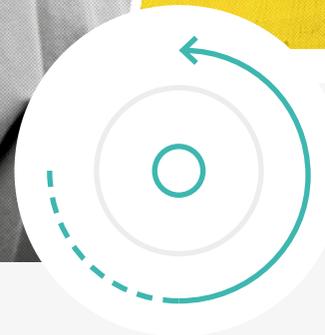


# SAS Development Programme

End of Year Programme Report April 2019–March 2020



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**The Scottish Staff, Associate Specialist and Specialty (SAS) Doctors and Dentists Development Programme was established in 2012. It recognises that taking up a SAS post should not mean cessation of career development.**

**Instead, we envisage that while these doctors and dentists will provide practice in areas of learned competencies, they will also continue to need to develop new skills to support changing specialist service development and to develop their roles within clinical teams.**

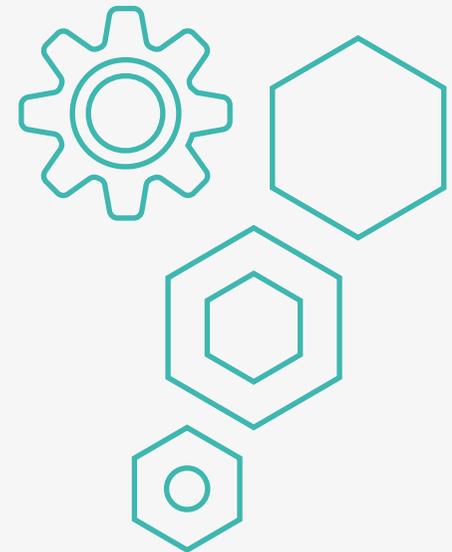
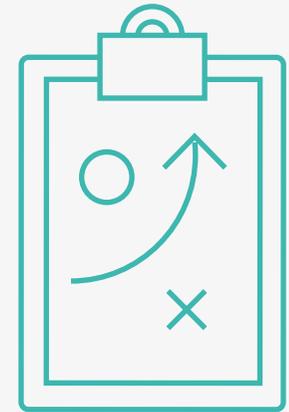
## Overview

The Scottish SAS Development Programme aims to direct national funding to those SAS doctors and dentists whose clinical teams are seeking to develop new or improved clinical services, or to enhance their role within the clinical team, and where funding is not otherwise provided by the employing Health Board via study-leave funding.

Applications for funding are prepared by the applicant together with the local SAS Education Adviser for their health board and must be supported by both the individual's Clinical Director and Director of Medical/Dental Education. The SAS Programme Board reviews all applications on a quarterly basis and awards funding to those individuals whose proposals clearly demonstrate that this training will lead to improved Clinical Services and improved patient care.

In addition, those individuals who have a clearly identified gap in their knowledge or training may be supported so they can be released for “top-up training” towards a CESR application.

Furthermore, the SAS programme also offers generic courses informed by the training needs identified by SAS themselves (e.g. quality improvement and leadership & management), thus helping to develop the essential skills required by all SAS to work in Scotland's NHS.



## SAS Programme Board

The SAS Programme Board meets quarterly to discuss operational issues and considers all applications for funding based on individual merit and set criteria. The Programme Board includes representation from NES, Directors of Medical Education (DME), and the BMA. In 2019, Professor Alan Denison took up the role of Lead Dean overseeing the SAS Development Programme, supported by Mr Adrian Dalby, General Manager, Professional Development Workstream, NHS Education for Scotland.

Dr Lynne Meekison continues to lead the programme as Associate Postgraduate Dean (SAS), and manages the network of SAS Education Advisers across NHS Scotland. The team is supported by Phil Smith (NES offices, Edinburgh), and Fiona Lennox (NES offices, Glasgow), SAS Programme Officers.

### Education Adviser Team/Managed Educational Network

Our SAS Education Adviser team has seen several changes over the course of this year. New career development opportunities for some of the SAS Education Advisers, as well as several retirements have created vacancies to which we have welcomed new SAS Education Advisers to our existing team.

