

Academy of Medical Educators Annual Report

For the year ended 30 September 2020

Trustees' Report and
Unaudited Financial Statements

AOME
**ACADEMY OF
MEDICAL EDUCATORS**

IMPROVING CARE THROUGH TEACHING EXCELLENCE

Company Limited by Guarantee
Company Number 05965178; Registered Charity Number 1128988

Contents

	Page
Contents	1
Regulatory information	2
Trustees' Report and Statement of Trustees' Responsibilities	5
Strategy and the Future of the Academy	7
Review of Activities and Achievements 2019 - 20	8
Membership and Assessment	8
Professional Standards	10
Education and External Relations	14
Developing Medical Educators	17
<i>The British Student Doctor Journal</i>	17
Diversity	18
Financial Review	19
Statement of Trustees' Responsibilities	20
Independent Examiner's Report to the Council	21
Statement of Financial Activities	22
Balance Sheet	23
Notes to the Financial Statements	24



The Academy of Medical Educators is grateful to Cardiff University for its ongoing support.



Trustees and Directors

All members of the Academy in good standing are eligible to stand in the annual Council elections. The Academy is registered with Companies House and with the Charity Commission so Council members are both trustees and company directors. Meet our current Council!



Lynne Allery

Lynne is Reader and Director of Medical Education at Cardiff University and Programme Director for the MSc in Medical Education.

M



Dr James Ashcroft

James is an Academic Clinical Fellow in General Surgery at Addenbrooke's Hospital with the University of Cambridge. James was elected to Council in April 2020.



Professor Paul Baker

Paul is Deputy Postgraduate Dean HEE NW. He trained as a Geriatrician in the North West. Paul was re-elected to Council in April 2020.



Julie Browne

Julie has been continuously involved with the Academy since its inception. She is Senior Lecturer in Academic Practice at Cardiff University. Julie is Deputy Chair of Council.

Edu; ED; M; Po; PS



Kate Burnett

Kate is a medical graduate of St Andrews and Manchester University and works as a Urologist in Greater Manchester.

A



Professor Aidan Byrne

Aidan is a Consultant Anaesthetist and Honorary Professor at Swansea Medical School. He leads on the accreditation of courses for the Academy.

M; Po



Professor Nick Cooper

Nick is Associate Professor for Clinical Education at PUPSMD. He is chair of our Membership Committee and lead assessor. Nick was re-elected to Council in April 2020.

A; Edu; ED; M; Po; PS



Dr Angharad Davies

Angharad is Associate Professor and Honorary Consultant Microbiologist at Swansea University Medical School.

A; ED



Professor Alan Denison

Alan is Dean of Postgraduate Medicine, NHS Education for Scotland (North Region). He is co-chair of the AoME Professional Standards Committee.

A; Po; PS



Professor Louise Dubras

Louise is Foundation Dean of School of Medicine, Ulster University

A; Edu; ED; Po



Professor Andrew Grant

Andrew is Emeritus Professor at Swansea University. He is the Academy's Honorary Treasurer

A; Edu; M; PS



Professor Jacky Hayden CBE

Jacky is President of the Academy. She has a number of roles including Non-Executive Board Member at Plymouth Hospital NHS Trust.

Edu; ED; M; Po; PS



Dr Ricky Frazer

Ricky is a consultant oncologist at Velindre Cancer Centre specialising in acute oncology, melanoma and renal cancer.



Professor Adrian Freeman

Adrian was a Professor of Medical Education and Director of Assessments at Exeter University Medical School, now emeritus. He is President of the European Board of Medical Assessors (EBMA).



Professor Ibrahim Inuwa

Ibrahim is Professor of Anatomy at Mohammed Bin Rashid University of Medicine and Health Sciences, Dubai.



Dr Melvyn Jones

Melvyn is an Associate Professor at UCL Medical School, Head of Primary care teaching at St George’s and a GP. He is co-chair of AoME’s Professional Standards Committee. Melvyn was re-elected to Council in April 2020.

A; PS



Professor Liz Mossop

Liz is Deputy Vice Chancellor (Student Development and Engagement) at the University of Lincoln. She is a veterinary surgeon. Liz was re-elected to Council in April 2020.

Po; PS



Dr James Read

Jamie is the Academy’s Honorary Secretary or Registrar. His clinical role is as an Associate Specialist in Geriatric Medicine at University Hospitals Plymouth NHS Trust.

Edu; ED; PS; Po



Dr Gabriel Reedy

Gabe is a Senior Lecturer in Clinical Education and Director of Clinical Professions Education at King’s College London. He was chair of the Education Committee until July 2020.

