



NHS Management Executive  
St. Andrew's House  
Edinburgh EH1 3DG  
2nd February 1998

Dear Colleague

**GUIDANCE ON PROCEDURES FOR OBTAINING  
APPROVAL TO THE ESTABLISHMENT OF NEW  
MEDICAL AND DENTAL POSTS**

**SCOTTISH ADVISORY COMMITTEE ON THE  
MEDICAL WORKFORCE - HOSPITAL AND  
COMMUNITY HEALTH SERVICES SUB-COMMITTEE  
(SACMW-HCHS)**

**ADVISORY COMMITTEE FOR DENTAL  
ESTABLISHMENTS (ACDE)**

**Summary**

This Circular advises Trusts and Health Boards on the arrangements for the approval of new medical and dental posts.

**Action**

1. Posts in the following grades may only be established when authorised by the Scottish Office Department of Health:

*in medicine*, SCMO, associate specialist, staff grade (when a Trust's staff grade/consultant ratio is over 10%: see below), limited specialist and SHO grades; and

*in dentistry*, consultant, associate specialist, staff grade (when a Trust's staff grade/consultant ratio is over 10%: see below), and SHO grades and senior posts in the community dental service.

2. Advice on the establishment of new posts and proformas to be followed in framing applications to be submitted to the Department for the above grades are contained in the attached Appendix and associated Annexes.

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**Addressees**

For action:

Chief Executives, NHS Trusts

General Managers, Health Boards

Executive Director and Dental  
Director, Scottish Council for  
Postgraduate Medical and Dental  
Education

Postgraduate Medical Deans and  
Director

Deans of Dental Schools

Deans of Faculties of Medicine

General Manager, Common Services  
Agency

For information:

Chief Executive, Health Education  
Board for Scotland

General Manager, State Hospitals  
Board for Scotland

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**Enquiries to:**

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Department of Health  
Room 62  
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EDINBURGH EH1 3DG

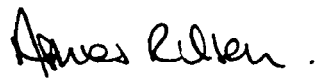
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3. This Circular replaces as from the above date the guidance contained in NHS Circulars 1992(GEN)5 and MEL(1993)8.

Yours sincerely

A handwritten signature in black ink, appearing to read 'Agnes Robson'.

AGNES ROBSON  
Director of Primary Care

**GUIDANCE ON PROCEDURES FOR OBTAINING APPROVAL TO THE ESTABLISHMENT OF NEW MEDICAL AND DENTAL POSTS**

1. This Circular provides guidance on the arrangements for the approval of new medical and dental posts.
2. Posts in the following grades may only be established when authorised by the Scottish Office Department of Health:  
  
*in medicine*, SCMO, associate specialist, staff grade (when a Trust's staff grade/consultant ratio is over 10%: see below), limited specialist and SHO grades; and  
  
*in dentistry*, consultant, associate specialist, staff grade (when a Trust's staff grade/consultant ratio is over 10%: see below), and SHO grades, and senior posts in the community dental service.
3. Applications for new posts or regradings should be made using the appropriate format contained in the attached Annexes 1- 5.
4. In considering applications for new posts or personal regradings, the Scottish Office Department of Health will be advised by the Hospital and Community Health Services Sub-Committee of the Scottish Advisory Committee on the Medical Workforce (SACMW-HCHS) or the Advisory Committee for Dental Establishments (ACDE).
5. The two advisory committees meet about 3 times a year. In addition, applications for SHO posts in medical specialties are dealt with by the Mini Group, a sub-committee of SACMW-HCHS which meets as and when necessary.
6. SACMW-HCHS and ACDE will be unable to recommend approval of posts unless confirmation of funding is clearly stated.
7. It is essential that all information provided is up-to-date, accurate and relevant to the application. This is particularly true of data relating to the annual workload of the unit(s).
8. Employers should not depart from the terms of the stated case submitted to SACMW-HCHS or ACDE when preparing the relevant job description for a new post subsequently approved by the Scottish Office Department of Health. Such information as would appear in the job description should, therefore, be incorporated in the stated case when the application is being prepared.
9. Employers are reminded that they should not appoint to non-standard grades.

### **Senior posts in the community dental service**

10. All senior posts in the community dental service should be advertised except with the approval of the Scottish Office Department of Health following advice of ACDE. Advertisement must be made in one or more nationally available professional journal.

### **Associate Specialists**

11. Employers considering an associate specialist post should first establish the need for the post. They should consider carefully whether the service need cannot more appropriately be met by a consultant appointment. The following factors should be taken in account:

- a. the need to develop a consultant-based service;
- b. overall consultant responsibility for patient care;
- c. consultant cover, both in and out of hours, in the relevant specialty and, where necessary, in related specialties;
- d. provision for the teaching of junior doctors and for the supervision of both junior and career grade medical staff.

