local to regional level as was originally intended. The committee welcomed the Department's decision to allocate to trusts, as an interim measure, an additional £100k in 2008-2009 for lower awards. The committee is also pleased that the Department commenced a review of the scheme in October 2007, which included the funding mechanism for lower awards. The committee has had an opportunity to fully contribute to this review and we look forward to the outcome when it is finalised.

This year saw the departure of Dr Ian Carson, Professor Alan Crockard, and Mrs Elaine Way from the committee. We would like to express our sincere thanks to these members for their extremely valuable contribution to the work of the committee over the past number of years.

Once again we also wish to thank the consultants, committee members and the secretariat for all their support during the third year of the new scheme.

Pat Carvill
Chairman
Northern Ireland Clinical Excellence Awards Committee

REPORT ON THE OUTCOME OF HIGHER AWARDS

Introduction

1. This is the third annual report of the Northern Ireland Clinical Excellence Awards Committee (NICEAC) and covers the 2007-2008 awards round. The new clinical excellence awards scheme was introduced in 2005. The new scheme combines the discretionary points and distinction awards into a single graduated scheme. The scheme is governed by common assessment criteria with standard forms for all levels of awards. Lower awards (steps 1-9) are decided by local Trust committees. Higher awards (steps 10-12) are recommended by the regional committee (NICEAC).
2. The committee's remit is to recommend to the Department which medical and dental consultants should receive higher clinical excellence awards, and also to monitor and quality assure the outworkings of the local awards process. The committee, in making its recommendations, must have regard to the number of awards available for allocation. The Department is responsible for determining the number of higher awards that should be made available.
3. The rationale of the Northern Ireland clinical excellence awards scheme, as set out in the Guide to the scheme, is to "reward exceptional personal contributions made by individual consultants (above the normal expectations of a postholder) to the delivery of high quality care to patients and to the continuous improvement of Health and Social Care (HSC)."

Membership of NICEAC

4. The committee is constituted as follows: a lay chair, a vice chair (medical director), two HSC medical/dental members; two HSC employer members, one lay member, and two GB medical/dental members. There was one GB medical/dental member vacancy in 2007-2008. An independent external observer with a background in HR is present at committee meetings as an advisor on procedural aspects.
5. The membership of the committee for the 2007-2008 awards round is set out at Appendix A.

2007-2008 Awards Round

6. The awards round commenced in April 2007 and was completed in February 2008. The committee invited self nominations from all HSC consultants in May and a total of 108 applications were received. There were 92 applications for step 10 awards, 5 for step 11 awards and 11 for step 12 awards. There was a maximum of 17 awards available for allocation.
7. Because the awards process was extremely competitive, it was inevitable that a considerable number of excellent consultants failed to be recommended for an award, and the committee wishes to place on record its appreciation of the very high standard of performance that was apparent in many of the applications which on this occasion were unsuccessful.
8. The committee awarded a score for each of the four criteria: delivering a high quality service; developing a high quality service; managing a high quality service; and research, teaching and training, taking into account the information contained in the CV forms and the citation forms. All four criteria were equally weighted. The committee in deciding what score to award, looked for specific evidence of performance or achievements which could be regarded as over and above what would normally be expected of a consultant in a particular post. In order to achieve a high score in a particular criterion a consultant needed to demonstrate clear evidence of particularly outstanding performance in relation to the attributes covered by that criterion (details of the attributes required for each criterion are contained in Section 5 of the Guide to the Scheme).
9. The Chair and each of the 7 panel members independently scored each of the four criteria, awarding marks in the range 0-12, with 12 being the best. These scores were aggregated, and the resulting scores and consequent rank ordering were then considered and discussed by the committee as a whole at a meeting in January 2008. Scores were agreed for the 92 step 10 applications and a shortlisting cut off score was agreed. A total of 24 applications were shortlisted. Following the meeting in January members were allowed time to reflect on their initial scores for the shortlisted applications in the light of discussion at the meeting, and where they considered it appropriate members were free to amend their scoring. The revised scores were again aggregated, and were the subject of discussion by the full committee on a second occasion, in February 2008. Following challenge and review final scores were agreed for each of the shortlisted candidates and there was unanimous agreement on the 15 highest scores who were the successful candidates. Similar consideration was given to the step 11 and step 12 applications. The committee unanimously agreed on the two highest step 12 scores, who were the successful candidates. The committee agreed that no step 11 applications should be recommended for an award. The names of the successful step 10 and step 12 consultants are listed at page 9. A full list of all consultants in Northern Ireland holding distinction awards and higher clinical excellence awards can be found at Appendices B and C.

