

Department of Health, Social Services & Public Safety
An Roinn Sláinte, Seirbhísí Sóisialta agus Sábháilteachta Poiblí

**GUIDE TO THE
NORTHERN IRELAND
CLINICAL EXCELLENCE AWARDS SCHEME**

2007/2008 AWARDS ROUND

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SECTION 1: INTRODUCTION TO THE SCHEME

This section explains the background, the rationale and basic structure of the clinical excellence awards scheme

Background

1. The Northern Ireland Clinical Excellence Awards scheme was introduced in 2005. This Guide provides detailed guidance on the scheme and covers both higher awards (decided by the regional committee) and lower awards (decided by Trusts). The awards are given to recognise and reward contributions to HSC which are “**over and above**” the standard normally expected of a consultant in their post.

Rationale and objectives

2. The scheme aims to ensure recognition of exceptional personal contributions made by individual doctors who show a commitment to achieving the delivery of high quality care to patients and to the continuous improvement of HSC. They must work to the standards of professional conduct and personal conduct required by the General Medical Council or the General Dental Council.

3. In particular, the objectives are:

To reward individuals who perform over and above the standard expected of a consultant in their post, and who locally, regionally, nationally or internationally:

- demonstrate sustained commitment to patient care and wellbeing or improving public health;
 - sustain the highest standards in both technical and clinical aspects of service delivery whilst providing patient focused care;
 - in their day to day practice demonstrate a sustained commitment to the values and goals of HSC by participating actively in annual job planning, observing the private practice Code of Conduct, and showing a commitment to achieving agreed service objectives;
 - through active participation in clinical governance contribute to continuous improvement in service organisation and delivery;
 - embrace the principles of evidence-based practice;
 - contribute to the knowledge base through research or other scholarly work and participate actively in research governance;
 - are recognised as exceptional teachers and/or trainers and/or managers;
 - contribute to policy-making and planning in health and health care;
 - make an outstanding contribution to professional leadership.
4. Individuals will not be expected to meet all of these objectives to be worthy of an award. Much will depend on the nature and type of the post they hold.

Structure of the Scheme

5. The Northern Ireland Clinical Excellence Awards scheme is a single, graduated scheme and comprises both local and regional elements. Lower awards (formerly discretionary points) will be made by local (employer) committees. These awards will primarily reward outstanding contributions to local service delivery objectives and priorities. Higher awards (formerly Distinction Awards) will be recommended by the Northern Ireland Clinical Excellence Awards Committee (NICEAC). For higher awards contributions at a regional, national and international level will be important. However, it will still be possible for consultants who deliver a wholly local contribution to progress to the higher awards.
6. There are twelve levels of award. The first nine awards will be recommended by local committees (steps 1- 9), and the three highest awards will be recommended by the regional committee (steps 10-12).
7. There is a single set of assessment criteria, with one standard CV self nomination form for all levels of awards. Self nomination is the sole method of nomination at both the local and higher level. There is a standard process for seeking citations at both levels. All awards will be decided on the grounds of merit.
8. All awards will be paid in addition to the consultant's basic salary; higher awards will subsume the value of any award held previously; and awards for part time consultants will be paid on a pro rata basis (excluding Joint Appointments). The values of all awards will be annually updated taking into account the recommendations of the Doctors and Dentists Pay Review Body. The number of awards available each year will be necessarily limited, and will be linked to the number of retirements etc of existing award holders.
9. Separate guidance for local (employer) committees has been developed (Section 7). The regional committee will monitor the operation of the local scheme. The regional committee will publish an annual report.
10. Consultants in receipt of a distinction award or discretionary points keep them, subject to existing review provisions, and are eligible to apply for awards under the Clinical Excellence Awards scheme (subject to the criteria being met). The award of a Clinical Excellence Award subsumes the value of any discretionary points or distinction awards held by the consultant.

SECTION 2: THE STRUCTURE AND MAIN FUNCTIONS OF THE CLINICAL EXCELLENCE AWARDS COMMITTEE

This section sets out the role and membership of the Northern Ireland Clinical Excellence Awards Committee

Regional Committee

11. The Northern Ireland Clinical Excellence Awards Committee (NICEAC) is a Non-Departmental Public Body. Its function is to make recommendations to the Department on which HSC consultants should receive the higher value awards, having regard to the number of awards available for allocation. It also has a quality assurance role over the local awards process.
12. The membership will be as follows:
 - Lay Chairman 1
 - Vice Chairman (Medical Director) 1
 - Medical or Dental members HPSS 2
 - External medical members (GB) 2
 - Employer members 2
 - Lay member 1
13. The Chairman and the lay member will be appointed adopting the principles of the public appointments process (advertising, interviewing etc). Professional members are appointed by the Minister on advice from the Chief Medical Officer. They are not appointed as representatives of any individual specialty or employer. Employer members are appointed by the Minister on advice from the Department. They are not appointed to represent the views of any particular organisation or employer.
14. Guidance on the structure and role of local committees is set out in Section 7 which covers lower awards.

NICEAC Secretariat

15. The Northern Ireland Clinical Excellence awards Committee (NICEAC) has a secretariat that forms part of the Department of Health, Social Services and Public Safety. The principal functions of the secretariat are to:
 - provide day to day support for the Chairman and Medical Director;
 - take the lead in the Department of Health, Social Services and Public Safety on the development of operational policy for NICEAC; and
 - undertake the duties arising from the process of making annual awards.
16. Self nomination forms for Levels 10, 11 and 12 awards should be sent to the secretariat.

SECTION 3: ELIGIBILITY

This section explains who is eligible and who is not eligible for awards

Who is eligible?

17. Those eligible for a Clinical Excellence Award are:
- a) Consultants who have at least three year's experience at consultant level, who hold a medical or dental qualification, who are fully registered, and who are employed by organisations such as the following:
- Health and Social Care (HSC)Trust;
 - Health and Social Services Board;
 - Central Services Agency;
 - Health Promotion Agency;
 - Blood Transfusion Service;
 - Queen's University Belfast;
 - The Department of Health, Social Services and Public Safety (where the consultant retains HSC/NHS Terms and Conditions of Service);
 - Other bodies, which are approved from time to time as proper employers of consultants for the purposes of the HSC.
- b) Joint Appointees – eligibility for awards is based on the contribution made to the HSC defined in wider terms than direct care to patients. The entitlement to full eligibility for an award is based on five programmed activities (or equivalent sessional time) beneficial to the HSC, including teaching and clinical research.
- c) Eligible consultants who are subsequently employed as Deans (undergraduate and postgraduate) in medicine or dentistry are fully eligible on the basis of their work in such posts.
- d) Eligible consultants working as clinical and medical directors of HSC Trusts retain their eligibility for clinical excellence awards, account being taken of both their clinical work and whether their contribution as clinical or medical director is particularly noteworthy. Consultants spending time almost exclusively in medical management will be considered for awards (to ensure that they continue to be eligible for appropriate revalidation by the GMC, clinical consultants in medical management posts should normally undertake some clinical practice).
18. For higher awards, consultants must have achieved a minimum of four lower clinical excellence awards or four discretionary points to become eligible.
19. Eligibility for all awards is dependent upon participation in annual appraisal. Employers will be expected to indicate that a satisfactory appraisal has taken place in the 12 months prior to the application. NICEAC will not be seeking information about the appraisal itself. Employers will also be expected to

