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and Faculties in Scotland

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**External Adviser
Annual Report
2013/2014**

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1 Introduction

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

2013 – 2014 marks the fifth year of operation. In this period 685 interview panels were arranged, broken down into 656 Consultant panels, 24 Honorary Consultant panels, 2 Salaried Dental panels and 3 StR/SpR panels. The Northern Ireland panels were the responsibility of the London College this year, though there were a few Northern Ireland panels recorded from the previous reporting year. For the purposes of this report, these panels have been included to give an accurate account of the all activity for the reporting period.

The fifth year of operation marks a 13% rise in number of panel requests, with only a 6% increase in the number of appointments made. There has also been a 24% increase in cancelled panels (not including those which didn't appoint at interview). This is less of an increase than last year and representative of an amelioration of some communication and procedural issues with Health Board mentioned in last year's report. Feedback from Health Boards and EAs remains generally positive.

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

2 Panels

Over the reporting period (1st July 2013 – 30th June 2014) 685 panels were arranged for consultant (and other) appointments in Scotland, though not all panels resulted in appointment due to cancellation, the preferred candidate did not accept the post, or the interview date was arranged for after 30th June 2014 (and therefore not included in this report).

Figure 2.1 shows numbers for each specialty and categorizes the panels into three types: Completed (where interviews have taken place during the reporting period, but may have been arranged outwith this period), Arranged (all panels with interview dates after 30th June 2014) and Cancelled (where a panel did not progress to interview stage). It also shows the percentage of panels arranged to date that have been cancelled.

Disregarding the panels that have been arranged and have yet to complete, 28% of panels arranged that should have completed were cancelled, which is a slight rise from 26% in 2012-2013. A significant number of specialties however have experienced cancellation percentages of 35% or over where there are 10 or more panel requests: Cardiology (10 panels, 40% cancelled); Child & Adolescent Psychiatry (17 panels, 35% cancelled); Clinical Oncology (13 panels, 38% cancelled); Dermatology (10 panels, 40% cancelled); Gastroenterology (16 panels, 50% cancelled); General Medicine (14 panels, 36% cancelled); Geriatric Medicine (34 panels, 41% cancelled); Histopathology (22 panels, 36% cancelled); Neurology (17 panels, 35% cancelled); Old Age Psychiatry (19 panels, 37% cancelled); Palliative Medicine (14 panels, 43% cancelled), Respiratory Medicine (16 panels, 50% cancelled); and Restorative Dentistry (11 panels, 36% cancelled).

Figure 2.2 shows the breakdown of Cancelled panels. The primary reason for cancellation (representing 42% of all cancellations) is a lack of applicants, which ties in to the number of specialties apparently struggling to recruit. We have also noted that 22 otherwise Completed panels failed to appoint.

Figure 2.3 shows the panels split into the same categories, but arranged instead by Health Board. Health Boards with 10 or more panels and cancellation percentages over 35% are Borders (20 panels, 40% cancelled); Dumfries and Galloway (25 panels, 68% cancelled); and Highland (55 panels, 40% cancelled).

Figure 2.4 shows the number of requests received per month. There has been a slight (4%) increase on the number of total requests, with an average of 47 requests per month. The number of interviews held, however, has increased significantly (33%) with the average jumping from 29 interviews per month to 40 for this reporting period.

3 Appointments

The majority of completed interview panels resulted in one or more appointments. **Figure 3.1** shows a breakdown of appointments by specialty and health board.

While these figures cannot represent a complete picture of recruitment in Scotland (we remain reliant on information provided in feedback questionnaires), they provide a comprehensive indication of recruitment trends and show an overall 10% rise in appointments from last year.

These appointments break down as follows: New posts (195), Replacement posts (232) and Not Known (60).

Once again, Greater Glasgow and Clyde appointed the highest number (107, 12% increase), with Lothian (97, 21% increase) and Tayside (52, 13% increase) following.

The highest appointed specialty is again Anaesthetics (53, but a 12% decrease from 2012-13), with General Psychiatry (32, a 23% increase) and Clinical Radiology (31, a 14% increase) and Emergency Medicine (31, a 93% increase) following.

3.1 DCC/SPA Splits

Figure 3.2 shows a breakdown of DCC/SPA splits across all reported appointments. A majority (58.9%) of appointments are made at a split of 9/1, which is only a slight increase on 57.6% for last year.

4 External Advisers

4.1 EA List

Figure 4.1 shows the numbers (to end of June 2014) of EAs in each specialty and by employing Health Board. As of 1st September 2013, there were a total of 283 EAs. For the purposes of establishing an experienced EA workforce year on year, we had staggered the end dates of those leaving who joined us in 2009.

From the 1st September 2014, the remaining 57 EAs who helped launch the programme in 2009 are no longer active. A further 64 EAs who joined in 2010 have been retired.

We have replaced 92 of the 121 leaving the programme, the largest recruitment number since the programme's inception. As of 1st September 2014, there are a total of 260 active EAs, with a further 18 EAs yet to be confirmed.

