

Clinical Impact Awards

Peter Brennan MD, PhD, FRCS, FRCSI, FFST (Ed), FDS
Consultant Oral and Maxillofacial Surgeon,
Honorary Professor of Surgery, Portsmouth, UK



8 December 2022

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Elected Council Member, Royal College of Surgeons of England
Chair of BAOMS Council

National ACCIA Committee Member



Royal College
of Surgeons

ADVANCING SURGICAL CARE

8 December 2022

ACCIA's Principles and Priorities

About...

A non-departmental government body

Is supported by the DHSC

Has two non-executives responsible for governance of the Scheme

What it does....

Provides the infrastructure and processes to enable the Department to recognise, retain and reward high-performing senior NHS clinicians

Priorities....

To ensure that the awards go to the most deserving applicants and are distributed in the most equitable way possible

The National Clinical Impact Award Scheme 2022

The Scheme is administered by the Advisory Committee on Clinical Impact Awards (ACCIA)

It recognises and rewards NHS Consultants and Academic GPs who demonstrate national impact 'over and above' the normal delivery of job plans

The Scheme aims to be completely transparent and offer every applicant an equal opportunity

Individual applications are considered on merit: the process is competitive

All applications are assessed in the same way

New scheme for 2022 – consultation complete; government approval

*Name changed to **National Impact Awards** from now*

Levels of Award – from 2022:

National Awards (NOT pensionable) – target 600/year – *DOUBLE* pre-2021 number

- National 1 - 330 £20,000 per year
- National 2 - 200 £30,000 per year
- National 3 – top level – 70 £40,000 per year
- All awarded for 5 years, non renewable

Employer Based (local) awards (EBA):non-pensionable (from 2018)

Not yet agreed – probably a two level system with short fixed-term: 1-2yrs

Ambition for local and national awards to be held concurrently ultimately, but is likely to be deferred for the present at least due to budget impact of Schedule 30 transition requirements

Transition costs may affect numbers of awards at each level or total numbers available annually

Employers will decide on local processes for EBAs and for supporting NCIA applications

ACCIA 2022

Award Duration and Renewals

- National Clinical Impact Awards will last for 5 years
- There will be **no** renewals
- Application for a *new* award will be required in the year of expiry
- Transitional arrangements for existing national CEA holders
- Application for a new award will be required in the year *prior* to expiry, when renewal would have been due

ACCIA 2022

Application processes and eligibility

- *Non-stratified – application is for a ‘National Award’*
- Level – N1 to N3 – will depend on score accrued
- Any consultant who has been in a substantive post for at least 1 year can apply
- No need to have ‘local points’ or a previous ACCEA national award
- LTFT applications encouraged – paid at the full rate, subject to a minimum NHS commitment
- Regional sub-committees will remain configured as now, with *all* applications initially processed regionally

Clinical excellence awards in OMFS - 460 consultants

- Platinum 0
- Gold 1
- Silver 8-10
- Bronze = 15-20



Clinical impact awards

- Delivering & developing service
- Managing & leading service
- Education
- Research
- Other work for wider NHS

ACCIA 2022 – changes in how the scheme works

Domain Structure and submission process – some changes

- Two 'clinical domains' – Service Delivery & Development, and Leadership
- Domain 3 – Education – UG, PG and public
- Domain 4 – Innovation and Research
- New Domain 5 – other national impact 'over and above' – *eg* International activities, work on health inequalities, increasing health literacy and enhancing public health, developing new ways of multi-professional working, supporting the NHS plan and SofS priorities
- Submission on-line through a new IT system; 2000 characters/field; no 'extra' forms; more space for publications

ACCIA - 2022

Scoring each Domain

- 10 = the application is excellent with clear and sustained national and or international impact
- 6 = the work is over-and-above the applicant's contract terms and should have national or at least demonstrable regional impact
- 2 = an applicant has met the terms of their contract or may have contributed more but mainly within their locality
- 0 = a consultant has not met the terms of their contract or there is not enough information to make a judgement

Details and anchor statements for each domain in 'Guidance for Assessors'

Consider NNO ranking and citation

Triangulate information with NNO data and 'internally' on the form

Carefully assess job plan – is impact 'over and above....' ?

Domain 1 Delivering and Developing a high quality service

Providing and developing a safe service with measurable, effective clinical outcomes, based on delivery of high technical and clinical standards of service that provides a good experience for patients

How this has been cascaded more widely to colleagues who have implemented improvements based on your experience

Important to have comparative national data or other benchmarking if available

Where relevant - excellent and impactful work in preventative medicine and public health

Redesigning a service to be more productive and efficient, with no decrease in the quality, particularly at a regional or national level

- developing new health or healthcare plans or policies
- leading large reviews, inquiries or investigations that have influenced practice nationally
- national policies to modernise health services, new ways of working or professional practice

Domain 2 Leadership

Evidence of a substantial personal contribution to leading and managing a local or regional service, or national/international specialist leadership or health policy development

Impact of role, evidence of personal contributions and achievements

Effective leadership techniques and processes – specific examples of the impact on the quality of care for patients and how this has directly or indirectly influenced other parts of the NHS to achieve these benefits

Ambassadorial or change-champion roles, for example involvement in a public consultation – seek evidence of impact

*Membership of a committee, or holding a specific role or title: **not** sufficient per se*

Look for evidence of contributions “over and above” expected in role

Refer to Job Plan – note that most Clinical Leads have one or more paid sessions in their Job Plan already

Domain 3 Education

For some applicants, teaching and training form a major part of their contribution to the NHS, over and above contractual obligations

For others, it may be a major part of their job plan (eg Clinical Academics, Education Directors) and/or be specifically remunerated

Quality of training and/or teaching: feedback – through Deanery or National Student Survey; metrics; national recognition

Scholarship, evaluation and research contributing to national or international leadership in the educational domain *eg* in assessment, curriculum or course design and delivery; evidence of uptake, quality and impact

Teaching and education of the public – *eg* patient groups/PPI

Promotion of inter-professional activities

Domain 4 Innovation and Research

Evidence of personal innovation and research activity

Contribution to research – grants, major trials, publications, national/international presentations

Translation of evidence into practice at a national level, service innovations or guidelines

Role in fostering public-patient involvement (PPI)

Partnership working – regionally or nationally – *eg* with LCRN, AHSN, or ARC

Developing the evidence / evaluation base for quality improvement or service innovations

Developing new techniques or service models, systematic uptake, roll-out and wider adoption nationally or internationally

Consider if research activity is remunerated – *refer to Job Plan*

Domain 5 Additional National Impact

This domain is an opportunity to provide evidence of wider beneficial impacts that have not have been captured elsewhere

Work has had a wider effect on areas that are national clinical priorities

Work for charitable organisations, and work which may have more of a patient or public focus, tackling health and workplace inequalities, and fostering interprofessional team-building, and new ways of working

Might include international work in training, research or recruitment, that is of clear benefit to the NHS

Delivering wider health policies with impact related to the NHS Long Term Plan and/or the NHS People Plan, particularly in reference to collaborative working, promoting staff well-being and retention – look for direct personal contributions and evidence of impact

Work focused on current Secretary of State Priorities

Thank you

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