10. Some problems were identified by the committee this year with regard to the completion of citations. Some citation writers were not selective enough about which consultants they supported, and some did not provide sufficient reasons on the citation form when not supporting a consultant. Table 7 shows the number of citations supported by employers and senior award holders. The committee intends to meet both employers and senior award holders during the course of the next awards round in order to provide further advice and guidance on the citation process.
11. In February 2008 the committee visited the Renal Day Procedure Unit and the Radiology Department at Daisy Hill Hospital. The committee was most impressed by the work in these units and was grateful for the warm welcome it received. Consultants from the Southern HSC Trust were given the opportunity of questioning committee members about the awards scheme.

Five Year Reviews

12. Higher clinical excellence awards and distinction awards are subject to review every five years. The five year review process is important to ensure that consultants in receipt of awards continue to meet the criteria for awards. The committee can withdraw or downgrade an award if it believes an individual consultant does not continue to fulfil the criteria.
13. A total of 8 distinction awards were subject to review in this awards round. The committee Chair and Medical Director carefully considered the CV forms and the citation forms received from employers relating to each consultant and reported their findings to the full committee at its meeting in February. The committee recommended that all 8 awards should continue for a further five years.

Feedback

14. A consultant who has applied for a higher clinical excellence award and is dissatisfied with the committee's decision has the right of appeal to an independent appeals panel. An appeals panel will only consider the process by which the committee arrived at its decision; it will not consider whether an award should or should not have been made. A consultant must, in the first instance, request written feedback from the Chairman of NICEAC. Following the allocation of awards for 2007-2008, 42 consultants (4 step 12s, 1 step 11 and 37 step 10s) requested feedback and received a written response from the Chairman. Three of those consultants (1 step 12 and 2 step 10) requested further feedback at a meeting with the Chairman and Medical Director. There were no formal appeals to an independent appeals panel.

Review of the scheme

15. A review of the scheme commenced in October 2007, including a review of the mechanism for funding lower awards. A consultation document, inviting comments on a number of areas, was issued in January 2008. A total of 44 responses to the consultation paper were received including responses from consultants, employers, Royal Colleges, specialty associations and the BMA. The committee was fully involved in contributing to the review. The committee Chairman and Medical Director were members of the review group, tasked with taking forward the review, and individual committee members were given the opportunity of providing comments. The BMA also contributed to the review and met the review group on two occasions. Recommendations from the review group have been made to the Department, but at the time of publication of this report, no decisions had been announced. The committee looks forward to hearing the outcome of the review.

Distribution of Awards

16. The committee monitors the distribution of higher awards in six areas: specialty, gender, Board area, age, ethnic origin and community background. The purpose of monitoring the outcome of awards is to identify, and if necessary permit the examination of reasons for any imbalances in the distribution of awards. However, it must be emphasised that awards are granted to individuals solely on the grounds of merit. The committee does not positively discriminate in favour of any particular group. It is highly unlikely in a competitive process such as this (and given the small number of awards available annually) that there will be a balanced proportion of awards between the various groups. Nevertheless, the monitoring process is extremely important; it is essential that any imbalances are identified and that the reasons for those imbalances are fully examined.
17. As mentioned above a total of 17 awards were made (2 step 12s and 15 step 10s). The 2 step 12 awards were allocated to A distinction award holders. All those with a minimum of step 4/4 discretionary points were eligible to apply for a step 10 award. The fifteen step 10 awards were allocated to 8 B distinction award holders with the remainder going to discretionary points holders. The committee does not take account of the level of any pre-existing award once a consultant is eligible to apply.

Specialty

18. There are variations in the distribution of awards across the range of specialties (see Table 1). For this awards round there was a reasonable spread of awards across specialties with a total of nine specialties receiving at least one award. Most awards went to general medicine (4 awards) and paediatrics (3 awards). An analysis of the overall distribution of awards following the 2007-2008 awards round shows that specialties such as psychiatry, orthopaedics, and radiology continue to have a lower proportion of awards. It should be noted that only one

application was received from consultants in orthopaedics and three applications from consultants in radiology.