4.2 EA Induction and Training

The training for 2013-2014 comprised online content and guidance, which was made available to all new EAs. Feedback on this training has been mostly positive. Further to last year's interest, we launched a pilot scheme to provide mentors for new EAs whenever requested. 58 out of the 92 new EAs have so far taken up the offer of mentoring, and the scheme has proven successful enough to continue next year.

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

4.3 EA Workload

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

Figure 4.2 shows the number of panel requests and number of active EAs within each specialty, as well as the average number of panels attended. There has been a significant increase in number of requests per EA (from an average of 2.4 in 2012-2013 to an average of 4.3 in 2013-2014). Again it is worth noting that the average number of completed panels per EA remains the same (1.4).

4.4 EA Performance

4.4.1 Acceptance Rates

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

The following specialties have shown acceptance rates lower than the Scottish Academy target of 50%: Gastroenterology (48.4%), Geriatric Medicine (45.8%), General Psychiatry (40.5%), Cardiology and General Medicine (40%), Respiratory Medicine (38.5%), Obstetrics & Gynaecology (37.7%), and Acute Medicine (34.2%).

In addition, Paediatric Cardiology has shown an acceptance rate below the 33% threshold set by Scottish Government at 25% - this reflects not only the scarcity of EAs in this particular specialty, but also the difficulty of arranging panels when given single dates instead of a range.

While most EAs have fulfilled their duties as expected, a number have either been unwilling or unable to do so. **Figure 4.4** shows 31 EAs who have not met the 33% acceptance rate, which is over double last year's figure (14).

4.4.2 Invitations and Response Duration

EAs are invited individually to avoid double acceptances and to ensure that panels are shared equally within a particular specialty. The target set by Scottish Academy for request response time is 2 working days from Date Advised. **Figure 4.5** shows the response times for 2013-2014, and the average response time has risen from 2.6 working days to 2.92. The "No Response" has risen significantly from 33 last year to 53 for 2013-2014.

4.4.3 HB Feedback on EAs

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

Figure 4.6 shows the average feedback scores given by Health Boards, which remains positive with a score of Excellent-Good overall. Response rates for Health Boards with more than 10 panels are higher, with Fife having the lowest response rate at 59% (still an improvement on last year's 50%) and the others all sporting a response rate over 75% and, in NHS Lanarkshire's case, 100%. Lothian in particular show a huge improvement – from 25% (2011-2012) to 61.4% (2012-2013) to 82% (2013-2014). Indeed, overall response rates have risen significantly, from 63% (2011-2012) to 74.2% (2012-2013) to an average of 84%.

4.5 EA Concerns

Again, the prime concern for our EAs remains the issue of 9/1 contracts, and this is the most commented-upon issue in our feedback. EAs have also shown concern over a lack of written job plans (specifically NHS Fife) or Boards advertising without having job plans reviewed (NHS Borders).

5 Health Boards

5.1 Health Board Recruitment Process

EAs provide feedback on Health Board recruitment process at job description, short listing and interview stages. **Figure 5.1** shows the average ratings for each Health Board. Scores have improved significantly in the first two stages and remained a solid 1.7 in the interview. Response rates have dropped slightly again from 64.1% to 63% though again the number of responses has increased. We do however expect a higher response rate from EAs, and will endeavour to improve this over the forthcoming year.

5.2 Health Board Requests for EA

The guidance issued by Scottish Government and attached to the Consultant Appointment regulations calls for Health Boards to request an EA before an interview date has been set. Last year, many Health Boards routinely requested an EA after they had already fixed and arranged an interview date that was suitable for the other panel members and only 54.3% of total panel requests gave two or more dates as opposed to a single, fixed date. This has improved to 67% for 2013-2014

Figure 5.2 shows a summary of Health Board not giving recommended notice. In 35 cases where panels have been arranged and a final interview date recorded, Health Boards have provided less than the SGHD-recommended 8 weeks' notice, which is a decrease on last year's number (41). These instances are also spread over a number of Health Boards, which means that again Lothian have significantly improved their processes.

6 Scottish Academy Service

6.1 Service Provision

The guidelines attached to the Consultant Appointment Legislation give the EA Coordinators a 2-week (10 working day) target to find an EA upon receipt of a request. In this reporting period, 19 panels took more than 10 working days, which is a significant increase on last year (9), and closer to the number in 2011-2012 (21).

The biggest impediment to assigning an EA in good time this year remains non-responsive EAs, which is something we intend to monitor going forward. School and public holidays are also a cause of delays, as many EAs are either out of the office or otherwise engaged. The rare occasions when an appropriate EA needs to be sourced from outside of the list (when specific sub-spec is required, for example) also result in a longer than average response time.

6.2 Support for EAs and Health Boards

Feedback on the Scottish Academy service remains positive, particularly from the recruiting Health Boards. **Figure 6.1** shows the feedback received from both EAs and Health Boards in response to the question: "Overall how would you rate the contact and support you had with/from the Academy during this appointment process?"