confirm that the consultant's job plan and contractual obligations have been fulfilled and that the consultant has complied with the Private Practice Code of Conduct. In addition employers will be asked to confirm that any concerns raised about a consultant have not been upheld following disciplinary action by the employer or the General Medical Council or General Dental Council.

20. Employers will be expected to inform the local committee and NICEAC, on the citation form or at any time after it has been submitted, of any ongoing disciplinary matters. The Committee will take note of any disciplinary process underway and will await the eventual outcome so that any appropriate action can be taken promptly and in consultation with the employer and the consultant.

Who is not eligible?

21. Consultants employed in the following categories are not eligible for clinical excellence awards:
 - locum consultants.
 - consultants employed in full-time general management positions, such as Chief Executives and who do not undertake clinical work as a consultant under a separate clinical contract.
 - Joint Appointment Academic General Practitioners.

Effects on eligibility following changes in circumstances

22. The following changes in circumstances may affect payment of, or eligibility for, awards:

Change in specialty

23. If an award-holder ceases to practise in the specialty for which the award was granted, the circumstances of the case will be subject to review by NICEAC, or in the case of local awards, the Local Awards Committee.

General Management

24. In the case of a consultant who ceases to practice in the specialty for which the award was granted and moves into a full or part-time general management post, the arrangements for protecting the full monetary value of any award held will be a matter for prior discussion and agreement between the employer and the consultant. Where an award-holding consultant returns to clinical work after a period in a full-time general management position, the award may be reinstated provided the consultant returns to a similar post in the same speciality. However, if an award holder undertakes full time general management for a period in excess of one year, the question of the reinstatement of the award will be subject to review by NICEAC, or in the case of local awards, the Local Awards Committee.

Unpaid leave

25. The payment of an award shall cease during any period of unpaid leave. If the leave is for a period in excess of one year, the question of the reinstatement of the award will be subject to review by NICEAC, or in the case of local awards, the Local Awards Committee.

Secondments

26. If a consultant is seconded full-time to a post with a non-qualifying employer, he or she will not be eligible for consideration for an award during the period of secondment. Any existing award will be regarded by NICEAC as suspended for the duration of the secondment. The arrangements for protecting the full monetary value of any award held during the period of secondment will be a matter for prior discussion and agreement between the employer(s) and the consultant as part of the terms of the secondment. If the secondment is for a period in excess of one year, the question of the reinstatement of the award will be subject to review by NICEAC.

Prolonged absence from HSC

27. In the case of consultants who have not practised their specialty within HSC for a period in excess of one year, the question of the reinstatement of the award will be subject to review by NICEAC, or in the case of local awards, the Local Awards Committee.

Effect of retirement on clinical excellence awards

28. On retirement all awards cease, including Clinical Excellence Awards and Distinction Awards; they are consolidated into pension. Consultants who are re-employed after retirement do **not** retain eligibility for payment of their award.

SECTION 4: SELF NOMINATION PROCESS

This section explains the arrangements for submitting self nominations and citations for awards

29. **Self nomination is the only method of nomination for all awards.** Self nomination must be made by completing a CV Form (see copy attached at Annex A for illustrative purposes only). It is available on the Department's website www.dhsspsni.gov.uk/ (health and social services/clinical excellence awards scheme).
30. Before proceeding with their application, consultants should consider whether they meet the eligibility criteria set out in Section 3.
31. It will be normal practice for consultants to move from one step to the next. Consultants must have achieved a minimum of four local awards/discretionary points before they can apply for a higher award (consultants may, if they wish, apply for both a lower and a higher award in the same year).
32. Guidance showing which new clinical excellence awards existing award holders can apply for is set out in Appendix 2. It is also available on the Department's website www.dhsspsni.gov.uk (health and social services/clinical excellence awards scheme).

Submitting applications

33. All applications must be made in the **current** format available on the website www.dhsspsni.gov.uk/ (health and social services/clinical excellence awards scheme). In completing each section, applicants must comply strictly with the instructions on the form. Applicants should also read Section 5 of the Guide which explains the assessment criteria.
34. The closing date for submitting self nominations to NICEAC for Steps 10 to 12 awards will be rigidly adhered to. **Late applications cannot be accepted.** Local Awards Committees will determine the closing date for submitting applications for the lower awards.
35. The secretariat will **not** be responsible for completing incomplete applications.
36. All CV self nominations for higher awards should be submitted **electronically**. At the start of each awards round all eligible consultants will be invited by letter to self nominate for a higher award. If a consultant decides to apply he/she will be asked to complete and sign a short proforma (which will be attached to the letter) and return it to the secretariat. He/she will then be sent, by e mail, details of how to apply. The CV form will not need to be signed electronically.

37. When filling in the CV form consultants must:
- adhere strictly to the instructions on the form;
 - not use abbreviations to indicate names of societies, groups, etc;
 - not exceed the box limits;
 - be succinct;
 - use a new line for each example.

Care should be taken to ensure that, in each section, information is provided which is relevant only to that section. Pieces of information/examples should normally be used only once on the CV form. It is important that consultants include all relevant information on the current CV form as no account is taken of any previous application. Any section left blank or with limited information will be attributed a zero or a low score.

38. Personal Statement - in this section consultants should describe the reasons why they believe they should be considered for a Clinical Excellence Award. The focus should be on the most significant achievements and the most important examples of local, national and international work.

Citation Process

39. On receipt of a self nomination, the secretariat will seek citations. There will be a standard process for seeking citations at both local and regional level when a consultant self nominates for an award.