An associate specialist post should be established only where this is in the best interests of the service.

12. All associate specialist posts require the approval of the Scottish Office Department of Health. In considering applications, SACMW-HCHS and ACDE will take the advice of an appropriate member of the National Panel of Specialists.

### ***Personal regrading***

13. Personal regrading will continue to be the normal route for appointment to associate specialist. Proposals for associate specialist regradings should include a CV and a letter from the applicant seeking regrading. All applicants for regrading should not only be interviewed by their local postgraduate adviser or dean but also by their specialty adviser. It is particularly important that candidates are fully aware of the implications of regrading. Copies of correspondence should be submitted from (1) the postgraduate adviser or dean and (2) the specialist adviser supporting the regrading and indicating that these conditions have been fulfilled. Applications should also have the support of the general body of consultants of the Trust and a letter of approval, usually from the local Committee for Hospital Medical Services or equivalent, should be included.

### ***Advertised posts***

14. In a small number of specialties associate specialist posts may be advertised and then subsequently filled by open competition. These specialties are refraction, blood transfusion, audiology, and general medical care in special hospitals and occupational health medicine. All such posts require approval by the Scottish Office Scottish Office Department of Health. Proposals should be submitted using the appropriate format but without supporting documentation. Advertisement must be made in one or more nationally available professional journal.

### ***Honorary associate specialist status***

15. Honorary associate specialist status may be accorded to individuals employed by universities or Medical Research Council units and working at a senior level but who do not have sufficient training or experience in a specialty to qualify for an honorary consultant appointment. Applications for honorary recognition should be made in the same way as for personal regradings.

### ***Vacancies***

16. When an associate specialist appointed through personal regrading vacates a post, the post effectively no longer exists. Employers should firstly determine that it would not *be appropriate* to create a consultant post. If a consultant post is not considered appropriate, a staff grade should be appointed. When an individual who has undergone personal regrading to associate specialist wishes, for personal reasons, to transfer to another employer, special permission should be sought from the Scottish Office Department of Health by the prospective employer.

17. When an associate specialist vacates a post to which they had been appointed by advertisement, the post no longer exists and an application should be submitted for permission to establish the post anew.

### ***Staff Grade posts***

18. Central approval is necessary for the establishment of all staff grade posts that would take a Trust above 10% of its consultant establishment. Such proposals should indicate clearly the total staff grade and consultant establishments in the Trust as a whole, not just in the specialty. The number of consultants should be taken as the number in post plus the number of posts, including current vacancies, due to be filled within the next 12 months.

19. Although the national UK ceiling on staff grade numbers has been removed, the Scottish Office Department of Health will continue to monitor the total number of staff grades as a proportion of the medical workforce as a whole. It is recognised that the workforce requirements of employers will vary and a higher proportion of staff grade posts is to be expected in some Trusts than in others. However, when assessing the case for the creation of particular posts, due consideration will be given to both service and educational needs.

20. All staff grade posts should be advertised in one or more nationally available professional journal. If for exceptional reasons a waiver from advertising is sought, approval from the Scottish Office Department of Health is required.

#### **Senior Clinical Medical Officer**

21. Employers considering creating Senior Clinical Medical Officer (SCMO) posts should contact the Scottish Office Department of Health for advice on how to apply for workforce approval.

#### **Limited specialists**

22. Limited specialists are in the main general practitioners with part-time hospital appointments providing anaesthetic services for consultant surgeons in isolated hospitals where direct consultant supervision cannot be given. Posts are held on a personal basis and appointments require the approval of the Secretary of State. Employers considering appointing a limited specialist should contact the Scottish Office Department of Health for advice on how to apply for approval.

#### **SHO posts**

23. Educational approval must be obtained and funding for all posts must be secured. Each proposal should include a copy of the letter from the postgraduate dean giving educational approval and a copy of a letter from the main funder confirming the availability of funding.

#### **Submission of applications**

24. All applications for new posts and regradings should be submitted either by a Health Board general manager, Trust chief executive, medical director or director of human resources.

25. **21 copies** of all proposals for medical posts, except for SHO posts, should be submitted to the Secretary of SACMW-HCHS in the Scottish Office Department of Health.

26. Medical SHO proposals continue to be considered by the Mini Group of SACMW-HCHS. Proposals for SHO posts may therefore be submitted as soon as they are ready. **5 copies** of each SHO proposal are required.

27. **15 copies** of all dental proposals should be submitted to the Secretary of ACDE in the Scottish Office Department of Health.