There is only one case of mildly negative feedback from an EA who felt the Academy did not have enough information re: criteria for applications for inclusion on the specialist register, and felt this information should be included with training. We will be looking into this for future reference.

7 Recommendations and Conclusion

7.1 Recommendations for Service Provision

While previous years' issues with notice periods have largely been rectified, there is still an ongoing minor issue with Board communication, both with the EAs and the EA Coordinators. We have frequently found that Boards neglect to communicate panel dates once they have an EA's availability. While this is often merely a case of chasing the responsible HR assistant, there have been notable cases where Boards haven't come back to us before the arranged panel date, which has had a subsequent effect on the quality of feedback received.

In order to improve this, we propose meeting with the Boards to better explain our process and iron out any communication issues, as well as discover any issues they may have and prepare for any large recruitment drives.

As part of our continuing commitment to service improvement, we reviewed our online questionnaire, with particular reference to Scottish Government and Scottish Academy data requirements. Most of the appointment data will now be generated by the Boards, and EA questionnaires will purely deal with the recruitment procedure, which has resulted in a streamlined questionnaire which is relevant, retrievable and easily completed online.

Finally, we have noted that service of our EAs has dropped slightly (delays in response, a drop in percentage feedback returns). We intend to monitor and improve this over the coming year.

7.2 Conclusion

Overall, we are pleased to report that this year's commitment to working more closely with Health Boards has resulted in a more streamlined, effective programme. The mentor pilot scheme has been a success, and the new online feedback questionnaires have proved to boost the quality and quantity of feedback.

8 Appendix

Specialty	Completed	Not Completed (Arranged/No Date/No EA)	Cancelled	Total Panels	Appointments	% Panels Cancelled
Acute Medicine	9	2	3	14	12	21%
Anaesthetics	33	3	6	42	53	14%
Cardiology	5	1	4	10	4	40%
Cardiothoracic Surgery	1	1	0	2	0	0%
Chemical Pathology	2	0	1	3	2	33%
Child & Adolescent Psychiatry	7	4	6	17	9	35%
Clinical Genetics	1	0	0	1	0	0%
Clinical Oncology	6	2	5	13	6	38%
Clinical Pharmacology & Therapeutics	1	0	0	1	1	0%
Clinical Radiology	18	6	6	30	31	20%
Community Child Health	2	0	4	6	2	67%
Dental Public Health	3	2	1	6	3	17%
Dermatology	5	1	4	10	6	40%
Emergency Medicine	17	5	5	27	31	19%
Endocrinology & Diabetes Mellitus	4	2	1	7	5	14%
Forensic Psychiatry	3	1	3	7	4	43%
Gastroenterology	8	0	8	16	11	50%
General Medicine	6	3	5	14	7	36%
General Psychiatry	32	6	13	51	32	25%
General Surgery	18	8	6	32	19	19%
Geriatric Medicine	16	4	14	34	21	41%
Haematology	6	3	4	13	5	31%
Histopathology	12	2	8	22	14	36%
Infectious Diseases	4	0	0	4	3	0%
Medical Microbiology & Virology	7	1	2	10	9	20%
Medical Oncology	2	0	3	5	2	60%
Neurology	9	2	6	17	9	35%
Neurosurgery	2	1	0	3	3	0%
Obstetrics & Gynaecology	15	7	5	27	21	19%
Occupational Medicine	1	2	1	4	2	25%
Old Age Psychiatry	9	3	7	19	9	37%
Ophthalmology	12	1	4	17	15	24%
Oral & Maxillofacial Surgery	3	2	1	6	4	17%
Oral Surgery	0	1	2	3	0	67%
Orthodontics	2	0	1	3	2	33%
Otolaryngology	7	2	3	12	7	25%
Paediatric Cardiology	2	0	0	2	1	0%
Paediatric Dentistry	3	0	2	5	4	40%
Paediatric Surgery	1	1	0	2	1	0%
Paediatrics	22	9	14	45	29	31%
Palliative Medicine	6	2	6	14	7	43%
Plastic Surgery	2	0	0	2	2	0%
Psychiatry of Learning Disability	5	2	0	7	5	0%
Psychotherapy	3	0	1	4	4	25%
Public Health Medicine	9	1	4	14	12	29%
Rehabilitation Medicine	2	1	0	3	2	0%
Renal Medicine	5	2	2	9	3	22%
Respiratory Medicine	6	2	8	16	11	50%
Restorative Dentistry	5	2	4	11	8	36%
Rheumatology	4	1	3	8	5	38%
Special Care Dentistry	3	0	2	5	5	40%
Trauma & Orthopaedic Surgery	11	5	1	17	14	6%
Urology	6	2	2	10	6	20%
Vascular Surgery	3	0	0	3	4	0%
TOTAL	386	108	191	685	487	28%

Figure 2.1 – All Panels Arranged by Specialty

Cancelled Reason	#	%
Candidates Withdrew	22	12%
HB Postponed/Rearranged	39	20%
No Applicants	80	42%
No Reason Given	3	2%
No Suitable Candidates	29	15%
Other	18	9%