Gender

19. This year the proportion of female consultants applying for an award was down on last year. 5.6% of all applicants were female compared to 9.9% last year. No female consultants received an award this year. The overall proportion of higher awards held by female consultants has decreased to 8.7% (from 11.9% last year (see Table 2). There remains a significant under representation of female consultants at the higher award level given that female consultants represent 28% of the consultant population. The committee would continue to welcome more self nominations from female consultants.

Board Areas

20. Table 3 gives a breakdown of the number of applications and awards granted by Board area. The Eastern Board area contains 62% of the total consultant population, but holds 81.7% of all awards. The Eastern Board area holds 66% of all B distinction awards (Western Board 17%, Southern Board 12% and Northern Board 5%). In this awards round 76.9% of all applicants were from Eastern Board Trusts and 94.1% of available awards went to consultants in the Eastern Board area. The Northern Board area received 5.9% of available awards (1 award). No awards went to consultants in the Southern and Western Board areas. There remains an imbalance in the geographical distribution of awards. However, it is perhaps not surprising that the greatest proportion of applicants should come from the larger hospitals (particularly those providing regional specialties) and Queen's University, which are located in the Eastern Board area.

Age

21. The average age of those consultants who received an award in 2007-2008 was 51 for step 10 awards (down slightly on last year when it was 53) and 52 for step 12 awards (see Table 4). It is to be expected that higher award holders will tend to be older, given the experience and length of time needed to achieve the very high standards required. However, it is noteworthy that five step 10 and one step 12 award were granted to consultants in the 45 - 49 age bands, an indication that the scheme is able to recognise the achievements of outstanding younger consultants.

Ethnic Origin

22. Out of the 108 applications received, no data was provided on ethnic origin on six of those applications. 5.6% of consultants who applied for an award (6 applications) declared themselves as coming from the minority ethnic groups (see Table 5). None of the available awards went to consultants from the smaller ethnic groups. We do not hold data on the ethnic origin of all consultants holding higher awards. However, the evidence suggests an under representation of consultants from the smaller ethnic groups at the higher award level. The committee would welcome more applications from eligible consultants in these groups. A survey of Trusts in 2007 indicates that 7% of all consultants are from the ethnic minority groupings.

Community Background

23. Most consultants provided the relevant information on community background on the monitoring form. An analysis of those who applied for an award shows that 59.2% declared themselves as coming from a Protestant community (PC) background, 23.1% from a Roman Catholic community (RCC) background, 12.1% from “neither” a PC nor a RCC background and 5.6% were “not knowns” (see Table 6). A survey of Trusts in 2007 on the consultant population indicates that 48% of consultants have declared a PC background, 31.5% a RCC background, 9.5% neither a PC nor a RCC background, and 11% were “not knowns”. The proportion of applications from consultants declaring a RCC background (23.1%) was below the proportion of consultants from a RCC background in the consultant population as a whole (31.5%).
24. An analysis of the awards made in this round shows that 12 awards went to consultants who had declared a PC background, 4 awards went to consultants who had declared a RCC background and 1 award went to a consultant who had declared himself as coming from neither a PC nor a RCC background. (see Table 6). The proportion of awards going to consultants who had declared a RCC background (23.5%) reflects almost exactly the corresponding proportion of applicants. The committee would continue to welcome more self nominations from consultants declaring a RCC background.
25. We do not hold data on the community background of all consultants holding higher awards. However, the data held suggests an under representation of consultants declaring a RCC background at the higher award level. One possible factor which may be affecting the position is that there appears to be a differential age profile between PC and RCC consultants. A survey carried out in 2007 suggested that 24% of consultants who declared a RCC background were over 51 years of age, compared with 37% of consultants who declared a PC background. Given that the average age of the successful consultants in this year’s awards round was 52, and that in general it will be consultants with a longer career history who are more likely to be able to offer the evidence of high achievement that is looked for in making awards, this may be part of the explanation for the imbalance.

26. The committee remains committed to the principle of awards being made purely on the basis of individual merit. Information on the community background of applicants is not, of course, made available to committee members, and scoring is conducted without regard to this factor. We recognise that with such small numbers of awards, year to year fluctuations in this area may be inevitable: even a single award can make a significant difference to the respective success rates. However, we will continue to closely monitor the outcomes of awards in order to identify general trends, and will continue to seek to identify and to examine the reasons for any imbalances.

