# Information about the 2015 Accea Round

Anything about the ACCEA system (what we used to call Distinction Awards) is contentious, and I apologise for e mailing all of you about this. But it is something that is relevant to those of our members who hold awards,  but also everyone who aspires to hold an award. I am also aware that Scotland has gone its own way on this and is no longer part of the scheme.

We now know that the 2015 round will open in mid-April and close in mid-June.  Last year we did not do very well.  We received only 8 awards in total, which equates to 2% of all the awards, when we make up 11% of the consultant work force. Our success rate was 10%, compared to 20% for the other large Colleges like ours.  We have always been under-represented, but this represents a significant decline.

I have raised this with the Medical Director of the scheme. She agrees that our low success rate is a genuine issue.  The good news is that she feels that it should be improved, and has accepted my invitation to come to Council to discuss this.  The bad news is that she can’t make this until the July Council, so I won’t be able to feed back any insights until after the 2015 Round has closed.

Whatever happens, the scheme will continue to be tight.  In particular it will be as difficult to renew existing awards as it is to gain new ones.  And the consequences of losing an existing award are more serious that in the past, as there is no longer any salary protection.  If you lose a Silver or above there is a chance, but no guarantee, that you will still get a lower award (in that case Bronze) – that would happen provided your score is either above or level with the cut off for awarding the lower award.  Those of you familiar with the process will detect a bias here, since you would be scored for your higher award (silver), but then be in contention with those scored for the lower award (Bronze).  I have raised this issue, but it seems there is no appetite for a double scoring system .

The situation around Bronzes is unclear. One gloomy scenario is that you would return to zero local points.  I have been speaking to the NHS Confederation, who have said that informally they do not think that employers would do this, but so far no firm guidance have been issued. I am hoping that the situation will become clearer sooner rather than later.

Finally, if you are applying for an award or renewal, a few tips. My experience is that one of the main reasons people do not get awards is because they do not fill in the form correctly. Simple things can make all the difference.  Do not leave any bit of the form blank. Think of something in every domain – just having a medical student in your clinic will be sufficient to ensure that you at least score something on teaching. If you say  “my job leaves me no time for management/research/teaching”, you will score a zero and be ineligible for the scheme.  **Always but always put in dates.**  If you don’t, the committee will assume that it all happened years ago.  Put in as much evidence as you can to verify what you say – feedback, audit, impact, publication and so on.  Saying that you are brilliant is one thing, proving it with some external evidence can make all the difference.  Chairing this or that committee doesn’t impress – describing what the committee achieved might.

Finally, one reason that I suspect we do not do as well as we should is because we are by our nature modest people, who are keen not to take the credit for other people’s efforts.  That is excellent for team building, cohesion and morale.  However, may I suggest that completing your form is not a good time for false modesty.

9th April 2015