Figure 2.2 – Cancellation Reasons

Health Board	Completed	Not Completed (Arranged/No Date/No EA)	Cancelled	Total Panels	Appointments	% Panels Cancelled
Ayrshire & Arran	20	9	14	43	23	33%
Borders	8	4	8	20	8	40%
Dumfries & Galloway	6	2	17	25	4	68%
Fife	17	6	11	34	21	32%
Forth Valley	23	4	8	35	35	23%
Grampian	48	17	34	99	58	34%
Greater Glasgow & Clyde	85	22	16	123	107	13%
Highland	20	13	22	55	19	40%
Lanarkshire	27	7	8	42	33	19%
Lothian	67	14	27	108	98	25%
National Services Scotland	5	0	1	6	6	17%
National Waiting Times Unit	8	1	2	11	9	18%
NHS Health Scotland	1	0	1	2	3	50%
Northern Ireland - Belfast	2	0	1	3	2	33%
Northern Ireland - Northern	1	0	2	3	1	67%
Northern Ireland - South East	1	0	1	2	1	50%
Northern Ireland - Western	1	0	0	1	1	0%
Orkney	1	3	2	6	2	33%
Shetland	2	0	2	4	2	50%
Tayside	41	6	14	61	52	23%
Western Isles	2	0	0	2	2	0%
TOTAL	386	108	191	685	487	28%

Figure 2.3 – All panels arranged by recruiting Health Board

Month	Requests Received	Interviews Held
July	52	34
August	42	36
September	41	38
October	43	30
November	40	30
December	37	36
January	59	40
February	52	46
March	51	36
April	55	44
May	44	60
June	49	45
TOTAL	565	475

Figure 2.4 – All panel requests received and interviews held by month

Specialty	Ayrshire & Arran	Borders	Dumfries & Galloway	Fife	Forth Valley	Grampian	Greater Glasgow & Clyde	Highland	Lanarkshire	Lothian	National Services Scotland	National Waiting Times Unit	NHS Health Scotland	Northern Ireland - Belfast	Northern Ireland - Northern	Northern Ireland - South East	Northern Ireland - Western	Orkney	Shetland	Tayside	Western Isles	TOTAL
Acute Medicine	1	0	0	0	1	0	4	1	0	4	0	0	0	0	0	0	1	0	0	0	0	12
Anaesthetics	3	1	0	3	2	7	9	0	2	16	0	4	0	0	0	0	0	0	0	6	0	53
Cardiology	1	0	0	0	0	0	1	0	1	0	0	1	0	0	0	0	0	0	0	0	0	4
Chemical Pathology	0	0	0	0	0	0	2	0	0	0	0	0	0	0	0	0	0	0	0	0	0	2
Child & Adolescent Psychiatry	1	0	0	0	1	0	5	0	1	0	0	0	0	0	0	0	0	0	0	1	0	9
Clinical Oncology	0	0	0	0	0	3	1	0	0	1	0	0	0	0	0	0	0	0	0	1	0	6
Clinical Pharmacology & Therapeutics	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Clinical Radiology	1	2	1	0	2	3	4	1	3	9	0	0	0	0	0	0	0	0	0	5	0	31
Community Child Health	0	0	0	0	0	0	0	0	0	2	0	0	0	0	0	0	0	0	0	0	0	2
Dental Public Health	0	0	0	1	1	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	3
Dermatology	0	0	0	0	0	1	2	1	0	1	0	0	0	0	0	0	0	0	0	1	0	6
Emergency Medicine	4	1	0	2	3	2	4	1	2	9	0	0	0	0	0	0	0	0	3	0	31	
Endocrinology & Diabetes Mellitus	0	1	0	0	0	2	0	1	0	0	0	0	0	0	0	0	0	0	0	1	0	5
Forensic Psychiatry	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	3	0	4	