Further Information

27. Further information about the scheme or additional copies of the guide or the annual report can be obtained by contacting the NICEAC secretariat either by telephone (028 905 22869) or by writing to the NICEAC secretariat at Room D1, Castle Buildings, Upper Newtownards Road, Belfast, BT4 3SJ. The Guide and the annual report are also available on the Department's website www.dhsspsni.gov.uk/ (health and social care/clinical excellence awards scheme).

LIST OF HIGHER AWARDS GRANTED IN 2007-2008

The following consultants employed by the HSC in Northern Ireland were granted clinical excellence awards in 2007-2008

STEP 12

NAME	SPECIALTY	EMPLOYER	DATE OF AWARD
Elborn JS	Medicine -Respiratory	Belfast Health and Social Care Trust	01/04/2007
Jenkins J G	Paediatrics	Northern Health and Social Care Trust	01/04/2007

STEP 10

Burden D J	Orthodontics	Belfast Health and Social Care Trust	01/04/2007
Craig B G	Paediatric Cardiology	Belfast Health and Social Care Trust	01/04/2007
Edgar J D	Pathology-Immunology	Belfast Health and Social Care Trust	01/04/2007
Elliott P M	Anaesthetics	Belfast Health and Social Care Trust	01/04/2007
Gardiner K R	General Surgery	Belfast Health and Social Care Trust	01/04/2007
Higginson J D S	Cardiology	South Eastern Health and Social Care Trust	01/04/2007
Jackson P T	Paediatrics	Belfast Health and Social Care Trust South Eastern Health and Social Care Trust	01/04/2007
Kirk S J	General Surgery	South Eastern Health and Social Care Trust	01/04/2007
Linden G J	Periodontology- Restorative Dentistry	Belfast Health and Social Care Trust	01/04/2007
Lowry K G	Intensive Care	Belfast Health and Social Care Trust	01/04/2007
McBride M O	HIV and Genitourinary Medicine	Belfast Health and Social Care Trust	01/04/2007
McDonald G	Psychiatry-Adult	Belfast Health and Social Care Trust	01/04/2007
McVeigh G E	Clinical Pharmacology and Therapeutics	Belfast Health and Social Care Trust South Eastern Health and Social Care Trust	01/04/2007
Taylor I C	Geriatric Medicine	South Eastern Health and Social Care Trust	01/04/2007
Toner J G	ENT	South Eastern Health and Social Care Trust	01/04/2007

TABLE 1

ANALYSIS BY SPECIALTY AT 1 APRIL 2007 (2007-2008 AWARDS ROUND)

SPECIALTY				CONSULTANTS WHO APPLIED FOR AN AWARD 2007/2008		CONSULTANTS WHO RECEIVED AWARDS 2007/2008		CONSULTANTS HOLDING AWARDS		DISTRIBUTION OF AWARDS BY GRADE				
	No	% of consultant body	Average Age by Specialty	No	% of self nominations	No	% of available awards	No	% of overall awards	A+	A	B	Step 12	Step 10
Anaesthetics	182	15.3%	46	16	14.8%	2	11.8%	14	13.5%	1	4	4	-	5
ENT	22	1.8%	50	3	2.8%	1	5.9%	3	2.9%	-	1	1	-	1
General Medicine & Allied Specialties (1)	241	20.3%	46	28	25.9%	4	23.5%	24	23.1%	1	5	10	2	6
Geriatric Medicine	36	3%	50	6	5.6%	1	5.9%	7	6.7%	-	-	4	-	3
Mental Illness (2)	124	10.4%	47	8	7.4%	1	5.9%	6	5.8%	1	2	1	-	2
Obs & Gynae	64	5.4%	50	7	6.5%	-	-	5	4.8%	-	1	2	-	2
Ophthalmology	29	2.4%	47	-	-	-	-	2	1.9%	-	-	2	-	-
Orthopaedics	41	3.4%	47	1	0.9%	-	-	2	1.9%	-	-	2	-	-
Paediatrics	81	6.8%	47	8	7.4%	3	17.7%	8	7.7%	-	1	2	2	3
Pathology (3)	84	7.1%	48	10	9.3%	1	5.9%	8	7.7%	1	1	-	-	6
Public Health Medicine (4)	35	2.9%	51	2	1.9%	-	-	6	5.8%	-	1	4	-	1
Radiology	91	7.6%	45	3	2.8%	-	-	1	1.0%	-	-	-	-	1
Oncology (5)	23	1.9%	45	1	0.9%	-	-	3	2.9%	-	-	1	1	1
Surgery (6)	112	9.4%	49	10	9.3%	2	11.8%	11	10.6%	-	1	7	-	3
Dental Specialties (7)	25	2.1%	49	5	4.6%	2	11.8%	4	3.8%	-	1	1	-	2
TOTALS	1190			108		17		104		4	18	41	5	36