They join other experienced Education Advisers, passionate and committed to raising the profile of their SAS colleagues across NHS Scotland. They will continue to support their SAS colleagues to enable SAS to reach their full potential in the interests of clinical service provision and patient care and safety.

The following table represents the SAS Education Advisers by Health Board and their allocated PA per week for the role, which is apportioned by the number of SAS within each Board.

The allocation of sessions may need to be adjusted going forwards, according to the agreed set criteria, as the numbers of SAS grades in some Health Boards alters over time. The support that these Education Advisers provide locally in the Health Boards is vital for SAS across Scotland.

	Allocation per week
● NHS Ayrshire & Arran	1 PA
● NHS Borders	0.5 PA
● NHS Dumfries & Galloway	0.5 PA
● NHS Fife	1 PA
● NHS Forth Valley	1 PA
● NHS Grampian, Orkney & Shetland	1 PA
● NHS Greater Glasgow & Clyde	3 PA
● NHS Highland & Western Isles	1 PA
● NHS Lanarkshire & State Hospital	1 PA
● NHS Lothian	2 PA
● NHS Tayside	1 PA



## Formal Training/Meetings

### Education Adviser-led Local Events

In 2019-20, we hosted a series of 12 local SAS educational events in various Health Boards, including 8 Development Days or half-days (Ayrshire & Arran, Borders, Grampian, Highland, Lothian, Greater Glasgow & Clyde, Lanarkshire, Tayside & Fife) plus 4 smaller meetings / drop-in events (Fife, Forth Valley, Clyde and Sandyhill). These events were organised by the local SAS Education Advisers in their Health Board areas, some in association with local British Medical Association (BMA) representatives with respect to, for example, job planning advice. We also co-sponsored a BMA educational event for SAS in the West of Scotland in June.

We saw a total of 286 SAS delegates attending these local events – a 40% increase on the total from 2018-19.

Due to the COVID -19 pandemic, events in March 2020, had to be canceled. We plan to continue to host local events to increase our visibility and support within the boards when conditions allow, exploring options to offer online support and networking.

Of the 66% of delegates who provided feedback for these events, 100% of attendees would recommend these events to SAS colleagues.

	Attendees
● NHS Ayrshire & Arran Irvine   Nov 2019	28
● NHS Borders Melrose   Jun 2019	9
● NHS Fife & Tayside (joint) Dundee   Oct 2019	27
● NHS Forth Valley Larbert   Mar 2020	10
● NHS Greater Glasgow & Clyde Glasgow   Dec 2020	36
● NHS Grampian Aberdeen   Oct 2019	30
● NHS Highland Inverness   Nov 2019	23
● NHS Lanarkshire Bellshill   Nov 2019	19
● NHS Lothian Edinburgh   Jan 2020	45
● West of Scotland Glasgow   Jun 2019	59
<b>Total</b>	<b>286</b>

It was really useful to learn more about the SAS development fund and to put faces to names of people locally that would be willing to discuss ideas.

Excellent afternoon with stimulating and relevant discussion.

## SAS Training Calendar

Whilst the SAS Training Calendar schedule was curtailed by the emergence of COVID-19 towards the end of the 2019-20 financial year, we had successfully run several in-person events and courses throughout the earlier part of the year.

### GMC-led CESR Workshops

We continue to work in collaboration with the General Medical Council (GMC) Specialist Applications Team to host workshops in Scotland for SAS doctors to learn more about the CESR process, and how to take forward an application.

We ran 2 such workshops this year, guiding and supporting 39 SAS grades at various stages of the CESR process. Some individuals will thereafter apply to the SAS Development Fund; some to support a short period of top-up training that should enable them to make a successful CESR application; others may need focused training or development to help them progress towards CESR.

We were pleased to feature SAS Education Adviser for Grampian, Mr Jamil Ahmed, as an additional speaker at the most recent November workshop, where he shared his own tips and advice from his successful application for CESR.

