



RCP support process for 2019

Overall objectives and principles

- To nominate the maximum number of candidates allowed for each category of Award.
- To give equal opportunity to each eligible consultant.
- To use a consistent assessment process to reach priority decisions, throughout the process.
- To involve local and specialty advice in priority rankings.
- To rank according to objective and transparent criteria.
- To provide the best support to each potential candidate in terms of what they need to know to succeed in the process.
- To provide the best support to each nominated candidate, through provision of an effective citation. Consideration of candidates based on the RCP support form that they have provided.

Clinical excellence awards schemes

The process described here covers awards at Bronze, Silver, Gold, and Platinum levels, in England and Wales. Separate procedures apply to Northern Ireland, Scotland, and the Defence Medical Services.

This procedure and the processes described will be revised each year in the light of experience, and to take account of feedback or policy change notified from the national Advisory Committee on Clinical Excellence Awards (ACCEA) office.

In the context of assessing Level 12 (Platinum) Awards, each year the RCP president will have discretion to vary the arrangements described here if necessary, depending on the process in place for submissions via the Academy of Medical Royal Colleges. Even if so, the principles of self-nomination will continue to apply.

Components of the RCP process

At appropriate times during an annual cycle, the RCP process will include the following sequential steps;

1. Raising awareness and publicising the application process.
2. Inviting applications for consideration.
3. Scoring applications to assess their relative merits and provide a basis for determining priority.
4. Preparation and confirmation of overall priorities.
5. Notification of candidates who will receive support.
6. Preparation and submission of supporting citations.

The president and the registrar are the principal RCP officers concerned with this process. Arrangements for management of the process will be made by the deputy chief executive.

Raising awareness and publicising the application process.

1. The RCP will publish detailed guidance for applicants, on the RCP website. This will include national guidance as well as observations from the previous year. When possible it will be updated annually, before the closing date for the next round of national awards.
2. The guidance will explain and specify the process to be followed, and will give guidance intended to assist applicants to submit the strongest case possible for RCP consideration.
3. Potential applicants who have participated in the latest RCP census will be notified of the process and referred to the website. This will be done by email to eligible consultants for who we have an address. Details of the support scheme will also be publicised via social media and relevant RCP e-bulletins.



Inviting applications for consideration.

1. Potential applicants will be notified of the process and referred to the website as described above. This will specify the procedure for submitting applications, which must be via the on-line RCP support and before the closing date specified
2. Applicants must submit a self-nomination to the RCP if they wish to be considered. This form will be based as far as possible on the national form, but will emphasise the opportunity under the Personal Statement to describe the candidate's contribution to the NHS through RCP activities.
3. This is regardless of any separate submission they make, for example to a specialist society. No candidate will be considered by the RCP unless they have applied through the RCP system.
4. Applications will be considered from eligible consultants who are not fellows or collegiate members of the RCP, but they will be aware (through the guidance) of the emphasis given to RCP contribution in assessing candidates.
5. Receipt of self-nomination forms will be by the on-screen message stating successful submission of the form.
6. The closing date for acceptance of self-nominations by the RCP will be specified on the RCP website, and in communications that accompany the process. This will allow time for candidates to complete and submit their form.
7. The closing date will be adhered to strictly. Exceptions will not be allowed as to do so might compromise the whole overall process.
8. Completion of the RCP support form by an applicant will be taken as consent to share the data contained in it as necessary for the RCP scoring and assessment process, but strictly and only for the purposes of the nomination process.

Scoring applications to assess their relative merits and provide a basis for determining priority.

1. Each of the Specialist Societies associated with the RCP will be invited to nominate a contact for the assessment process, who will represent the society and act on its behalf in this process. Unless otherwise agreed locally, the RCP Regional Adviser for Service Quality will act as the contact point for regional input. Scoring may also be extended to include members of Council to support statistical validity.
2. Collectively, these groups of scorers will form the source of advice to the RCP and will be known as the President's Advisory Committee on Clinical Excellence Awards (PACCEA). The final decision on the RCP's nominees will be approved by the RCP president.
3. As soon as practicable after the closing date for self-nominations, the data contained in the RCP support forms will be sent to all members of the PACCEA. They will be invited to score each form, using criteria based on that recommended by the central ACCCEA.
4. Members of the PACCEA will have the choice either of scoring all candidates, or a sample specified by the RCP so as to enable sufficient distribution.
5. Scoring of RCP support forms will be based on their content and the information presented in it. Therefore it is important that candidates complete it as comprehensively as possible.
6. Candidates will be considered for nomination by the RCP on the basis of the Level(s) for which they are eligible as notified by ACCEA. This may differ from the Level to which the applicant wishes to apply, in which case it will be discussed with the applicant.
7. The form will encourage candidates to describe their contribution to the RCP within the Personal Statement. This will be scored along with the other domains.
8. Members of the PACCEA will have the period from receipt of the data until a notified date to complete this scoring. In carrying out the exercise members of the PACCEA will be able to consult in confidence with local or specialty colleagues as they think fit, but as individuals they will be responsible for submitting the scores.
9. Depending on the date of announcement of successful applications from the previous round, every effort will be made to arrange the process so that applicants who turn out to be successful in that (current) year's round do not have to apply or be scored.



10. Guidance will be prepared each year by the RCP for scorers, giving advice on issues such as minimum levels of current award, length of time in post, and other factors that might influence decisions about the scoring of individual candidates.

Preparation and confirmation of overall priorities.

1. Until a notified date, members of the PACCEA will be able to record the scores they have allocated to each candidate whose form they have scored, on a web-based scoring system provided by the RCP. It will be possible to enter and save the scores so as to record them at separate times if desired.
2. The scoring system will list the names of candidates for Awards, grouped per category of Awards. If applicable, once the names of successful candidates from the previous year's nominations are known, they will be removed from the score sheet should any be current applicants.
3. The scores submitted will be aggregated centrally by the RCP, to show the total scores attributed to each candidate by domain, but also a total based on the average score awarded for each domain. This will form the basis of a priority list to be considered for RCP support.
4. Using this information, the RCP will decide its prioritised list of nominations for each category of award, based on the maximum number advised by the central ACCEA.

Notification of candidates who will receive support.

1. Candidates who are agreed by the RCP to receive support will be notified by email as soon as practicable, and given clear instructions on the steps to be taken next, the deadlines, and their individual responsibilities under the process.
2. The number of candidates that the RCP can recommend to ACCEA is limited, as we are given a strict limit. This means that not every applicant can receive RCP support and difficult choices have to be made. Candidates who cannot be supported will be informed of that fact, but unfortunately it is not possible to give further details or enter into correspondence.

Preparation and submission of supporting citations.

1. Central ACCEA requires that every candidate nominated by the RCP is supported by a citation, and individual candidates may be invited to arrange the provision of a citation from an appropriate individual who is aware of their work.
2. In any case, those asked to provide a citation will be given guidance on sources, content, length, and deadlines.
3. The content of RCP citations will be provided by the authors, but the citations themselves will be submitted centrally by the RCP, in accordance with the current ACCEA guidelines.

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