NOTES

- (1) GENERAL MEDICINE & ALLIED SPECIALTIES - Anatomy, Accident & Emergency, Cardiology, Clinical Neuro-Physiology, Clinical Genetics, Clinical Pharmacology, Dermatology, Endocrinology and Diabetes, General Medicine, Genito-Urinary Medicine, Infectious Diseases, Nephrology, Neurology, Physiology, Rheumatology, Rehabilitation Medicine, Sports Medicine.
- (2) MENTAL ILLNESS - Child & Adolescent Psychiatry, Forensic Psychiatry, Mental Handicap, Mental Illness, Psychiatry of Old Age, Psychotherapy.
- (3) PATHOLOGY - Chemical Pathology, General Pathology, Haematology & Blood Transfusion, Histology, Histopathology, Immuno-Pathology, Medical Microbiology, Neuropathology.
- (4) PUBLIC HEALTH MEDICINE - Occupational Medicine, Public Health Medicine.
- (5) ONCOLOGY - Clinical Oncology, Medical Oncology.
- (6) SURGERY - Cardiothoracic Surgery, General Surgery, Neurosurgery, Paediatric Surgery, Plastic Surgery, Urology.
- (7) DENTAL SPECIALTIES - Dental Anatomy, Dental Prosthetics, Oral Surgery, Paediatric & Preventative Dentistry, Periodontics, Restorative Dentistry, Orthodontics

TABLE 2**ANALYSIS BY GENDER**

	Male		Female	
		%		%
SELF NOMINATIONS RECEIVED	102	94.4	6	5.6
CONSULTANTS HOLDING AWARDS (DISTINCTION AWARDS/HIGHER CEA'S)	95	91.3	9	8.7
AWARDS GRANTED IN 2007/2008	17	100	0	0

TABLE 3**ANALYSIS BY BOARD AREA**

	NORTHERN	SOUTHERN	EASTERN	WESTERN
NUMBER OF CONSULTANTS	160	136	738	156
%	13.4	11.4	62.1	13.1
NUMBER OF SELF NOMINATIONS	5	7	83	13
%	4.6	6.05	76.9	129
AWARDS GRANTED	1	0	16	0
%	5.9	0	94.1	0
NUMBER OF TOTAL AWARDS PER AREA	4	5	85	10
% OF TOTAL AWARDS (out of 104)	3.8	4.8	81.7	9.6

TABLE 4**ANALYSIS OF NEW AWARDS BY AGE**

AGE GROUP	NEW AWARDS	
	Step 12	Step 10
35-39	-	-
40-44	-	-
45-49	1	5
50-54	-	7
55-59	1	3
60-64	-	-
TOTAL	2	15
AVERAGE AGE	52	51

TABLE 5**ANALYSIS BY ETHNIC ORIGIN**

	WHITE		NOT KNOWN		ETHNIC MINORITY	
		%		%		%
SELF NOMINATIONS RECEIVED	96	88.8	6	5.6	6	5.6
AWARDS GRANTED 2007/2008	17	100	-	-	-	-

TABLE 6**ANALYSIS BY COMMUNITY BACKGROUND**

	PC		RCC		NEITHER		NOT KNOWN	
		%		%		%		%
SELF NOMINATIONS RECEIVED	64	59.2	25	23.1	13	12.1	6	5.6
AWARDS GRANTED 2007/2008	12	70.6	4	23.5	1	5.9	0	-

NOTE:

- PC – consultants who declared themselves as members of the Protestant community.
RCC - consultants who declared themselves as members of the Roman Catholic community.
NEITHER - consultants who declared themselves as members of neither the Protestant nor the Roman Catholic community.