Excellent presentations, especially Rose [Jackson, GMC Specialist Applications Team Coordinator] who explained the process very clearly. I feel I have a more realistic expectation of the requirements and work involved.

Very informative. It was a pleasure to listen to the presenters. Mr Ahmed was very much motivational.

I really liked the fact that it really got into the nitty gritty of what is required for CESR.

### Quality Improvement

Working alongside the NES Quality Improvement team, we ran the “Introduction to the principles of quality improvement” workshop, which included practical, take-home tools to encourage QI projects at local levels. 54 individuals undertook this training, across an interactive full-day workshop.

Excellent facilitators. Lively presentations. Excellent session on QI tools, really identified the pros and cons of each.

I feel this will help me to better design and carry out any future quality improvement projects within my workplace.

The content was appropriately tailored to our needs and well presented.

### GMC Professionalism Workshop

We continued to fund a course for SAS jointly run with the GMC on Professionalism, covering Leadership & Management and Raising & Acting on Concerns; 27 individuals attended a full day workshop on this.

The workshop was well organised, and the speakers were excellent.

It was a good chance to network and share experience with other SAS grades. The talks were informative and discussions helpful in establishing the commonality of a lot of issues that affect me personally.

I enjoyed the day and now have an understanding that one can be a leader without necessarily having a formal management role.



## LaMP Courses

24 SAS doctors and dentists have completed the Faculty Development Alliance (FDA) Leadership and Management training programme over this year supported by the SAS Programme; a further 5 SAS have attended the initial workshop with the date for the second workshop currently postponed due to COVID-19.

This training aims to support individuals as they develop a range of personal and professional skills and behaviours which will contribute to their effectiveness as a clinician, equips SAS with the skills and knowledge both to work more effectively in their clinical teams and potentially to take on and develop leadership roles.

It was really interesting to hear of the other projects which were carried out across Scotland as part of this process. In particular, those projects where there seemed to be some “problems” which we were able to share amongst the group. It felt really good to be able to share ideas with other doctors and it felt very collaborative.

## Clinical Research Methodology Course

We supported 10 SAS doctors to undertake a course on Clinical Research Methodology with the University of Edinburgh.

These skills will enable SAS to identify, select, process and analyse information thus ensuring their contributions to Clinical Research are well targeted.

This should enable evidence-based improvements to clinical services and support SAS to be able to supervise trainees in their research, fulfilling a required criterion of any future application towards CESR.

I will be better able to engage in... research projects as well as disseminate information and teach trainees.

## Other Short Courses

For those SAS developing their career, we have supported further training to develop the skills required for these new roles. One individual has undertaken simulation training delivered at the Scottish Simulation Centre in Larbert, in order to develop the skills to provide simulation to undergraduates and postgraduates in psychiatry; furthermore, one SAS doctor has undertaken the NES Train the Trainers course, and two of our SAS Education Advisers attended the Keele University Advanced Leadership & Management course for SAS.

These SAS doctors and dentists are now helping to train and develop other clinicians, developing both SAS grades and more widely across the NHS.