For **local awards** citations will be sought from:

Steps 1 to 7	Employer
Steps 8 and 9	Employer and Senior Award Holder

Normally either the Clinical Director or the consultant's appraiser should complete employer citations for local awards.
(In the case of joint appointees, citations will also be sought from Queen's University)

For **higher awards** citations will be sought from:

Step 10	Employer and Senior Award Holder
Steps 11 and 12	Employer, Senior Award Holder and either, the consultant's Royal College or Specialty Association

Either the Chairman or Chief Executive should sign the employer citations for higher awards.
(In the case of joint appointees, citations will also be sought from Queen's University)

40. All citations must be completed in the **current** format available at the Department's website: www.dhsspsni.gov.uk/ (health and social services/clinical excellence awards scheme). In completing each section, citation writers **must** comply strictly with the instructions on the form (a copy of the citation form is attached as an annex for illustrative purposes only). The citation writer should be succinct and should not exceed the box limits on the form. Citation writers should write only one citation for each applicant, even if they are requested to write on behalf of more than one organisation. The closing date on the form should also be rigidly adhered to.
41. As there are many more applications than awards available, applications should only be supported if the candidate, in the view of the citation writer, is deemed to be worthy of an award. If the citation writer decides not to support a particular self nomination he/she should indicate this by ticking "no" in the appropriate box on the form, complete the section giving reasons, and sign and date the form at the end and return to the NICEAC secretary. Employers will also be required to complete the section "For Employers Only" even if not supporting an application (it is still possible for a consultant to receive an award if not supported by a particular citation writer). Citation writers will have sight of the consultant's completed CV form.
42. Citation writers will be asked on the form to indicate an assessment of the candidate for each of the four criteria.
- delivering a high quality service
 - developing a high quality service
 - managing a high quality service
 - contributing to HSC through research, teaching, and training.

Citation writers will then be required to give brief reasons on the form to support their markings for each criterion.

Appeals against the Process

43. The scheme will have an independent appeals process. An appeals panel will be set up and will comprise three people nominated by the Department and who were not involved in the original decision. The appeals panel will only consider the process by which the decision was made. It will not consider whether an award should or should not have been made. If the panel find a flaw in the process they will have the authority to ask NICEAC to look at the case again. Guidance on the appeals process is available on the Department's website www.dhsspsni.gov.uk/ (health and social services/clinical excellence awards scheme).

SECTION 5: ASSESSMENT CRITERIA

This section explains the criteria for awards; what NICEAC look for when considering Step 10 to 12 award self nominations; and other factors NICEAC will take into account

44. The four criteria will apply to both local (employer) and higher awards (steps ten to twelve). Consultants will be expected to score highly in all four areas if an application is to succeed. Decisions at the local level and the higher level should be made by means of an objective scoring framework. At the higher level all four criteria will be equally weighted.
45. All consultants applying for an award must be carrying out their work to the standards of professional and personal conduct required by the General Medical Council or the General Dental Council. The employer's citation must confirm this.
46. The criteria should be used to focus on the most important examples of the consultant's local, national, and international work. It is essential that achievements are dated and listed in chronological order. They should describe outcomes. For those already holding awards and applying for a higher level, the information provided must normally focus on achievements since the previous award was granted. However, if the interval between gaining awards is short, the Committee will pay particular attention to performance and achievements in recent years.

Criterion 1 – delivering a high quality service

47. In this section of their CV consultants should present evidence of their achievements in delivering a service which is safe, quality assured and where opportunities for quality improvement are consistently sought and implemented.
48. Information in support could cover, for example:
 - excellence in the delivery of professional commitments; this may include reference to validated performance or outcome data (ideally presented in comparative terms), reference to external or peer review reports assessing the quality of the consultant's service, or the demonstrated usage of evidence-based practice;
 - exemplary standards in dealing with patients, relatives and all grades of medical and other staff; this may include reference to validated patient or carer surveys or feedback on the service;
 - excellence in leadership of the team for which the consultant has sole, rotational or shared responsibility;
 - leadership role in relation to clinical governance.

Criterion 2 – developing a high quality service

49. In this section of the CV consultants should present evidence of the ways in which they have introduced developments to enhance significantly the quality and safety of their local service and/or services more widely within HSC.
50. Indicate here the developments you have been responsible for either alone or in a team with evidence that these have been of high quality and benefit. Do this separately for each post you hold.
51. Information in support could cover, for example:
- development of relevant audit cycles and completing them;
 - analysis of risk and managing it; this may include examples of specific improvements, reduced risk or enhanced safety;
 - improvement in service delivery which has had a demonstrable effect; this may include evidence that their service has become more patient-centred and accessible;
 - innovation in service delivery, which has had a demonstrable effect; this may include evidence of improved outcomes or of the introduction of major innovations in prevention, diagnosis, treatment or models of care.

Criterion 3 – managing a high quality service

52. In this section of the CV consultants should present evidence of the ways in which they have made a substantial personal contribution in the management of a local service, in national or international health policy development or planning.
53. Information in support could cover for example:
- change management (aimed at improving the effectiveness or efficiency of services) which the individual has led;
 - development of new policies or plans for health or health care;
 - major reviews, inquiries or investigations;
 - national policies aimed at modernising health services or professional practice.
54. Give here management posts held:

- in your trust (e.g. medical director or clinical director);
- in your Health Board;
- nationally or internationally (e.g. officer of committee, task force, college or specialty society) or other employing organisation.

55. For each post, give in one sentence evidence of any outstanding contributions that you have made.

Committee membership, as such, is insufficient evidence of an awardable contribution. If you wish such membership to be considered, you must indicate why. NICEAC is aware that membership of some national or international boards or advisory bodies is itself recognised as a marker of high professional status. Even then, it is advisable to give evidence of how you have contributed.

Do **not** give here educational responsibilities such as chairman of a training committee. These should be entered in criterion 4(b).

Criterion 4 (A) - research

56. For some applicants, research will form a major part of the contribution that they make to HSC that is “over and above” what would be contractually expected of them and they will wish to focus on this aspect of their contribution when making their application for a Clinical Excellence Award. If you wish to do this, you should give here:

- an outline of your research aims and activity (one sentence- e.g. my research is clinically orientated and addresses problems arising due to chronic pulmonary disease);
- in one sentence on a separate line, what has been achieved and what it is hoped to achieve;

Then provide evidence in support of these, such as

- grants held;
- contribution to the research and supervision of others;
- other markers of standing in your chosen research field or fields such as office bearer of learned societies; visiting professorships;
- peer reviewed publications, chapters written and books edited or written; indicate editorial activity;

For Levels **10** and above you may wish to complete the supplementary research form. (see copy attached at Annex A1 for illustrative purposes only). It is available on the Department’s website www.dhsspsni.gov.uk (click on health and social services/clinical excellence awards)

Applicants who have introduced innovation into the delivery or organisation of healthcare may also describe this under criterion 4(A).