A; Edu; Po



Dr Flora Smyth-Zahra

Flora is a dentist and Clinical Senior Lecturer at the Faculty of Dentistry, Oral and Craniofacial Sciences King’s College London.

Edu



Dr Claire Stocker

Claire is Phase 1 Lead for Aston Medical School MBCHB and Honorary Reader for the University Of Buckingham. Claire was elected to Council in April 2020. She took over the chair of the Education Committee in July 2020.

A; Edu



The Academy extends its heartfelt thanks for their service to **Professor Kamila Hawthorne, Professor Deborah Murdoch-Eaton and Professor Val Wass** who stood down from Council in April 2020

You can find more information about Council and its members on our [website](#).

Council members take roles on standing committees and working groups:
A = Assessor; Edu = Education; ED = Equality and Diversity; M = Membership; PS = Professional Standards; Po = Policy

You can find out more about the work done in all of these areas later in the report.

Information about standing for a role on Council is published in the members area of our website each autumn.

Regulatory Information

Company Secretary:

J Read

Registered Office:

Academy of Medical Educators,
2nd floor
Neuadd Meirionnydd,
Heath Park,
Cardiff CF14 4YS

Registered Number: 05965178

Charity Number: 1128988

Independent Examiners:

Kingston Smith LLP
Chartered Accountants
Devonshire House
60 Goswell Road
London EC1M 7AD

Bankers:

Nat West Bank plc
St Paul's Branch
Juxon House
98 St Paul's Churchyard
London EC4M 8BU



Trustees Report

The Trustees (who are also directors for the purposes of company law) present their report and the financial statements of the Academy of Medical Educators for the year ended 30 September 2020. The financial statements have been prepared in accordance with the accounting policies set out on pages 24 and 25, and comply with the applicable law, the Memorandum and Articles of Association and the requirements of the Charities SORP (Financial Reporting Standard (FRS) 102).

Objects and activities

Under its Articles of Association, the objects for which the Academy is established are the advancement of medical education for the public benefit in particular by:

- a) the development of a curriculum and qualification system;
- b) undertaking research for the continuing development of professional medical education; and
- c) the promotion and dissemination of best practice in medical education.

The Academy of Medical Educators is a professional organisation, working nationally and internationally, for all those involved in medical education – the education and training of students and practitioners in medicine including physician associates, dentistry, and veterinary science. It aims to provide leadership, promote standards and support all those involved in the academic discipline of medical education. Through its Professional Standards, which serve as a guide to curriculum development, the Academy provides a recognised framework so that those in education can demonstrate expertise and achievements in medical education through accreditation as a medical teacher to an agreed national standard.

Public benefit statement

The Council, comprising the Trustees of the Academy, has referred to the guidance in the Charity Commission's general guidance on Public Benefit when reviewing its aims and objectives and in planning the Academy's future activities. In particular, the Council considers how planned activities will contribute to the aims and objectives it has set.

The Trustees confirm that they have complied with the duty to have due regard to public benefit guidance published by the Commission, including the guidance 'Public benefit: Running a charity (PB2)' in exercising their powers and duties.

The Academy is founded on the recognition that the development and improvement of the training of medical practitioners will be to the benefit of the health of the general public. The Academy's activities in furtherance of the objects defined above directly address the maintenance and improvement of standards of medical training and practice, to the direct benefit of patients.

The Academy's activities are open to all who are able to benefit from them. Special rates are offered to students. Council does not consider there to be detriment from its activities or work. More detailed descriptions of the activities and the beneficial outcomes are contained in the Review of Activities in 2019/20 (below).

Structure and governance

The Academy of Medical Educators was instigated at an informal meeting of interested medical educators and leaders held at the Royal College of Physicians in January 2006. It was then founded in October 2006 as the professional standard setting body for medical educators in the United Kingdom, becoming incorporated as a company limited by guarantee under the Companies Act 1985 on 12 October 2006. Formal elections were held in October 2007 and in December 2007 the first President, Professor John Bligh was elected for three years. The Academy was registered as a charity with the Charity Commission for England on 2 April 2009.

The Academy is run by a Council of Trustees who are also the Directors of the Company. Members of Council are elected by the members of the Academy, with additional members who may be appointed by Council. From April 2020 Council comprised 21 elected members, including the President. Honorary Officers and chairs of committees and working groups were elected by Council drawn from their number. The Honorary Officers and Council set the strategic direction of the Academy. An Executive Committee (comprising the President, Honorary Officers and chairs of standing committees) is responsible for overseeing the financial and administrative management of the Academy. Four full Council meetings, a Council Strategy Day, and four Executive meetings were held during 2019/20.