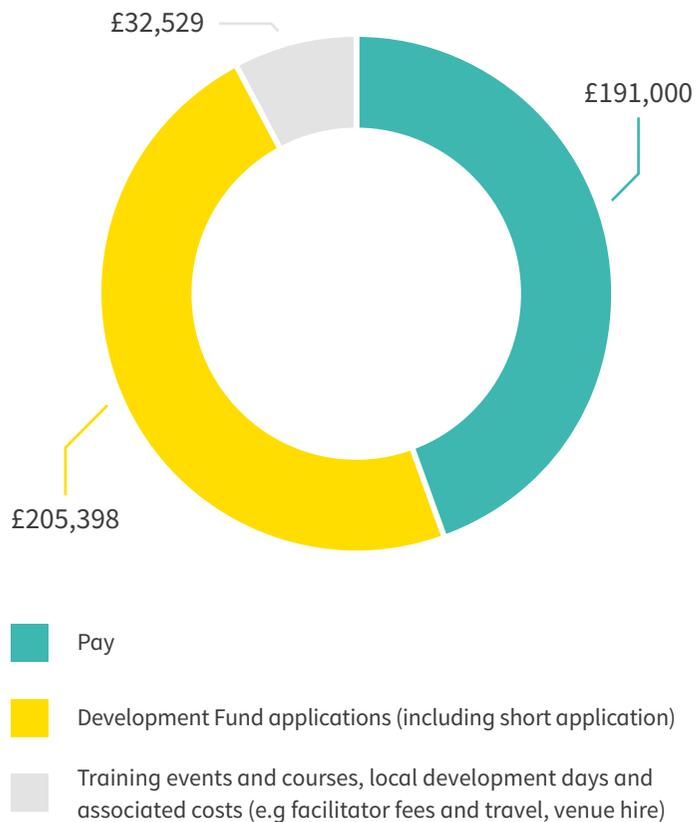
The presence of delegates from different parts of the country with different background and experience gave perspective towards the attitudes and practice of similar skills... The communication and leadership skills are applicable in all settings whether clinical or nonclinical.

– Feedback on Keele University Leadership & Management course



## Scottish National SAS Conference 2020

The Scottish National SAS Conference, “Valuing SAS in Scotland’s NHS”, had been scheduled to take place in late March 2020. This conference had a focus on Wellbeing and had been fully subscribed; however, it was necessarily postponed into 2021 due to the COVID-19 pandemic. We look forward to offering the conference when conditions allow.



## SAS Development Programme Expenditure 2019-20

**Total expenditure for Financial Year 2019-20:  
£436,419.40**

42 individual SAS doctors and dentists were supported by their local SAS Education Advisers to apply for funding for bespoke training and development. The SAS Programme team carefully managed the available SAS funding to ensure as many SAS as possible could be supported in 2019-20; unfortunately, due to COVID-19, some planned secondments for top up training for CESR were necessarily postponed in March 2020.

Further planned spend of £26,773 was required to be cancelled / deferred from 2019-20 financial year directly due to COVID-19, with resultant cancellation of the annual SAS conference, training courses and meetings which had been scheduled to take place, as well as training secondments. A further £25,391 was deferred for reasons relating to delays in arrangements originating from course providers or employing Boards.

Details of the applications made in 2019-20 are summarised in Appendix 1.



## SAS Development Fund Impact Assessment

The SAS Programme requires both the applicants and the Clinical Leads or Clinical Directors of applicants to the fund to provide feedback three months after completion of the applicant's training, in order to measure the benefit to clinical services and patient care. Therefore, there is always a time-lag from applying for funding until feedback can be given; the following report consists of feedback obtained for applications from 2018-19.

### Feedback from Clinical Directors & Leads, 2018–19

We received feedback from 78% of the Clinical Directors and Leads of those SAS who completed their training and/or secondments.

It is clear from feedback received that these teams have greatly valued the training supported, 100% indicating increased levels of confidence of the SAS, 100% increase in level of knowledge, 93% increased level of skills and 64% with increased level of experience. However, the free text comments reflect the other benefits, including:

- Applicant now fully trained and accredited in adult ECHO.

- Applicant following the completion of this placement has demonstrated that she is able to work competently at a senior level.
- Satisfied requirement for CESR application.
- Has enabled applicant to lead a range of QI projects in the department and this has improved both the service itself and the training of our training grade staff.

### How Has This Development Benefitted Clinical Service Delivery?

86% of teams reported improvements in person-centred care, 79% in safe care, and 57% improvements in efficiency and productivity. 36% reported improvements in Health inequalities.

36% of teams indicated that the learning has enabled additional theatre sessions in clinic sessions, and a further 21% additional Clinical procedures.

From a development point of view, 43% have improved service delivery with leadership/management tasks and a further 79% have enabled better teaching, training or supervision of others, demonstrating that the investment made by the training and developing of the SAS doctor/dentist has a positive impact across the wider team, improving patient care and clinical services more widely.