Gastroenterology	0	0	0	1	4	0	3	0	1	1	0	0	0	1	0	0	0	0	0	0	0	11
General Medicine	0	0	0	0	0	0	0	4	0	1	0	0	0	0	0	0	0	0	1	0	1	7
General Psychiatry	1	0	0	2	1	5	8	2	1	7	0	0	0	0	0	0	0	0	0	5	0	32
General Surgery	0	2	0	0	0	5	2	2	4	2	0	0	0	0	0	0	0	0	2	0	19	
Geriatric Medicine	0	1	0	0	2	2	4	0	3	7	0	0	0	0	0	1	0	0	0	1	0	21
Haematology	0	0	0	0	0	0	2	0	0	3	0	0	0	0	0	0	0	0	0	0	0	5
Histopathology	1	0	0	2	2	1	3	1	1	3	0	0	0	0	0	0	0	0	0	0	0	14
Infectious Diseases	1	0	0	0	0	1	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	3
Medical Microbiology & Virology	1	0	0	0	0	2	2	0	2	2	0	0	0	0	0	0	0	0	0	0	0	9
Medical Oncology	0	0	0	0	0	1	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	2
Neurology	0	0	0	0	0	0	5	1	0	1	0	0	0	0	0	0	0	0	2	0	9	
Neurosurgery	0	0	0	0	0	0	1	2	0	0	0	0	0	0	0	0	0	0	0	0	0	3
Obstetrics & Gynaecology	0	0	0	0	3	3	0	0	2	5	0	0	0	0	0	0	0	2	1	5	0	21
Occupational Medicine	0	0	0	0	0	2	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	2
Old Age Psychiatry	0	0	1	0	0	1	1	0	3	2	0	0	0	0	0	0	0	0	1	0	9	
Ophthalmology	1	0	0	2	2	4	1	1	1	1	0	2	0	0	0	0	0	0	0	0	0	15
Oral & Maxillofacial Surgery	1	0	0	2	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	4
Orthodontics	1	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	2
Otolaryngology	0	0	0	1	0	0	3	0	0	1	0	0	0	0	0	0	0	0	2	0	7	
Paediatric Cardiology	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1
Paediatric Dentistry	0	0	0	0	0	0	1	0	0	2	0	0	0	0	0	0	0	0	1	0	4	
Paediatric Surgery	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	
Paediatrics	0	0	1	2	4	1	14	0	2	5	0	0	0	0	0	0	0	0	0	0	0	29
Palliative Medicine	0	0	0	2	0	0	1	0	0	1	0	0	0	1	0	0	0	0	2	0	7	
Plastic Surgery	0	0	0	0	1	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	2
Psychiatry of Learning Disability	0	0	0	0	0	1	1	1	1	0	0	0	0	0	0	0	0	0	1	0	5	
Psychotherapy	0	0	0	0	0	2	2	0	0	0	0	0	0	0	0	0	0	0	0	0	0	4
Public Health Medicine	2	0	0	0	0	1	3	0	0	0	3	0	0	0	0	0	0	0	2	1	12	
Rehabilitation Medicine	1	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	2
Renal Medicine	1	0	0	0	0	0	1	0	0	1	0	0	0	0	0	0	0	0	0	0	0	3
Respiratory Medicine	0	0	0	0	2	0	3	0	0	4	0	0	0	0	0	0	0	0	2	0	11	
Restorative Dentistry	0	0	0	0	0	2	0	0	0	4	0	0	0	0	0	0	0	0	2	0	8	
Rheumatology	0	0	0	0	2	0	3	0	0	0	0	0	0	0	0	0	0	0	0	0	0	5
Special Care Dentistry	1	0	0	0	0	0	0	0	0	0	0	3	0	0	0	0	0	0	1	0	5	
Trauma & Orthopaedic Surgery	0	0	0	0	1	2	6	0	2	1	0	2	0	0	0	0	0	0	0	0	0	14
Urology	0	0	1	0	0	0	2	0	1	1	0	0	0	0	0	0	0	0	1	0	6	
Vascular Surgery	0	0	0	0	1	2	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	4
TOTAL	23	8	4	21	35	58	107	20	33	97	6	9	3	2	1	1	1	2	2	52	2	487