Criterion 4 (B) – teaching and training

57. Teaching and training are an important aspect of a consultant’s career, and the development of junior colleagues is assumed by NICEAC to be part of the consultant’s normal role.
58. However, for some consultants, teaching and training will form a major part of the contribution that they make to HSC that is “over and above” what would be contractually expected of them and they will wish to focus on this aspect of their contribution when making their application for a Clinical Excellence Award.
59. Evidence of excellence should focus on some of the following:-
 - medical undergraduate teaching;
 - contribution to postgraduate education and life long learning; include here contributions to teaching in other UK centres or abroad;
 - contribution to education of other health and social care professions;
 - undergraduate or postgraduate examining; supervision of postgraduate degree students;
60. Criteria of excellence include:
 - **quality of teaching** – provide evidence of student feedback and other forms of assessment of teacher quality which can be drawn on to provide a basis for their views;
 - **leadership and innovation in teaching** – new course development; innovative assessment methods, introduction of new learning facilities, authorship of successful text books or of other teaching media;
 - **scholarship, evaluation and research in the educational domain contributing to national and international educational leadership** – presentations; invitations to lecture; peer reviewed and other publications on educational matters;
 - **institutional success in regulatory body and QA audits of teaching** in which the individual has played a key role;
 - **evidence of personal commitment to development of teaching skills** – a post graduate teaching certificate, courses completed etc;
 - **evidence of unusual teaching and educational commitment and workload not recognised in other ways.**

SECTION 6: REVIEW OF AWARDS

This section explains the arrangements for the five year review of awards; the effect of withdrawal/downgrading of awards; and the additional review provisions available to NICEAC

5 Year Review Process

61. This section deals with the process of reviews for higher awards. Clinical Excellence Awards and Distinction Awards granted from the 1989 awards round onwards are both subject to review at five-yearly intervals. (Note: Clinical Excellence Awards awarded by local awards committees are also subject to review by employers on a five yearly basis – see paragraph 98 of Section 7).
62. The secretariat will notify those consultants whose awards are subject to the 5 year review process and request them to complete the 5-year Review CV form. The form will include a closing date which must be adhered to. The consultant must set out how he or she continues to meet the criteria for which the award was initially given. Those applying for renewal should demonstrate, by reference to their achievements since the original award or the last review (whichever is appropriate), that they continue to meet the criteria for the scheme. The focus must be on activity within the five year period leading up to the review. Information on earlier activity must only be included to demonstrate evolving contributions.
63. Following the closing date for return of the 5 Year Review form, NICEAC will seek a completed review citation form from the individual's employer setting out their views on how the individual continues to meet the criteria for an award. The employer must indicate whether:
 - the consultant still merits the award held;
 - the consultant continues to work to the standards of the professional conduct and personal conduct required by the General Medical Council or the General Dental Council;
 - the consultant meets the eligibility criteria for an award in terms of job planning, appraisal, and the private practice code of conduct (see paragraph 19).
 - there is any adverse outcome for the consultant following disciplinary action by employer or GMC/GDC.
64. The five-year review ensures that only those consultants who continue to meet the performance standards required will have their award renewed. In reaching decisions on renewals, consideration will also be given to any outstanding disciplinary or professional proceedings.
65. NICEAC adopts the principle that an accused doctor is innocent until proved guilty. However, it remains the case that the employer should inform NICEAC when formal disciplinary proceedings occur. NICEAC will note this but await the eventual outcome so that any appropriate action can be taken promptly and in consultation with the employer and the consultant.

66. The five-year review cycle does not preclude issues regarding performance being drawn to NICEAC's attention at any other time. Employers should be aware that at any stage where, in their view, there is good evidence that an award should be reconsidered, they have a duty to inform the Chairman and Medical Director. NICEAC will then consider whether any action should be taken.
67. If the Chairman and Medical Director conclude, following review, that an award is no longer merited they will recommend to NICEAC that the award should be withdrawn or downgraded.
68. Before referring such cases to NICEAC, the head of the secretariat will inform the consultant of the recommendation and the reasons for it. He or she will then have the opportunity to make a written submission to NICEAC before the final decision is taken. At the same time that the consultant is invited to make representations, the head of the secretariat will inform the consultant's employer of the recommendation and invite any further views that they may wish to bring to NICEAC's attention.
69. In some circumstances, the Chairman and Medical Director may recommend to NICEAC that a consultant's award be renewed, but for a shorter period than 5 years, thus allowing the consultant an opportunity to demonstrate that he or she once again meets the criteria for the level of award held.

Downgrading

70. A system of salary protection will generally be applied if an award is downgraded or withdrawn. The consultant's salary will be frozen until the maximum of the consultant salary scale (plus the value of any lower award if the original award was downgraded) has caught up with his or her "mark-time" earnings. The maximum of the salary scale for this purpose will include any underlying discretionary points held by the consultant. In exceptional circumstances NICEAC may determine that an award and its financial component be withdrawn completely.

On retirement

71. Clinical Excellence Awards and Distinction Awards cease to be paid on the retirement of the consultant. For consultants who are expected to retire within five years, any renewal of existing awards (Distinction Awards or Clinical Excellence Awards) will normally extend to the consultant's expected retirement date. However, where the expected retirement date is only shortly beyond the limit of the five year review, NICEAC will use its discretion to renew the award until that date, even though this may result in a renewal slightly beyond the five year limit.

SECTION 7: GUIDANCE ON LOCAL AWARDS

Role and Responsibilities

72. The Clinical Excellence Award scheme comprises 12 levels of award. Each HSS Board and HSC Trust employing consultants will appoint a local committee (or link with a neighbouring Trust to constitute a viable committee) to consider applications for the first nine levels of award (steps 1 to 9). The regional committee, the Northern Ireland Clinical Excellence Awards Committee (NICEAC) will make recommendations to the Department for the three highest awards (steps 10 to 12).
73. The regional committee will also have a quality assurance role over the local awards process.

Eligibility

74. Consultants who have served three years at 31 March will be eligible to apply for a local award (apart from consultants who already hold a Distinction Award or a higher Clinical Excellence Award). Eligibility, as with higher awards, will also be dependent on participation in annual appraisal, fulfilment of job plan and contractual obligations, compliance with the private practice code of conduct, and confirmation that any concerns raised about a consultant have not been upheld following disciplinary action by the employer or the GMC/GDC. Paragraph 17 of this Guide explains who is eligible and covers both higher and lower awards. Paragraphs 22 - 28 deal with the effects on eligibility following a change in circumstances and also cover both higher and lower awards.