TABLE 7**STEP 10 APPLICATIONS – CITATIONS ISSUED TO EMPLOYERS**

EMPLOYER	CITATIONS ISSUED	CITATIONS SUPPORTED	CITATIONS NOT SUPPORTED
Belfast HSC Trust	54	28	26
Northern HSCT	4	4	0
South Eastern HSC Trust	14	3	11
Southern HSC Trust	7	1	6
Western HSC Trust / Western Board	13	3	10
Queen's University (Joint Appointees)	10	4	6
TOTAL	92	39 (42.4%)	53 (57.6%)

STEP 10 APPLICATIONS – CITATIONS ISSUED TO SENIOR AWARD HOLDERS

SPECIALTY	CITATIONS ISSUED	CITATIONS SUPPORTED	CITATIONS NOT SUPPORTED
TOTAL	92	49 (53.2%)	43 (46.8%)

NORTHERN IRELAND CLINICAL EXCELLENCE AWARDS COMMITTEE

MEMBERSHIP 2007-2008 AWARDS ROUND

CHAIRMAN

Mr Patrick Carvill

Former permanent secretary Department of Education for Northern Ireland (1990-1998) and Department of Finance and Personnel (1998-2003); Commissioner, South Eastern Education and Library Board (2006 to date).

MEDICAL DIRECTOR

Professor Robert W Stout

Director of Research and Development for the HPSS, Professor of Geriatric Medicine at Queen's University Belfast and consultant physician at Belfast City Hospital (retired 30 September 2007).

MEMBERS

Dr Ian W Carson

Chairman of the Regulation and Quality Improvement Authority, a former Deputy Chief Medical Officer and former consultant anaesthetist at the Royal Group of Hospitals HSS Trust.

Professor Alan Crockard

Professor of Surgical Neurology (Personal Chair), Institute of Neurology and The National Hospital for Neurology and Neurosurgery, University College London Hospitals NHS Trust.

Mrs Anne Balmer

Chairman Southern Health and Social Care Trust.

Mrs Diane Drennan

Solicitor, working as a legal consultant in the Office of Law Reform.

Professor Curly Morris

Consultant Haematologist in Belfast Health and Social Care Trust

Mrs Elaine Way

Chief Executive Western Health and Social Care Trust.

**DISTINCTION AWARD HOLDERS IN
NORTHERN IRELAND**

A+ AWARD HOLDERS

NAME	SPECIALTY	EMPLOYER	DATE OF AWARD
Atkinson A B	Medicine/Endocrinology	Belfast Health and Social Care Trust	01/10/2003
McClelland R J	Psychiatry-Adult	Belfast Health and Social Care Trust	10/09/2003
Mirakhur R K	Anaesthetics	Belfast Health and Social Care Trust/QUB	01/10/2001
Morris T C M	Pathology/Haematology	Belfast Health and Social Care Trust	01/11/2003

**A AWARD
HOLDERS**

Boyle DD	Obstetrics and Gynaecology	Belfast Health and Social Care Trust	01/10/2003
Callender M E	General Medicine	Belfast Health and Social Care Trust	01/04/2003
Campbell W I	Anaesthetics	South Eastern Health and Social Care Trust	01/08/2001
Carson D J	Paediatrics	Belfast Health and Social Care Trust/QUB	27/04/2002
Cooper S J	Psychiatry-Adult	Belfast Health and Social Care Trust/QUB	01/07/2002
Crean P M	Anaesthetics	Belfast Health and Social Care Trust	01/10/2004
Evans A E	Public Health Medicine	Eastern Health and Social Services Board/QUB	13/08/1999
Fee J P H	Anaesthetics	Belfast Health and Social Care Trust/QUB	02/01/2000
Gillespie C A	Psychiatry-Adult	Western Health and Social Care Trust	01/10/2003
Hawkins S A	Neurology	Belfast Health and Social Care Trust/QUB	01/10/2001
Johnston G D	Clinical Pharmacology and Therapeutics	Belfast Health and Social Care Trust/QUB	01/10/1999
Kaluskar S K	ENT	Western Health and Social Care Trust	03/08/2004
Lamey P-J	Oral Medicine	Belfast Health and Social Care Trust/QUB	01/10/2001
MacMahon J	General Medicine	Belfast Health and Social Care Trust	01/10/2003
Maw R D	Genitourinary Medicine	Belfast Health and Social Care Trust	01/04/2004
McClelland W M	Pathology/Haematology	N.I.Blood Transfusion Service Agency	01/10/2004
McMurray T J	Anaesthetics	Belfast Health and Social Care Trust	10/09/2003
Spence R A J	General Surgery	Belfast Health and Social Care Trust	01/04/2004