Figure 3.1 – Consultant Appointments

Split	Draft JD	Advertised	Appointed
9/1	253	227	207
8.5/1.5	6	6	7
8/2	20	19	24
7.5/2.5	0	0	3
7/3	1	1	1
Other	26	24	26
Not Known	45	74	83
TOTAL	351	351	351

Figure 3.2 – Reported DCC/SPA Splits (where appointed)

Specialty	Ayrshire & Arran	Borders	Dumfries & Galloway	Fife	Forth Valley	Grampian	Greater Glasgow & Clyde	Highland	Lanarkshire	Lothian	National Waiting Times Unit	State Hospital	Tayside	Western Isles	TOTAL
Acute Medicine	0	0	1	0	0	0	2	0	0	0	0	0	2	0	5
Anaesthetics	1	0	0	2	0	4	8	0	1	9	2	0	5	0	32
Cardiology	0	0	1	1	0	0	2	0	0	1	0	0	1	0	6
Cardiothoracic Surgery	0	0	0	0	0	0	0	0	0	1	1	0	0	0	2
Chemical Pathology	0	0	0	0	0	0	1	0	0	0	0	0	1	0	2
Child & Adolescent Psychiatry	0	0	0	0	0	0	2	0	2	1	0	0	1	0	6
Clinical Genetics	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1
Clinical Oncology	0	0	0	0	0	0	2	0	0	0	0	0	1	0	3
Clinical Pharmacology & Therapeutics	0	0	0	0	0	0	1	0	0	1	0	0	0	0	2
Clinical Radiology	0	0	0	1	0	2	4	1	1	2	0	0	0	0	11
Community Child Health	0	0	0	0	1	0	0	0	0	0	0	0	0	0	1
Dental Public Health	1	0	0	0	1	0	0	0	0	0	0	0	0	0	2
Dermatology	0	0	0	0	0	0	2	0	0	2	0	0	0	0	4
Emergency Medicine	1	0	0	0	0	1	1	0	1	2	0	0	1	0	7
Endocrinology & Diabetes Mellitus	0	0	0	0	0	0	3	0	0	1	0	0	0	0	4
Forensic Psychiatry	0	0	0	0	0	0	2	0	0	1	0	2	0	0	5
Gastroenterology	0	0	0	0	0	0	4	0	0	0	0	0	2	0	6
General Medicine	0	0	0	0	1	2	4	0	0	0	0	0	1	0	8
General Psychiatry	0	0	2	0	0	1	1	2	0	5	0	0	2	0	13
General Surgery	0	0	1	0	1	0	2	2	0	4	0	0	0	0	10
Genito-Urinary Medicine	0	0	0	0	0	0	2	0	0	1	0	0	0	0	3
Geriatric Medicine	0	0	0	0	3	1	5	0	0	0	0	0	0	0	9
Haematology	1	0	0	1	1	0	1	0	1	0	0	0	0	0	5
Histopathology	1	0	0	0	1	1	2	1	0	0	0	0	0	0	6
Immunology	0	0	0	0	0	1	0	0	0	0	0	0	1	0	2
Infectious Diseases	0	0	0	0	0	0	1	0	1	1	0	0	0	0	3
Medical Microbiology & Virology	0	0	0	0	0	0	0	0	0	2	0	0	1	0	3
Medical Oncology	0	0	0	0	0	1	2	0	0	0	0	0	0	0	3
Neurology	0	0	0	0	0	1	2	0	0	1	0	0	0	0	4
Neurosurgery	0	0	0	0	0	0	3	0	0	1	0	0	0	0	4
Nuclear Medicine	0	0	0	0	0	0	1	0	0	0	0	0	1	0	2
Obstetrics & Gynaecology	0	0	0	0	0	1	2	0	0	0	0	0	3	0	6
Occupational Medicine	0	0	0	0	0	0	0	1	0	0	0	0	0	0	1
Old Age Psychiatry	0	0	0	0	0	0	3	0	0	1	0	0	0	0	4
Ophthalmology	0	0	0	1	0	1	3	2	0	1	0	0	0	0	8
Oral & Maxillofacial Surgery	1	0	0	0	0	0	0	0	1	1	0	0	0	0	3
Oral Medicine	0	0	0	0	0	0	2	0	0	0	0	0	0	0	2
Oral Surgery	0	0	0	0	0	0	1	0	0	0	0	0	0	0	1
Orthodontics	0	0	0	0	0	0	1	0	0	1	0	0	1	0	3
Otolaryngology	1	0	0	0	0	1	3	0	0	0	0	0	0	0	5
Paediatric Dentistry	0	0	0	0	0	1	1	0	0	1	0	0	0	0	3
Paediatric Surgery	0	0	0	0	0	1	2	0	0	1	0	0	0	0	4
Paediatrics	2	0	0	0	1	2	1	0	1	3	0	0	1	0	11
Palliative Medicine	0	0	0	0	0	1	3	0	0	0	0	0	0	0	4
Plastic Surgery	0	0	0	0	0	0	1	0	0	0	0	0	1	0	2
Psychiatry of Learning Disability	0	0	0	0	0	0	0	0	1	0	0	1	1	0	3
Psychotherapy	0	0	0	0	0	0	1	0	0	1	0	0	1	0	3
Public Health Medicine	0	0	0	0	0	0	1	1	0	0	0	0	2	0	4
Rehabilitation Medicine	0	0	0	1	0	0	1	0	0	1	0	0	1	0	4
Renal Medicine	0	0	0	0	0	1	1	1	0	1	0	0	0	0	4
Respiratory Medicine	0	1	0	0	1	1	4	0	0	1	0	0	1	0	9
Restorative Dentistry	0	0	0	0	0	0	2	0	0	0	0	0	1	0	3
Rheumatology	0	0	0	0	0	1	1	0	0	1	0	0	0	0	3
Special Care Dentistry	0	0	0	0	0	0	0	0	1	1	0	0	0	1	3
Trauma & Orthopaedic Surgery	1	0	0	0	0	1	3	1	0	1	0	0	0	0	7
Urology	1	0	0	0	0	1	2	0	0	1	0	0	0	0	5
Vascular Surgery	0	0	0	1	0	1	1	0	0	0	0	0	1	0	4
TOTAL	11	1	5	8	11	29	100	12	11	53	3	3	35	1	283