# HEADINGS AND LAYOUT TO BE USED IN PROPOSALS FOR DENTAL CONSULTANT

## DENTAL CONSULTANT APPLICATION

### 1. NHS Trust or Health Board

### 2. Specialty

- (a) Main
- (b) Sub-specialty (if appropriate)
- (c) Special interests (if appropriate)

### 3. Hospital(s)

- 3.1 Base
- 3.2 Others

### 4. Contract

4.1 Whole-Time; maximum Part-Time; Part-time (number of Notional Half Days); Honorary (number of Notional Half Days)

4.2 Weekly job plan (recommended layout):

		Location	Work done	Fixed/Not Fixed
Monday	am pm			
Tuesday	am pm			
Wednesday	am pm			
Thursday	am pm			
Friday	am pm			
Weekend				
Other duties				

On-call rota and number of sites covered (if appropriate)

## **DENTAL CONSULTANT APPLICATION**

### **5. Other staff in unit(s): honorary and NHS**

#### **5.1 Consultant**

List by name; main location; contract (Whole Time/max Part Time/Part Time); Notional Half Day; and specialist interests.

#### **5.2 Non-consultant**

List all dentists in unit(s) in non consultant grades, (associate specialist; staff grade; hospital practitioner; clinical assistant; Specialist Registrar; Senior Registrar; SHO; PRHO; and other.)

with Notional Half Day or sessions of each (as appropriate)

### **6. Population served**

(include numbers and any special characteristics)

### **7. Annual workload of unit(s)**

(Include appropriate performance indicators such as: staffed beds, throughput, new out-patients and emergencies; inpatient/day case and local anaesthetic activity and an indication of the range of complexity of the caseload).

### **8. Stated case for post**

### **9. Status of funding**

### **10. Consultant forecast**

Indicate whether post was notified to the Department in forecast submitted by the Trust in the past year.

### **11. Views of adjacent Trust or Board**

If appropriate include the views of adjacent Trust or Health Board

### **12. Any other relevant information**

# HEADINGS AND LAYOUT TO BE USED IN PROPOSALS FOR SENIOR POSTS IN THE COMMUNITY DENTAL SERVICE

## CLINICAL DENTAL SERVICES MANAGER/ACADO/SDO APPLICATION

1. **NHS Trust or Health Board**
2. **Specialty**
  - (a) Main
  - (b) Sub-specialty (if appropriate)
  - (c) Special interests (if appropriate)
3. **Clinic/Hospital(s)**
  - 3.1 Base
  - 3.2 Others
4. **Contract**
  - 4.1 Whole-Time or Part-time (number of Notional Half days)
  - 4.2 Weekly job plan (recommended layout):

		Location	Work done
Monday	am pm		
Tuesday	am pm		
Wednesday	am pm		
Thursday	am pm		
Friday	am pm		
Weekend			
Other duties			

On-call rota and number of sites covered (if appropriate)

## **CLINICAL DENTAL SERVICES MANAGER/ACADO/SDO APPLICATION**

**5. Other relevant staff in Trust or Health Board**

List by name; main location; contract (Whole Time/Part Time) with Notional Half Day or sessions of each (as appropriate)

**6. Population served**

(include numbers and any special characteristics)

**7. Annual workload of unit(s)**

(Include appropriate performance indicators relating to general workload and volume of specialist activity)

**8. Management responsibilities**

(number of sessions spent on management and type and number of staff managed)

**9. Stated case for post**

**10. Status of funding**

**11. Any other relevant information**

# HEADINGS AND LAYOUT TO BE USED IN PROPOSALS FOR ASSOCIATE SPECIALIST REGRADINGS

## ASSOCIATE SPECIALIST APPLICATION

### 1. NHS Trust or Health Board

### 2. Specialty

- (a) Main
- (b) Sub-specialty (if appropriate)
- (c) Special interests (if appropriate)

### 3. Hospital(s)

- 3.1 Base
- 3.2 Others

### 4. Contract

- 4.1 Whole-Time, maximum Part-Time or Part-time (number of Notional Half days)

- 4.2 Weekly job plan (recommended layout):

		Location	Work done
Monday	am pm		
Tuesday	am pm		
Wednesday	am pm		
Thursday	am pm		
Friday	am pm		
Weekend			
Other duties			

On-call rota and number of sites covered (if appropriate)

## **ASSOCIATE SPECIALIST APPLICATION**

### **5. Other staff in unit(s): honorary and NHS**

#### **5.1 Consultant**

List by name; main location; contract (Whole Time/max Part Time/Part Time); Notional Half Day; and specialist interests.

#### **5.2 Non-consultant**

List all staff in unit(s) in non consultant grades,  
(associate specialist; staff grade; hospital practitioner; clinical assistant;  
Specialist Registrar; Senior Registrar; SHO; PRHO; and other.)

with Notional Half Day or sessions of each (as appropriate)

### **6. Population served**

(include numbers and any special characteristics)

### **7. Annual workload of unit(s)**

(Include appropriate performance indicators such as: staffed beds, throughput, new out-patients and emergencies).