#### They also reported:

- Less need to refer to others for advice about epilepsy, less use of consultant time.
- Able to work more autonomously, increasing efficiency.
- This increases our department capacity and flexibility.
- Ability to provide additional psychological trauma support within routine clinic sessions - this was not previously available within our service to applicant's caseload.
- Applicant has developed good links with colleagues in primary care and has given teaching to District Nurses and the community nursing team.
- Applicant has now been nominated[...] to develop a web-based reflective practice course at the hospice and attended the training for this on the back of attending this training.

## How Has This Development Benefitted Patient Care?

86% of CDs indicate that there has been an improvement in the overall patient journey/experience, 57% less need or no need for onward referral to other services, 57% quicker diagnosis or treatment with 21% indicating a reduction in the overall waiting times.

- This also gives our department greater resilience and further options for gender choice where patients wish.
- Has improved patient safety through some of the QI projects undertaken.
- Applicant will take her knowledge to primary care where hopefully it can be used to improve community immunisation rates thereby indirectly reducing secondary care burden.
- Applicant has supported patients in the community, outpatient and inpatient setting and has been readily available to patients and families in supporting them in this journey.



## In What Future Ways Could Enhanced SAS Development Support Local Service Delivery?

### Better links between Primary and Secondary Care

- ■ In this particular case, and I suspect it is true for many other too, our SAS doctor was previously a GP. The interface between Primary and Secondary care is an important but sometimes fragile entity. Some SAS doctors may be uniquely placed to help nurture improving relationships across the sectors, and perhaps projects that promote this should be encouraged and given priority.
- ■ This placement within palliative care has enhanced the team working across primary and secondary care. With the knowledge of secondary care that the individual previously had and with the new relationships with primary care and hospice colleagues this has been beneficial to all involved.

### Specific skills

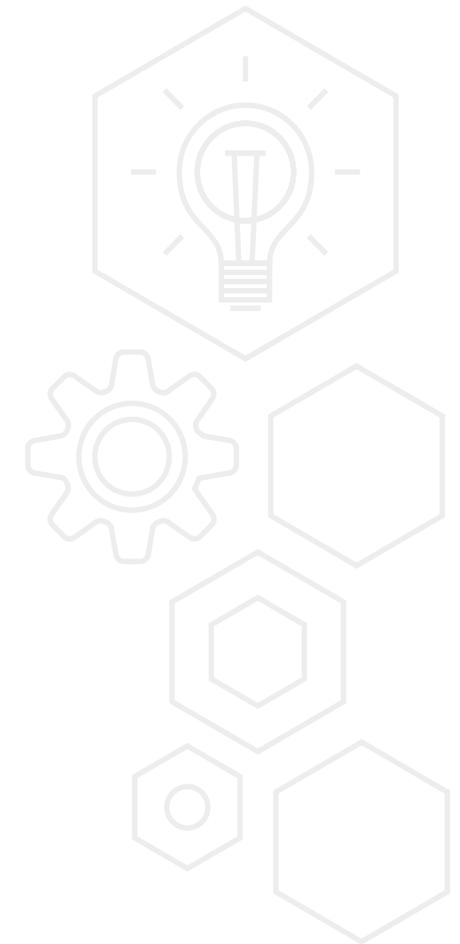
- ■ Focus on in-service development of SAS doctors around QI work or specific set of skills etc.
- ■ Backfill mechanism to allow SAS doctors to experience other areas of practice against set of objectives.
- ■ To develop a small service utilising applicant's skills.

- ■ By encouraging and supporting specialty doctors to become consultants through the CESR route.

### In dentistry

- ■ In our department the SAS grades make up the majority of the workforce and are very valued. We are very keen that they are supported to access additional training and development opportunities. For some of our SAS grades in the future this may contribute towards a CESR type process - although at present this is not available in dentistry, we hope something of this nature will be available in the future.

Provision of funding to allow them to access both clinical training and academic opportunities is vitally important and could allow them to develop specific clinical skills and develop sub specialty interests that would allow us to offer more treatments to patients. For staff like this applicant this was her first formal postgraduate education for many years and being able to undertake this has greatly increased her confidence in her abilities and has encouraged her to take on more leadership roles within the department particularly with regard to training.