Figure 4.1 – EA List Coverage

Specialty	Active EAs	Panel Requests	Completed Panels	Panel Requests per EA	Completed Panels per EA
Acute Medicine	5	38	9	7.6	1.8
Anaesthetics	32	72	33	2.3	1.0
Cardiology	6	20	5	3.3	0.8
Cardiothoracic Surgery	2	2	1	1.0	0.5
Chemical Pathology	2	3	2	1.5	1.0
Child & Adolescent Psychiatry	6	24	7	4.0	1.2
Clinical Genetics	1	1	1	1.0	1.0
Clinical Oncology	3	18	6	6.0	2.0
Clinical Pharmacology & Therapeutics	2	1	1	0.5	0.5
Clinical Radiology	11	42	18	3.8	1.6
Community Child Health	1	5	2	5.0	2.0
Dental Public Health	2	7	3	3.5	1.5
Dermatology	4	14	5	3.5	1.3
Emergency Medicine	7	45	17	6.4	2.4
Endocrinology & Diabetes Mellitus	4	12	4	3.0	1.0
Forensic Psychiatry	5	12	3	2.4	0.6
Gastroenterology	6	31	8	5.2	1.3
General Medicine	8	35	6	4.4	0.8
General Psychiatry	13	121	32	9.3	2.5
General Surgery	10	51	18	5.1	1.8
Genito-Urinary Medicine	3	0	0	0.0	0.0
Geriatric Medicine	9	72	16	8.0	1.8
Haematology	5	17	6	3.4	1.2
Histopathology	6	39	12	6.5	2.0
Immunology	2	0	0	0.0	0.0
Infectious Diseases	3	6	4	2.0	1.3
Medical Microbiology & Virology	3	17	7	5.7	2.3
Medical Oncology	3	9	2	3.0	0.7
Neurology	4	31	9	7.8	2.3
Neurosurgery	4	4	2	1.0	0.5
Nuclear Medicine	2	0	0	0.0	0.0
Obstetrics & Gynaecology	6	61	15	10.2	2.5
Occupational Medicine	2	7	1	3.5	0.5
Old Age Psychiatry	4	36	9	9.0	2.3
Ophthalmology	8	27	12	3.4	1.5
Oral & Maxillofacial Surgery	3	5	3	1.7	1.0
Oral Medicine	2	0	0	0.0	0.0
Oral Surgery	1	3	0	3.0	0.0
Orthodontics	3	3	2	1.0	0.7
Otolaryngology	6	21	7	3.5	1.2
Paediatric Cardiology	0	8	2	N/A	N/A
Paediatric Dentistry	3	8	3	2.7	1.0
Paediatric Surgery	4	2	1	0.5	0.3
Paediatrics	11	87	22	7.9	2.0
Palliative Medicine	4	25	6	6.3	1.5
Plastic Surgery	2	3	2	1.5	1.0
Psychiatry of Learning Disability	3	12	5	4.0	1.7
Psychotherapy	3	4	3	1.3	1.0
Public Health Medicine	4	27	9	6.8	2.3
Rehabilitation Medicine	2	4	2	2.0	1.0
Renal Medicine	4	15	5	3.8	1.3
Respiratory Medicine	9	39	6	4.3	0.7
Restorative Dentistry	3	15	5	5.0	1.7
Rheumatology	3	11	4	3.7	1.3
Special Care Dentistry	3	7	3	2.3	1.0
Trauma & Orthopaedic Surgery	7	31	11	4.4	1.6
Urology	5	16	6	3.2	1.2
Vascular Surgery	4	3	3	0.8	0.8
TOTAL	283	1229	386	4.3	1.4

Figure 4.2 – Panel requests and completed panels per EA by Specialty

Specialty	Invitations	Accepted	% Accepted
Acute Medicine	38	13	34.2%
Anaesthetics	72	42	58.3%
Cardiology	20	8	40.0%
Cardiothoracic Surgery	2	2	100.0%
Chemical Pathology	3	3	100.0%
Child & Adolescent Psychiatry	24	15	62.5%
Clinical Genetics	1	1	100.0%
Clinical Oncology	18	13	72.2%
Clinical Pharmacology & Therapeutics	1	1	100.0%
Clinical Radiology	42	30	71.4%
Community Child Health	5	4	80.0%
Dental Public Health	7	6	85.7%
Dermatology	14	9	64.3%
Emergency Medicine	45	27	60.0%
Endocrinology & Diabetes Mellitus	12	8	66.7%
Forensic Psychiatry	12	7	58.3%
Gastroenterology	31	15	48.4%
General Medicine	35	14	40.0%
General Psychiatry	121	49	40.5%
General Surgery	51	29	56.9%
Geriatric Medicine	72	33	45.8%
Haematology	17	12	70.6%
Histopathology	39	21	53.8%
Infectious Diseases	6	4	66.7%
Medical Microbiology & Virology	17	11	64.7%
Medical Oncology	9	5	55.6%
Neurology	31	16	51.6%
Neurosurgery	4	3	75.0%
Obstetrics & Gynaecology	61	23	37.7%
Occupational Medicine	7	5	71.4%
Old Age Psychiatry	36	19	52.8%
Ophthalmology	27	17	63.0%
Oral & Maxillofacial Surgery	5	5	100.0%
Oral Surgery	3	3	100.0%
Orthodontics	3	2	66.7%
Otolaryngology	21	12	57.1%
Paediatric Cardiology	8	2	25.0%
Paediatric Dentistry	8	4	50.0%
Paediatric Surgery	2	2	100.0%
Paediatrics	87	44	50.6%
Palliative Medicine	25	14	56.0%
Plastic Surgery	3	2	66.7%
Psychiatry of Learning Disability	12	8	66.7%
Psychotherapy	4	4	100.0%
Public Health Medicine	27	14	51.9%
Rehabilitation Medicine	4	3	75.0%
Renal Medicine	15	8	53.3%
Respiratory Medicine	39	15	38.5%
Restorative Dentistry	15	9	60.0%
Rheumatology	11	8	72.7%
Special Care Dentistry	7	4	57.1%
Trauma & Orthopaedic Surgery	31	19	61.3%
Urology	16	10	62.5%
Vascular Surgery	3	3	100.0%
TOTAL	1229	660	53.7%