Quality Assurance

75. Each Local Awards Committee (LAC) must put in place a transparent process for the award of local Clinical Excellence Awards which reflects any regional guidance. LACs must ensure that there is a clear audit trail for all applications ensuring that their decisions are properly documented and that the processes are transparent, fair and based on clear evidence.
76. Each LAC must produce an annual report for the NICEAC committee on the outcome of the local awards process. The annual report should be used to demonstrate that the process was completed fairly and in accordance with guidelines.

In particular the report must include:

- a) the number of consultants eligible for consideration (i.e. those in post for at least 3 years who do not already have a level 10 award or above) and a breakdown of the eligible consultants by particular groups: academics; female consultants; ethnic minority consultants; and community background;

- b) the overall number of current award holders at each level and a breakdown of award holders by the relevant groupings (academics; females; ethnic minorities; and community background);
 - c) the names of the consultants recommended for an award;
 - d) a compliance statement signed by the chairman of the LAC regarding the process and mechanisms adopted for deciding which consultants should receive awards.
77. The statistical information provided by LACs will be included as part of the regional Committee's own annual report. A template for the LAC annual report will be made available to employers. The annual report should be drafted for submission to the NICEAC secretariat by 31 March.

Membership

78. Membership will be agreed locally in accordance with the guidance below. Membership should reflect a spread of specialties, gender, ethnic minority and community background representation. Each LAC should have between four and six members, of whom at least 50% will be active consultants.
79. The LAC will comprise:
- Board/Trust Chairman (or non-executive director)
 - Chief Executive (or director nominee)
 - Medical Director (or nominee in cases where there would be a conflict of interest)
 - Up to three higher (regional) award holders (this could include a consultant with eight discretionary points if there are no higher award holders available). Ideally one of the higher award holders should be from a Trust outside the consultant's employment.
80. Members will be expected to have received appropriate training.

How the Scheme operates

81. Local awards (steps 1 to 9) will be payable to those consultants making an outstanding contribution at local level against nationally set criteria. Joint Appointments and public health doctors should be included in the local awards process and should be considered on the basis of their overall contribution to the HSC.
82. Applications for all levels of awards, including local awards, should only be made by self nomination. There will be a standard CV form for all local awards (a copy is attached as an annex to this Guide for illustrative purposes). It is available on the Department's website www.dhsspsni.gov.uk/ (health and social services/clinical excellence awards scheme)

Separate guidance is attached at Appendix 2 which shows which new awards existing award holders can apply for. It is also available on the Department's website www.dhsspsni.gov.uk/ (health and social services/clinical excellence awards scheme).

83. The number of new awards available each year will necessarily be limited. Awards will be decided on a competitive basis, based on the relative merits of individual cases. While there has been no reduction in the overall funding allocated by the Department to Boards for discretionary points/lower awards, for the next year no additional funding will be provided, other than adjustments for annual uplifts. The formula for calculating the minimum number of points should not be applied. The Department's recommendation to Trusts is that points should be recycled as consultants retire or leave. However, Trusts have discretion on the number of lower awards to allocate, but will have to meet any additional costs out of its existing budget.
84. Higher clinical excellence awards are fully funded centrally by the Department. If a consultant who is in receipt of a lower award retires or achieves a higher award, the value of the lower award becomes available to the Trust for recycling. If a consultant in receipt of a higher award retires, the value of that award becomes available to the Department for redistribution to the higher clinical excellence awards scheme.

Assessment Criteria

85. LACs are required to consider consultant applications against the strict criteria set out in the Guide to the scheme. Scoring systems should be developed to decide on applications. The assessment criteria for all levels of awards is set nationally and the criteria for local awards will be the same as the criteria for higher awards. The four criteria are:
- delivering a high quality service
 - developing a high quality service
 - managing a high quality service
 - contributing to the HSC through research, teaching, and training.

In assessing applications, LACs should, of course, take account of what achievements are possible at different stages of a consultant's career. Achievement should be measured within the parameters for which the consultant is employed to recognise service over and above the normal delivery of the consultant's job plan and contractual duties.

86. When filling in the CV form consultants must:
- adhere strictly to the instructions on the form;
 - not use abbreviations to indicate names of societies, groups, etc;
 - not exceed the box limits;
 - be succinct;
 - use a new line for each example.

87. As with higher awards, care should be taken to ensure that, in each section, information is provided which is relevant only to that section. Pieces of information/examples should normally be used only once on the CV form. It is important that consultants include all relevant information on the CV form as no account is taken of any previous application.
88. In the “personal statement” section consultants should describe the reasons why they believe they should be considered for a Clinical Excellence Award. The focus should be on the most significant achievements and the most important examples of local, national and international work.
89. Section 5 of this Guide gives some detailed guidance on the type of information needed for each criterion.
90. All consultants applying for a lower award must be carrying out their work to the standards of professional and personal conduct required by the General Medical Council or the General Dental Council. This must be confirmed by the employer.
91. The four criteria should be used to focus on the most important examples of the consultant’s local, and where appropriate, national and international work. It is essential that achievements are dated and listed in chronological order. They should describe outcomes. For those already holding awards and applying for a higher level, the information provided must normally focus on achievements since the previous award was granted. However, if the interval between gaining awards is short, the LAC should pay particular attention to performance and achievements in recent years.

Citation Process

92. There will be a standard process for seeking citations at both local and regional level when a consultant self nominates for an award. For local awards citations should be sought from the employer for steps 1 – 7, and from the employer and senior award holder in the particular specialty for steps 8 – 9. Employer citations should normally be completed by either the Clinical Director or the consultant’s appraiser.
93. As with higher awards, citations for lower awards must be made in the current format available on the Department’s website: www.dhsspsni.gov.uk/ (health and social services/clinical excellence awards scheme). In completing each section, citation writers must comply strictly with the instructions on the form (a copy of the citation form for local awards is attached as an annex for illustrative purposes only). The citation writer should be succinct, and should not exceed the box limits on the form. The closing date on the form must also be rigidly adhered to.
94. If the citation writer decides not to support a particular self nomination he/she should indicate this by ticking “no” in the appropriate box on the form, complete the section giving reasons, and sign and date the form at the end and

return to the LAC. Employers will also be required to complete the section “For Employers Only” (even if not supporting an application).

95. Citation writers will be asked on the form to indicate an assessment of the candidate for each of the four criteria (with criterion four split between teaching and research).

delivering a high quality service
developing a high quality service
managing a high quality service
contributing to the HSC through research, teaching, and training.

Citation writers will then be required to give brief reasons on the form to support their markings for each criterion.

Effective date of local Awards

96. Local awards should normally be paid from 1 April.

Appeal against the Process

97. Employers will be required to have an appropriate appeal/review mechanism in place where a consultant is dissatisfied with the decision made. A committee set up by the Trust will consider any appeal against the process, for each round of awards and constituted differently from that which took the original decision.