## Feedback from Applicants, 2018–19

### Purposes of the development activity



Following their training, the SAS applicants themselves highlighted that 100% would recommend their development activity to others, 94% of SAS felt this funding provided good value for money; 100% indicated it improved their own practice and all felt it contributed to their PDP.

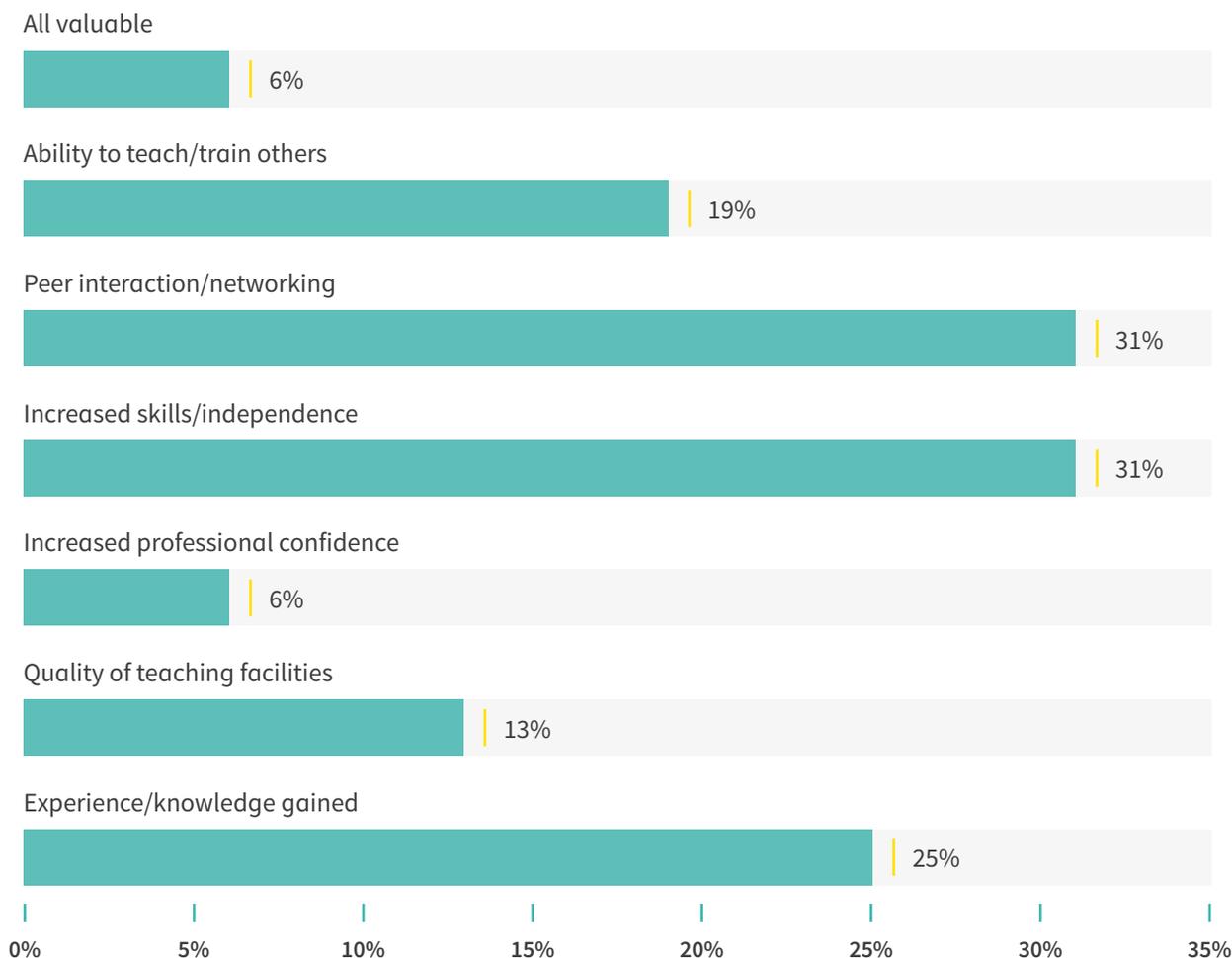
44% indicating increased skills/independence, 44% improved working, 31% increased knowledge, with 31% sharing knowledge/training with colleagues and students and 31% increased confidence in their role. 94% reported improved quality of patient care; 56% indicated that this funding has contributed towards the development of new initiatives at work including teaching and training, new clinic and new theatre sessions, additional clinical procedures, setting up improved clinical protocols and policies to improve patient care and taking on leadership and management tasks and duties.