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

Specialty	Number
Acute Medicine	3
Anaesthetics	1
Cardiology	1
Child & Adolescent Psychiatry	1
Gastroenterology	1
General Medicine	2
General Psychiatry	5
General Surgery	1
Geriatric Medicine	2
Medical Microbiology & Virology	1
Neurology	1
Obstetrics & Gynaecology	2
Old Age Psychiatry	1
Ophthalmology	1
Paediatrics	4
Palliative Medicine	1
Renal Medicine	1
Respiratory Medicine	2
TOTAL	31

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

Response	Number	Work Days	Average Response Time
Accepted	660	1952	2.96
Declined	405	1163	2.87
TOTAL	1065	3115	2.92

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

	Job Description	Short Listing	Interviews	# Responses Received	Completed Panels	% Responses Received
Health Board						
Ayrshire & Arran	1.0	1.0	1.0	19	20	95%
Borders	1.0	1.0	1.0	1	8	13%
Dumfries & Galloway	1.4	1.4	1.4	5	6	83%
Fife	1.6	1.5	1.5	10	17	59%
Forth Valley	2.0	2.0	2.0	21	23	91%
Grampian	1.2	1.2	1.2	37	48	77%
Greater Glasgow & Clyde	1.1	1.0	1.1	76	85	89%
Highland	1.5	1.5	1.5	17	20	85%
Lanarkshire	1.0	1.0	1.1	27	27	100%
Lothian	2.0	2.0	2.0	55	67	82%
National Services Scotland	1.2	1.2	1.2	4	5	80%
National Waiting Times Unit	1.0	1.0	1.0	6	8	75%
NHS Health Scotland	1.0	1.0	1.0	1	1	100%
Northern Ireland - Belfast	2.0	2.0	2.0	1	2	50%
Northern Ireland - Northern	1.0	1.0	1.0	1	1	100%
Northern Ireland - South East	-	-	-	0	1	0%
Northern Ireland - Western	1.0	1.0	1.0	1	1	100%
Orkney	2.0	2.0	1.0	1	1	100%
Shetland	2.0	1.0	1.0	2	2	100%
Tayside	1.3	1.3	1.2	37	41	90%
Western Isles	1.0	1.0	1.0	2	2	100%
TOTAL	1.4	1.3	1.3	324	386	84%

Figure 4.6 - Health Board feedback on EA contribution

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

Health Board	Job Description	Short Listing	Interviews	# Responses Received	Completed Panels	% Responses Received
Ayrshire & Arran	1.5	1.5	1.7	13	20	65%
Borders	2.3	2.0	1.7	6	8	75%
Dumfries & Galloway	1.0	1.0	1.0	3	6	50%
Fife	3.0	2.3	2.5	13	17	76%
Forth Valley	2.0	1.9	1.8	13	23	57%
Grampian	2.1	1.9	1.9	29	48	60%
Greater Glasgow & Clyde	2.0	1.8	1.9	50	85	59%
Highland	2.0	2.0	1.7	12	20	60%
Lanarkshire	1.7	1.7	1.8	19	27	70%
Lothian	2.0	1.9	2.0	45	67	67%
National Services Scotland	2.5	2.3	2.0	4	5	80%
National Waiting Times Unit	2.3	2.3	2.0	3	8	38%
NHS Health Scotland	1.0	1.0	1.0	1	1	100%
Northern Ireland - Belfast	1.0	1.0	1.0	1	2	50%
Northern Ireland - Northern	-	-	-	0	1	0%
Northern Ireland - South East	1.0	1.0	1.0	1	1	100%
Northern Ireland - Western	3.0	2.0	2.0	1	1	100%
Orkney	-	-	-	0	1	0%
Shetland	1.0	2.0	1.0	1	2	50%
Tayside	1.8	1.7	1.6	25	41	61%
Western Isles	2.5	2.5	2.0	2	2	100%
TOTAL	1.9	1.8	1.7	242	386	63%

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

	Numbers	% of panels with a final interview date
< 8 weeks notice	32	7%
< 6 weeks notice	3	1%
Total number panel with date	443	

Figure 5.2 - Health boards not giving recommended notice

	Excellent	Good	Adequate	Inadequate	Poor	Total Responses	% Response
HB Feedback	229	83	12	0	0	324	84%
EA Feedback	89	129	23	1	0	242	63%

Figure 6.1 - Feedback on Scottish Academy service provision