Reviews

98. Employers will be required to establish a mechanism to review local awards every five years. Awards should also be reviewed at other times where disciplinary or professional proceedings have upheld concerns or allegations about the consultant’s conduct or performance.

NICEAC TIMETABLE

The timetable for 2007-2008 awards round is as follows: -

- April 2007:** The relevant extracts from the Nominal Roll will be issued by the NICEAC secretariat to employers to confirm that the data used by the secretariat is accurate. Confirmation must be returned to NICEAC secretariat no later than **4 May 2007**
- In the case of Clinical Academic Staff, a list of Joint Appointments will be issued to QUB to confirm that the data used by the secretariat is accurate.
- The accuracy of the Nominal Roll is ultimately dependent on employers informing the NICEAC secretariat of new appointments, retirements, resignations etc. **Failure to provide this information may result in a consultant not being notified of an Awards Round and therefore being excluded from the scheme.**
- May 2007:** **Higher Awards** - NICEAC secretariat will write to all HSC consultants (to their place of employment) informing them of the start of the 2007/2008 awards round.
- The NICEAC secretariat will also notify HSC employers, Senior Award Holders, Queen's University, Royal Colleges, the BMA and Specialty Associations, of the NICEAC timetable.
- The closing date for the return of the completed CV form to the NICEAC secretariat is **6 July 2007**.
- May 2007:** A consultant who is subject to the 5 yearly review will be asked to complete the 5-Year Review CV Form. The closing date for the return of completed forms to the NICEAC secretariat is **6 July 2007**.
- August 2007** Following the closing date for receipt of CV Forms the NICEAC secretariat will seek citations from the relevant employer, Senior Award Holder (on behalf of all Award Holders in the specialty), and the relevant Royal Colleges or Specialty Associations. The closing date for the return of the completed Citation form to the NICEAC secretariat is **12 October 2007**.

- August 2007:** Following the closing date for receipt of completed 5-Year Review CV Forms, the Secretariat will seek 5-year review citations from the individual consultants' employer. The closing date for the return of completed forms to the NICEAC secretariat is **12 October 2007**.
- September 2007:** Meeting with Senior Award Holders. The NICEAC Chairman, Medical Director and any local members will meet Senior Award Holders to advise on any issues regarding the process.
- November 2007:** After the closing date for receipt of CV Forms and Citation Forms, the secretariat will collate all the information submitted for issue to the Committee for the shortlisting meeting. Scores to be returned to the NICEAC Secretary by **4 January 2008**.
- January 2008:** Shortlisting meeting of the Committee takes place.
- February 2008:** Formal meeting of the Committee takes place to make recommendations to the Department for the allocation of awards in 2007-2008 and to consider the renewal of awards subject to 5-Year Review.
- March 2008:** All consultants notified of the outcome of the awards round. Employers, Senior Award Holders, and Royal Colleges also notified. Consultants whose awards were subject to 5-Year Review and employers notified of decision(s) on 5-year reviews.
- March 2008:** The Secretariat will monitor the outcome of NICEAC deliberations in terms of the composition of awards by gender, specialty, area, age etc. and will seek annual reports from employers on the outcome of the lower awards process.

NOTE: ALL CLOSING DATES WILL BE RIGIDLY ADHERED TO BY THE SECRETARIAT

Guidance for existing award holders on applications for Clinical Excellence Awards

Eligibility

1. A consultant must have completed 3 years service as a consultant before he/she can apply for a Local Award. Furthermore, a consultant must be in receipt of at least 4 Discretionary Points/Step 4 Local Award to be eligible to apply for a Higher Award.
2. Consultants currently in receipt of Distinction Awards or Discretionary Points will retain their existing Award/Points (subject to normal review procedures) and will be eligible to apply for Clinical Excellence Awards at the levels set out in the table below. The value of any Clinical Excellence Award made will subsume the value of any existing Distinction Award or Discretionary Points.

Current Award Held		Clinical Excellence Award
No award	May apply for:	Step 1
1 DP / Step 1	”	Step 2
2 DP / Step 2	”	Step 3
3 DP / Step 3	”	Step 4
4 DP / Step 4	”	Step 5 or 10
5 DP / Step 5	”	Step 6 or 10
6 DP / Step 6	”	Step 7 or 10
7 DP / Step 7	”	Step 8 or 10
8 DP	”	Step 8 or 10
Step 8	“	Step 9 or 10
Step 9	“	Step 10
Step 10	“	Step 11
B Award	”	Step 10
A Award	”	Step 12
A+ Award	Will remain on current award.	

3. In view of the significant difference in value between 8 Discretionary Points and Step 9 on the Clinical Excellence Awards scale, it is considered appropriate that a consultant on 8 points should only be able to apply for a step 8 on the Clinical Excellence Awards scale (although these consultants will be able to apply for a step 10 higher award).
4. An existing B award holder can only apply for a step 10.

Multiple Applications

5. Consultants may, if they wish, apply for both a lower award and a higher award (subject to eligibility criteria) in the same year.

Multiple Awards

6. Although employers may make awards that advance consultants by more than one step in any year, this should only occur exceptionally.

Value of Awards

7. The value of awards under the clinical excellence awards scheme and the former scheme (both at 1 April 2007) are as follows:

Clinical Excellence Awards		Former Scheme	
Award	Value	Award	Value
Step 1	£2,850	1 DP	£3,088
Step 2	£5,700	2 DP	£6,176
Step 3	£8,550	3 DP	£9,264
Step 4	£11,400	4 DP	£12,352
Step 5	£14,250	5 DP	£15,440
Step 6	£17,100	6 DP	£18,528
Step 7	£22,800	7 DP	£21,616
Step 8	£28,500	8 DP	£24,704
Step 9	£34,200		
Step 10	£44,965	B Award	£30,808
Step 11	£56,206	A Award	£53,911
Step 12	£73,068	A+ Award	£73,158

NORTHERN IRELAND CLINICAL EXCELLENCE AWARDS SCHEME – CV FOR HIGHER AWARD

Name (In full)		Professional Title Please select	Level applying for Please select
<u>Employer(s) name(s)</u> <u>with number of sessions/PAs per employer</u>		<u>List of consultant appointments in date order:</u>	
Total No of PAs per week: No on direct clinical care: No on supporting professional activities: No on external duties:		Professional Qualifications For steps 11 and 12 state full name and address of either one Royal College <u>or</u> one Specialty Association from whom you wish a citation sought	
Specialty		Home Address	
Current level of award held Please select			
Date of last award: [dd/mm/yyyy]			
GMC/GDC Reg No	Work Tel	Email	

Before completing these boxes you should read the notes in Sections 4 and 5 of the Guide
CV FORM MUST BE TYPED USING FONT SIZE 10. THERE MUST NOT BE ANY INCREASE IN THE NUMBER OF PAGES OR IN THE SIZE OF THE SECTIONS. ANY FORM SUBMITTED WITH ADDITIONAL PAGES WILL BE RETURNED.