Several SAS have met career development goals with the support of the Programme, including help towards achieving CESR, and subsequent appointment to a Consultant post; one applicant became the joint Realistic Medicine Lead for her Board, and another is to be utilising her skills as she takes up a training post in General Practice.

### The applicants pursuing CESR indicated:

- 
 Amazing fund. It has created lots of opportunities for learning for me.
- 
 Would not have been able to do the required training/ 'out blocks' for CESR without the SAS fund. Invaluable.
- 
 Excellent support and advice available.
- 
 It was able to provide funding to enable me to meet the submission criteria.

**Please Specify Which Aspects of the Development Activity Were Most Valuable To You**  
 [Free Text Responses Summarised by Theme]



- ▣▣ I'm very grateful for the help I have received from the fund.
- ▣▣ Just want to say thank you very much. Without SAS funding I will never progress in my future career plan. It's an amazing opportunity and privilege to have it.
- ▣▣ Continue good work!
- ▣▣ It's an excellent resource which is underutilised.
- ▣▣ SAS Development Fund is an excellent opportunity to gain more in-depth knowledge and improve your skills... I am grateful for the funding as this enabled me to access excellent training for this demanding area of practice. I found the whole process very well organised and I was able to access advice promptly when needed.
- ▣▣ This was a good experience and useful development for me and our service and I would consider applying again.
- ▣▣ I was incredibly grateful to receive my funding and feel it has benefited me greatly. I thought the support available from local SAS advisors was excellent and the application process relatively straightforward.

## National Work

In addition to leading the Scottish SAS Development Programme, the SAS Associate Postgraduate Dean (SAS APGD) represents Scottish SAS and contributes to work on broader themes in Scotland and the UK.

Across the UK there has been a high profile for many of the issues affecting SAS this year, with representation to the appropriate national groups being vital. The SAS APGD represents Scotland in the SAS subgroup of the Conference of Medical Deans (COPMeD), known as COPSAS; this year also joining a new Inclusivity working group at RCPSG.

The APGD continued to be part of the Management Steering Group, representing NES in working together with Scottish Government, NHS Employers and BMA as part of the Improving Working Lives (SAS) group throughout most of this year. This group considered recruitment, retention and the role of SAS in the boards, and looked to ensure that the Scottish SAS Charter was being implemented in NHS Scotland. With impending SAS contract negotiations due to start in England and Wales the APGD was stepped back from the core Scottish group at the end of February 2020, however remains a part of the wider group for any Educational issues which may arise.

The first GMC survey of SAS doctors and Locally Employed Doctors (LEDs) was launched in May 2019 with publication of the initial report in January 2020 ([viewable here](#)). The GMC established a new GMC UK SAS Round-table forum to which the APGD represents Scotland.

This group met several times over the year, considering the initial findings of the survey. It was agreed that this forum should focus on SAS specific results and identified the areas which require further detailed analysis. Unfortunately, this work was necessarily deferred because of the COVID crisis.

We hope that, together with input from our partner organisations, we can support the Scottish SAS cohort as their individual needs become clearer. These will need to take into account the huge challenges currently facing the NHS with the COVID pandemic.