**B AWARD
HOLDERS**

NAME	SPECIALTY	EMPLOYER	DATE OF AWARD
Abram W P	Clinical Oncology	Belfast Health and Social Care Trust	01/08/2001
Adams D A	ENT	Belfast Health and Social Care Trust/QUB	12/09/2000
Andrews W J	General Medicine	Northern Health and Social Care Trust	01/04/2001
Bell A H	Paediatrics	NI Health Promotion Agency	01/10/2002
Beverland D E	Orthopaedic & Traumatic Surgery	Belfast Health and Social Care Trust	01/04/2003
Bingham E A	Dermatology	Belfast Health and Social Care Trust	01/08/1998
Campbell F C	Gaestroentological Surgery	Belfast Health and Social Care Trust/QUB	01/04/2001
Collins J S A	General Medicine	Belfast Health and Social Care Trust	01/10/2003
Cranley B	General Surgery	Southern Health and Social Care Trust	09/06/2000
Diamond T	General Surgery	Belfast Health and Social Care Trust	01/10/2001
Dinsmore W W	Genitourinary Medicine	Belfast Health and Social Care Trust	01/10/2004
Eedy D J	Dermatology	Southern Health and Social Care Trust	03/08/2004
Fulton R A	Dermatology	Western Health and Social Care Trust	28/01/2001
Gilmore D H	Geriatric Medicine	Belfast Health and Social Care Trust	01/04/2004
Gregg T A	Paediatric Dentistry	Belfast Health and Social Care Trust	01/04/2001
Hannon R J	General Surgery	Belfast Health and Social Care Trust	01/04/2003
Hood J M	General Surgery	Belfast Health and Social Care Trust	01/04/1997
Johnston P B	Ophthalmology	Belfast Health and Social Care Trust	01/10/1995
Kelly J F	Geriatric Medicine	Western Health and Social Care Trust	01/02/2003
Loughran P G	Anaesthetics	Southern Health and Social Care Trust	01/10/1998
Maxwell R J	General Surgery	Belfast Health and Social Care Trust	01/09/2000
McClure N	Obstetrics and Gynaecology	Belfast Health and Social Care Trust/QUB	01/06/2003
McCluskey D R	General Medicine	Belfast Health and Social Care Trust/QUB	01/10/2002
McConnell W W M	Public Health Medicine	Western Health and Social Care Trust	02/04/1997
McGinnity M G A	Psychiatry-Adult	Belfast Health and Social Care Trust	01/08/2001
McGuigan J A	Thoracic Surgery	Belfast Health and Social Care Trust	01/10/2000
Murray J M	Anaesthetics	Belfast Health and Social Care Trust/QUB	01/04/2004

B AWARD HOLDERS cont'd

NAME	SPECIALTY	EMPLOYER	DATE OF AWARD
Nicholls D P	General Medicine	Belfast Health and Social Care Trust	31/05/1999
Orr I A	Anaesthetics	Southern Health and Social Care Trust	01/08/2001
Passmore A P	Geriatric Medicine	Belfast Health and Social Care Trust/QUB	01/06/2003
Russell C J	General Medicine	Western Health and Social Care Trust	01/10/1997
Sharma N K	Ophthalmology	Western Health and Social Care Trust	01/09/2002
Stewart D G T	Public Health Medicine	Regulation Quality and Improvement Authority	31/12/2002
Stewart M C	Paediatrics	Belfast Health and Social Care Trust/QUB	01/08/2001
Taggart H M	Geriatric Medicine	Belfast Health and Social Care Trust	01/10/2000
Taylor R H	Anaesthetics	Belfast Health and Social Care Trust	01/10/2001
Telford A M	Public Health Medicine	Southern Health and Social Services Board	01/10/1999
Traub A I	Obstetrics and Gynaecology	Belfast Health and Social Care Trust	01/04/2000
Varma M P S	General Medicine	Western Health and Social Care Trust	01/10/2004
Watson J D	Public Health Medicine	Northern Health and Social Services Board	02/05/1999
Wray A R	Orthopaedic & Traumatic Surgery	Western Health and Social Care Trust	01/06/2003