PERSONAL STATEMENT (approx. 200 words)

CRITERION 1: DELIVERING A HIGH QUALITY SERVICE (approx. 300 words)

CRITERION 2: DEVELOPING A HIGH QUALITY SERVICE (approx. 300 words)

CRITERION 3: MANAGING A HIGH QUALITY SERVICE (approx. 300 words)

CRITERION 4A: CONTRIBUTING TO THE HPSS THROUGH RESEARCH (approx 300 words) (the introduction of innovation into the delivery or organisation of healthcare may also be described here). If a candidate at higher level completes Form A to illustrate their research achievements it is not necessary to fill in Criterion 4A: simply enter “see Form A”.

CRITERION 4B: CONTRIBUTING TO THE HPSS THROUGH TEACHING and TRAINING (approx. 300 words)

(Please tick box)

I declare that to the best of my belief this information is accurate and I am not aware of any disciplinary or professional conduct and performance issues against me.

PLEASE SUBMIT TO – ceawards@dhsspsni.gov.uk

CLOSING DATE FOR RECEIPT OF CV FORM IS 6 JULY 2007

**NORTHERN IRELAND CLINICAL EXCELLENCE AWARDS SCHEME
SUPPLEMENTARY (OPTIONAL) CV FOR HIGHER AWARD**

FOR ASSESSMENT OF ACHIEVEMENTS IN RESEARCH (Criterion 4A)

Name (In Full)		Professional Title Please select
Work Tel	Home Address	
Email		

Statement setting out the nature of your research contribution (approx 250 words). The introduction of innovation into the delivery or organisation of healthcare may also be described here.

Statement setting out the relevance of your work to the needs of the HPSS (approx 150 words).

Brief description of your contribution to the management and leadership of medical science in the context of your local (hospital and university), national (specialist discipline, government, industry etc) and international activities (approx 250 words).

List of current grants awarded (with dates) for which you are a principal or co-applicant (approx 150 words).

Brief statement on your contribution to the research, training and supervision of others (approx 250 words).

Please state total number of papers published.

Please state number of papers published in last 5 years.

Please give full details of 5 of your most important publications, giving dates and their impact on knowledge and on health and health care.

Please tick box

I declare that to the best of my belief this information is accurate and I am not aware of any disciplinary or professional conduct and performance issues against me.

THIS FORM MUST BE SUBMITTED AS A CONTINUATION OF THE SELF-NOMINATION CV FORM. IF IT IS SUBMITTED SEPARATELY IT WILL NOT BE ACCEPTED.

PLEASE SUBMIT TO – ceawards@dhsspsni.gov.uk

CLOSING DATE FOR RECEIPT OF CV FORM IS 6 JULY 2007

**NORTHERN IRELAND CLINICAL EXCELLENCE AWARDS SCHEME
CITATION FOR HIGHER AWARD**

CONSULTANT'S NAME	LEVEL OF AWARD APPLYING FOR: Please select ---
SPECIALTY	EMPLOYER

Do you support the granting of an award? If "No" please give reasons in the box immediately below, then sign and date the form at the end, and return to the NICEAC secretary. NOTE: Employers must also complete the section below "For Employers Only" (even if not supporting) before signing and returning the form.	Please select ---
---	--------------------------

You should give reasons if you have not supported the candidate. (Box limited to about 50 words)

<u>FOR EMPLOYERS ONLY</u>	
<i>Please confirm that the consultant meets the eligibility criteria (see Section 3 of Guide) If not, please supply further details</i>	Please select ---
<i>a) Is the consultant, to the best of your knowledge, working to the standards of professional and personal conduct required by the GMC and/or the GDC?</i>	Please select ---
b) Has the consultant during the last 12 months: <ul style="list-style-type: none"> ➤ had a formal appraisal ➤ agreed his/her job plan ➤ fulfilled his/her contractual obligations ➤ complied with the private practice code of conduct 	Please select --- Please select --- Please select --- Please select ---
c) Are you aware of any actual or potential disciplinary or professional proceedings inside or outside the Trust?	Please select ---

If the answer to (a) or any part of (b) is No, or the answer to (c) is Yes, please give further details. (Box limited to about 50 words)

ASSESSMENT BY CRITERIA

For each of the four criterion please indicate your assessment of the candidate by selecting one of the following.

A Well above expected performance
B Above expected performance
C Expected performance

1. Please select ---	2. Please select ---	3. Please select ---	4A. Please select ---	4B. Please select ---
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Please give brief reasons below for your markings for each criterion.

Name of person completing this form:

Position held:

Signature of: (please tick)

Chairman of Trust/Board/Agency

Chief Executive of Trust/Board/Agency

Vice Chancellor of Queen’s University

President of Royal College

Specialty Association

Senior Award Holder

Signed _____ *Date* _____

SUBMIT TO NICEAC SECRETARY – ROOM D2.14, CASTLE BUILDINGS, STORMONT, BELFAST, BT4 3SR

CLOSING DATE FOR RECEIPT OF CITATION FORM IS 12 OCTOBER 2007

**NORTHERN IRELAND CLINICAL EXCELLENCE AWARDS SCHEME
5 YEAR REVIEW CV (DISTINCTION AWARD)**

This form is for use by consultants whose awards are due for review under the 5 year review procedures. You will need to be selective about the information entered in at least some of the spaces provided. You should indicate clearly in the appropriate sections of the form how you continue to meet the criteria for a Distinction Award. Consultants should place particular emphasis on activities within the last 5 years.

Name (in full)		Professional Title Please select: ---	Level reviewing: Please select ---
<u>Employer(s) name(s)</u> <u>with number of sessions per employer</u>	<u>List of consultant appointments in date order</u>		<u>Accredited Specialties (main first)</u>
Total No. of PAs per week: No. on direct clinical care: No. on supporting professional activities: No. on external duties:			Primary Medical Qualifications (date and Institution)
			Subsequent Qualifications
GMC/GDC Reg No	Work Tel:	Email:	Home Address

CV FORM MUST BE TYPED USING FONT SIZE 10. EACH SECTION MUST BE LIMITED TO: 250 WORDS EACH. THERE MUST NOT BE ANY INCREASE IN THE NUMBER OF PAGES OR IN THE SIZE OF THE SECTIONS. ANY FORM SUBMITTED WITH ADDITIONAL PAGES WILL BE RETURNED.