The APGD has continued to be part of the GMC UK Advisory forum in Scotland and the GMC Education Round Table, as well as being part of the Scottish Wellbeing group which contributed to the findings of the report on “Wellbeing of the Medical Profession” ([viewable here](#)).

Within NES, the APDG is part of the Careers group which successfully delivered a broad ranging workshop at the Scottish Medical Education Conference on “returning to work after a break”.

## Supporting SAS Across the NHS in Scotland

As well as supporting SAS with their training and development, the SAS Programme has continued to develop the resources available to guide and support SAS working in Scotland.



## Looking to 2020–21 and Beyond

33% of SAS Doctors and Dentists directly accessed training which has been funded by the SAS Development Programme in 2019-20. In addition, many more SAS received individual support and guidance from their local SAS Education Adviser, including for careers advice.

We respond to the feedback received from individuals, from their CD's and following the training events that we ourselves deliver, in order to ensure that the SAS programme itself evolves to meet the needs of the SAS community and wider NHS.

As we move into 2020-21, the challenges faced due to the COVID pandemic will require us all to train and to work very differently. The SAS Programme is responding to these challenges and aims to ensure that we continue support SAS in their development in order to improve clinical care.

Supporting the development of SAS grades through the programme has a direct, positive impact on patient care and safety, and on clinical services across NHS Scotland. SAS doctors and dentists play a vital role in today's Scottish NHS, and the continued funding of the Scottish SAS Development Programme is essential for retaining and optimising the contribution of these valuable staff.

- ▣▣ Continued enhanced development opportunities for SAS Doctors to enable their personal progression and service enhancement.
- ▣▣ I would be supportive of this scheme continuing.
- ▣▣ This grade of doctors are valuable to our service yet hard to come by so we need to retain them!
- ▣▣ It is important for SAS staff to feel valued and respected and a big part of this is to help them develop.



## Appendix 1: Applications to the Fund

We collected data on applications and awards to the development fund by the characteristics of: gender, age, disability, nationality, ethnic origin, religion or belief, sexual orientation, caregiving responsibility, and remoteness/rurality.

We compared the profiles of all applicants against those whose funding was approved, and found that the profile of those whose applications were successful reflected the profile of applicants in all categories.

### 2019–20 SAS Development Fund applications

<b>NHS Health Board</b>	<b>New applications submitted</b>	<b>New applications approved</b>	<b>Repeat applications submitted</b>	<b>Repeat applications approved</b>	<b>Overall total applications submitted</b>	<b>Overall total applications approved</b>
NHS Ayrshire & Arran	4	4	2	2	6	6
NHS Borders	1	1	0	0	1	1
NHS Dumfries & Galloway	1	1	0	0	1	1
NHS Fife	3	3	0	0	3	3
NHS Forth Valley	1	1	0	0	1	1
NHS Grampian, Orkney & Shetland	2	2	2	1	4	3
NHS Greater Glasgow & Clyde	5	5	1	1	6	6
NHS Highland & Western Isles	4	4	0	0	4	4
NHS Lanarkshire & State Hospital	4	4	1	1	5	5
NHS Lothian	8	8	0	0	8	8
NHS Tayside	3	3	0	0	3	3
<b>Total number of applications</b>	<b>36</b>	<b>36 (100%)</b>	<b>6</b>	<b>5 (83%)</b>	<b>42</b>	<b>41 (98%)</b>

<b>Type of development activity</b>	<b>New applications submitted</b>	<b>New applications approved</b>	<b>Repeat applications submitted</b>	<b>Repeat applications approved</b>	<b>Overall total applications submitted</b>	<b>Overall total applications approved</b>
Qualification	7	7	3	3	10	10
Training course	19	19	1	1	20	20
Top up training for CESR purposes	5	5	2	1	7	6
Secondment for additional experience (Non CESR)	3	3	0	0	3	3
Training course + secondment	2	2	0	0	2	2
<b>Total number of applications</b>	<b>36</b>	<b>36 (100%)</b>	<b>6</b>	<b>5 (83%)</b>	<b>42</b>	<b>41 (98%)</b>



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