### **8. Stated case for post**

In addition, give reasons why consultant or staff grade post is not more appropriate.

### **9. Status of funding**

### **10. Any other relevant information**

### **Supporting documentation for personal regradings:**

- (a) CV of applicant including number of years (whole time equivalents) spent working in the specialty
- (b) Letter from applicant seeking regrading
- (c) Letter from postgraduate tutor or postgraduate dean
- (d) Letter from specialist adviser
- (e) Letter of approval of general body of consultant staff from local Committee for Hospital Medical Services or equivalent.

# HEADINGS AND LAYOUT TO BE USED IN PROPOSALS FOR STAFF GRADE POSTS

## STAFF GRADE APPLICATION

### 1. NHS Trust or Health Board

### 2. Specialty

- (a) Main
- (b) Sub-specialty (if appropriate)
- (c) Special interests (if appropriate)

### 3. Hospital(s)

- 3.1 Base
- 3.2 Others

### 4. Contract

#### 4.1 Sessions

#### 4.2 Weekly job plan including on-call (recommended layout):

		Location	Work done
Monday	am pm		
Tuesday	am pm		
Wednesday	am pm		
Thursday	am pm		
Friday	am pm		
Weekend			
Other duties			

## **STAFF GRADE APPLICATION**

### **5. Other staff in unit(s): honorary and NHS**

#### **5.1 Consultant**

List by name; main location; contract (Whole Time/max Part Time/Part Time); Notional Half Day; and specialist interests.

#### **5.2 Non-consultant**

List all staff in unit(s) in non consultant grades,  
(associate specialist; staff grade; hospital practitioner; clinical assistant;  
Specialist Registrar; Senior Registrar; SHO; PRHO; and other.)

with Notional Half Day or sessions of each (as appropriate)

### **6. Population served**

(include numbers and any special characteristics)

### **7. Annual workload of unit(s)**

(Include appropriate performance indicators such as: staffed beds, throughput, new out-patients and emergencies).

### **8. Stated case for post**

In addition, include an assessment of the implications of the proposal for consultant staffing and for the provision of suitable experience for practitioners in the training grades in the future.

### **9. Status of funding**

### **10. Any other relevant information**

Give the total staff grade and consultant establishments in the Trust as a whole in numbers and whole-time-equivalents.

### **Supporting documentation**

If a waiver on the need to advertise is requested, attach:

- (a) CV of applicant
- (b) Letter from applicant seeking regrading
- (c) Letter from postgraduate tutor or postgraduate dean

# HEADINGS AND LAYOUT TO BE USED IN PROPOSALS FOR ADDITIONAL SENIOR HOUSE OFFICER POSTS

## SHO APPLICATION

### 1. NHS Trust or Health Board

### 2. Specialty

(include sub-specialty, if appropriate)

### 3. Hospital(s)

3.1 Base

3.2 Others

### 4. Contract

4.1 Whole- or Part-time (give details if part-time).

4.2 Give the following information:

- (a) rota, partial or shift worked
- (b) average weekly hours on duty, including prospective cover if worked
- (c) estimate of average weekly hours worked
- (d) longest continuous period on duty
- (e) shortest rest period between duty, in hours
- (f) weekly job plan including on-call (recommended layout):

		Location	Work done
Monday	am pm		
Tuesday	am pm		
Wednesday	am pm		
Thursday	am pm		
Friday	am pm		
Weekend			
Other duties			

## **SHO APPLICATION**

**5. Other staff in unit(s): honorary and NHS**

**5.1 Consultant**

List by name; main location; contract (Whole Time/max Part Time/Part Time); Notional Half Day; and specialist interests.

**5.2 Non-consultant**

List all staff in unit(s) in non consultant grades, (associate specialist; staff grade; hospital practitioner; clinical assistant; Specialist Registrar; Senior Registrar; SHO; PRHO; and other.)

with Notional Half Day or sessions of each (as appropriate) and

indicate those posts which will be on the same rota, partial shift or shift as proposed post.

**6. Population served**

(include numbers and any special characteristics)

**7. Annual workload of unit(s)**

(Include appropriate performance indicators such as: staffed beds, throughput, new out-patients and emergencies).

**8. Stated case for additional SHO post**

Give reasons why staff or other career grade post is not suitable.

**9. Status of funding**

**10. Status of educational approval**

Detail educational opportunities including any rotational arrangements.

**11. Any other relevant information**

**Supporting documentation**

**Attach:**

- (a) Copy of the letter from the postgraduate dean giving educational approval.
- (b) Copy of a letter from the Health Board or main funder confirming the availability of funding.