CRITERION 1 – PROFESSIONAL EXCELLENCE. Main daily activities. This may also include outline of job plan, additional sessions, frequency of “on-call” or cover for others, evidence of team leadership, and in the case of joint appointments this information should refer to clinical sessions.

CRITERION 2 – AUDIT, CLINICAL GOVERNANCE AND PROMOTION OF EVIDENCE BASED MEDICINE. Include involvement in these activities at both **local** and **national** level.

CRITERION 3 – ADMINISTRATIVE OR MANAGEMENT ACTIVITIES. Include activities for the employer (local committees etc), activities at a regional level (advisory committees, work for DHSSPS etc) and activities at national/international level (committees, work for UK Govt, Royal Colleges etc). Emphasise Chairmanship, Secretaryship, special roles and major achievements in these roles. Joint appointees should include appropriate academic activities and appointments.

CRITERION 4 – SERVICE GOALS. Include service development and planning, achievement of service goals, exceptional or unusual clinical commitments. Indicate any excessive pressures in disadvantaged or hard-pressed services or in smaller specialties.

CRITERION 5 – TEACHING AND TRAINING. For example special effort to train junior staff or take a leading role in the delivery and/or management of undergraduate or postgraduate medical education.

CRITERION 6 – RESEARCH (PURE, APPLIED AND CLINICAL) , INNOVATION AND IMPROVEMENT OF SERVICE. Include ongoing Research/Recent Achievements, Publications, Review of Scientific Work and Development of Innovative practice.

I declare to the best of my belief this information is accurate and I am not aware of any disciplinary or professional conduct and performance issues against me.

Signature:

Date:

SUBMIT TO NICEAC SECRETARY – ROOM D2.14, CASTLE BUILDINGS, STORMONT, BELFAST, BT4 3SR

CLOSING DATE FOR RECEIPT OF 5 YEAR REVIEW CV FORM IS 6 JULY 2007

NORTHERN IRELAND CLINICAL EXCELLENCE AWARDS SCHEME

5 YEAR REVIEW CITATION (HIGHER AWARD)

CONSULTANT'S NAME	LEVEL OF AWARD BEING REVIEWED Please select DMSAC A+, DMSAC A, DMSAC B	
SPECIALTY	EMPLOYER	
Please confirm that the consultant meets the eligibility criteria (see Section 3 of Guide) If not, please supply further details		<i>Please select</i> Yes No
a) Is the consultant, to the best of your knowledge, working to the standards of professional and personal conduct required by the GMC and/or the GDC?		<i>Please select</i> Yes No
b) Has the consultant during the last 12 months:		
<ul style="list-style-type: none"> • had a formal appraisal • agreed his/her job plan • fulfilled his/her contractual obligations • complied with the private practice code of conduct 		Please select Yes/No Please select Yes/No Please select Yes/No Please select Yes/No
c) Are you aware of any actual or potential disciplinary or professional proceedings inside or outside the Trust?		Please select Yes No
If the answer to (a) or any part of (b) is No, or the answer to (c) is Yes, please give further details. (Box limited to about 50 words)		

NORTHERN IRELAND CLINICAL EXCELLENCE AWARDS SCHEME – CV FOR LOWER AWARD

It is the consultant's responsibility to ensure that this form is fully completed – all boxes to be completed

Name (in full)		Professional Title Please select	Level applying for: Please select
<u>Employer(s) name(s)</u> with number of sessions/PAs per employer		<u>List of consultant appointments in date order</u>	
Total No. of PAs per week: No. on direct clinical care: No on supporting professional activities: No. on external duties:			
Current level of award held Please select			
Date of last award:			
Specialty			
<u>Accredited Specialties (main first)</u>		Primary Medical Qualifications (date and Institution)	
GMC/GDC Reg No		Work Tel:	Email:
		Subsequent Qualifications	
		Home Address	

Before completing this form you should read Sections 5 and 7 of the Guide

PERSONAL STATEMENT

CRITERION 1: DELIVERING A HIGH QUALITY SERVICE

CRITERION 2: DEVELOPING A HIGH QUALITY SERVICE

CRITERION 3: MANAGING A HIGH QUALITY SERVICE

CRITERION 4A: CONTRIBUTING TO THE HPSS THROUGH RESEARCH

CRITERION 4B: CONTRIBUTING TO THE HPSS THROUGH TEACHING and TRAINING

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I declare to the best of my belief this information is accurate and I am not aware of any disciplinary or professional conduct and performance issues against me

Signature:		Date:
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PLEASE SUBMIT TO YOUR EMPLOYER

**NORTHERN IRELAND CLINICAL EXCELLENCE AWARDS SCHEME
CITATION FOR LOWER AWARD**

CONSULTANT'S NAME	LEVEL OF AWARD APPLYING FOR: Please select: -----
SPECIALTY	EMPLOYER
Do you support the granting of an award?	
If "No" please give reasons in the box immediately below, then sign and date the form at the end, and return to the LAC. NOTE: Employers must also complete the section below "For Employers Only" (even if not supporting) before signing and returning the form.	Please select: -----
You should give reasons if you have not supported the candidate. (Box limited to about 50 words)	
<u>FOR EMPLOYERS ONLY</u>	
Please confirm that the consultant meets the eligibility criteria (see Sections 3 and 7 of the Guide). If not, please supply further details	Please select: -----
a) Is the consultant, to the best of your knowledge, working to the standards of professional and personal conduct required by the GMC and/or the GDC?	Please select: -----
b) Has the consultant during the last 12 months: <ul style="list-style-type: none"> • had a formal appraisal • agreed his/her job plan • fulfilled his/her contractual obligations • complied with the private practice code of conduct 	Please select: ----- Please select: ----- Please select: ----- Please select: -----
c) Are you aware of any actual or potential disciplinary or professional proceedings inside or outside the Trust?	Please select: -----
If the answer to (a) or any part of (b) is No, or the answer to (c) is Yes, please give further details. (Box limited to about 50 words)	

ASSESSMENT BY CRITERIA

For each of the four criterion please indicate your assessment of the candidate by selecting one of the following.

- A** Well above expected performance
- B** Above expected performance
- C** Expected performance

CRITERION

1. Please select -----	2. Please select -----	3. Please select -----	4A. Please select -----	4B. Please select -----
----------------------------------	----------------------------------	----------------------------------	-----------------------------------	-----------------------------------

Please give brief reasons below for your markings for each criterion.

Name of person completing this form:

Position held:

Signature of Employer:

Signed..... *Date*.....

SUBMIT TO LOCAL AWARDS COMMITTEE