**HIGHER CLINICAL EXCELLENCE AWARD HOLDERS IN
NORTHERN IRELAND**

STEP 12

NAME	SPECIALTY	EMPLOYER	DATE OF AWARD
Doherty CC	Renal Medicine	Belfast Health and Social Care Trust	01/04/2006
Elborn JS	Medicine -Respiratory	Belfast Health and Social Care Trust/QUB	01/04/2007
Jenkins J G	Paediatrics	Northern Health and Social Care Trust/QUB	01/04/2007
Johnston PG	Medical Oncology	Belfast Health and Social Care Trust/QUB	01/04/2006
Savage JM	Paediatrics	Belfast Health and Social Care Trust/QUB	01/04/2005

STEP 10

Bell P M	General Medicine	Belfast Health and Social Care Trust	01/04/2006
Beringer T R O	Geriatric Medicine	Belfast Health and Social Care Trust	01/04/2006
Burden D J	Orthodontics	Belfast Health and Social Care Trust/QUB	01/04/2007
Coyle P V	Pathology-Medical Microbiology	Belfast Health and Social Care Trust	01/04/2005
Craig B G	Paediatric Cardiology	Belfast Health and Social Care Trust	01/04/2007
Daly J G	Medicine -Respiratory	Western Health and Social Care Trust	01/04/2006
Dornan J C	Obstetrics and Gynaecology	Belfast Health and Social Care Trust	01/04/2006
Edgar J D	Pathology-Immunology	Belfast Health and Social Care Trust	01/04/2007
Elliott P M	Anaesthetics	Belfast Health and Social Care Trust	01/04/2007
Farling P A	Anaesthetics	Belfast Health and Social Care Trust	01/04/2006
Fullerton K J	Geriatric Medicine	Belfast Health and Social Care Trust	01/04/2006
Gardiner K R	General Surgery	Belfast Health and Social Care Trust	01/04/2007
Harper M A	Obstetrics and Gynaecology	Belfast Health and Social Care Trust	01/04/2005
Higginson J D S	Cardiology	South Eastern Health and Social Care Trust	01/04/2007
Houston R F	Clinical Oncology	Belfast Health and Social Care Trust	01/04/2006
Irwin S T	General Surgery	Belfast Health and Social Care Trust	01/04/2006
Jackson P T	Paediatrics	Belfast Health and Social Care Trust	01/04/2007

STEP 10 (cont'd)

NAME	SPECIALTY	EMPLOYER	DATE OF AWARD
Johnston J R	Anaesthetics	Belfast Health and Social Care Trust	01/04/2006
Johnston L C	Radiology	Belfast Health and Social Care Trust	01/04/2006
Jones F G C	Pathology-Haematology	Belfast Health and Social Care Trust	01/04/2005
Kee F	Public Health Medicine	Northern Health and Social Services Board/QUB	01/04/2005
Kirk S J	General Surgery	South Eastern Health and Social Care Trust	01/04/2007
Lavery G G	Anaesthetics	Belfast Health and Social Care Trust	01/04/2006
Linden G J	Periodontology- Restorative Dentistry	Belfast Health and Social Care Trust/QUB	01/04/2007
Lowry K G	Intensive Care	Belfast Health and Social Care Trust	01/04/2007
Maxwell A P	Nephrology	Belfast Health and Social Care Trust/QUB	01/04/2006
McBride M O	HIV and Genitourinary Medicine	Belfast Health and Social Care Trust	01/04/2007
McDonald G	Psychiatry-Adult	Belfast Health and Social Care Trust	01/04/2007
McMullin M F	Pathology-Haematology	Belfast Health and Social Care Trust/QUB	01/04/2005
McVeigh G E	Clinical Pharmacology and Therapeutics	Belfast Health and Social Care Trust/QUB	01/04/2007
Patterson D G	Psychiatry-Adult	Belfast Health and Social Care Trust	01/04/2006
Shields M D	Paediatrics	Belfast Health and Social Care Trust/QUB	01/04/2005
Smyth E T M	Pathology-Medical Microbiology	Belfast Health and Social Care Trust	01/04/2005
Taylor I C	Geriatric Medicine	South Eastern Health and Social Care Trust	01/04/2007
Toner J G	ENT	South Eastern Health and Social Care Trust	01/04/2007
Young I S	Chemical Pathology	Belfast Health and Social Care Trust/QUB	01/04/2005

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