In the elections in October 2019, confirmed at the AGM in April 2020, James Ashcroft, Paul Baker, Nick Cooper, Melvyn Jones, Liz Mossop and Claire Stocker, were elected to Council to serve for three years from April 2020. Council also invited Keith Lawrey to attend Council to provide additional professional expertise in legal affairs. We were delighted that David CA continued as our lay member.

The Academy staff team is made up of CEO Tony Carlisle and Administrative Officers Jodie Burnett Wren and Paul Yeboah-Afari. AoME is extremely grateful to Cardiff University for continuing to host the team which is normally based physically within the Centre for Medical Education at Cardiff University Medical School. Since March 2020 team members have been working from home due to the COVID19 pandemic.



The team is the central point of contact for the Trustees, and all other AoME members and partners. It provides administrative, secretarial and technical support across all areas of the Academy's activity, including giving help and advice to potential members, course leaders and other stakeholders, maintaining financial records and processes, providing management reports, and ensuring governance obligations are met.

During the summer of 2020 the Academy opened a dialogue with the Professional Standards Authority with a view to applying for accreditation. The Professional Standards Authority (PSA) is the UK regulators' regulator. It currently oversees the activity of 10 health and care regulators, including the General Medical Council, the General Dental Council, the General Osteopathic Council, the Nursing and Midwifery Council and the Health and Care Professions Council.

A working group was formed which began to consider carefully the PSA guidance on criteria for accreditation. It reported back to Council with the intention of surveying the wider membership. While many benefits to AoME and its members were identified, Council ultimately decided that the application could not be progressed at this time (in large part for financial reasons). Nevertheless, the guidance around policies and procedures will be extremely helpful to the Academy in ensuring its professionalism and the quality of its governance and AoME plans to establish a searchable register with its members' assent.

Risk

It remained to be seen at the start of the first lockdown in March 2020 what impact the pandemic would have on our colleagues in medical education. As we have become used to the new normal many of us have made changes, big and small, to the way we work, teach and live. The Academy believes the way in which medical education professionals have adapted does credit to our profession. The adaptations made, many of which involve technology that may previously have been unfamiliar, are here to stay. AoME is determined to play a role in supporting medical education professionals through these changes.

Despite the understandable risks we identified to our membership numbers and to our financial stability, our members have remained committed to the Academy's core values and the *Professional Standards*. Membership has risen during this time, which indicates our profession continues to value the recognition the Academy provides. The reduction in our deficit has been realised, although is not as great as we had hoped. The trustees are confident that the Academy remains a going concern and believe that the pattern is set for further steady growth over the medium term.

Strategy and the future of the Academy

In 2019 the Academy's Council had agreed three strategic objectives for the next three years:

- To increase respect and influence
- To maintain financial stability
- To increase membership

At its annual Strategy Day in February 2020 the Academy's Council reviewed current activities in light of these objectives and made recommendations and plans for improvements and new work streams that will help us to align better with them.

Focusing on the Academy's current position Council members took a realistic view of the organisation's finances, resources, membership numbers, existing relationships and the activities we are committed to; analysing our strengths, but also recognising the risks we face.

It was encouraging to look at all of the activities AoME had been involved with in 2019, including: Council and Executive meetings; meetings of the standing committees; conference planning and presenting awards; workshop delivery and exhibitions at many conferences in the UK and internationally; a key role at the Developing Excellence in Medical Education Conference (DEMEC); Recognising Teaching Excellence (RTE) and career development workshops across the UK; consultation responses and input on research projects. Not to mention our ongoing work recognising medical educators' achievements through our Membership and Fellowship and course accreditation schemes.

Council reached the following broad conclusions from the day:

Respect and Influence

Council agreed that it is essential we examine our relationships; nurturing existing ones and looking to make new connections in key areas. We enjoy the respect of many other organisations and in the past, they have made voluntary contributions to our work through the Corporate Partnership scheme. Many now choose to accredit courses through us, because they know this association will attract students. Regulatory bodies recognise that our Standards are a force for good in education. Council agreed the need to:

- Continue to engage with the GMC on Professional Standards
- Work with existing and new medical schools to help them see the advantages of embedding the Professional Standards in their recruitment and faculty management systems
- Ensure that those accrediting courses with us remain committed to the Standards, and promote them on our behalf, as well as identifying and engaging with leads of courses that are not yet accredited

- Strengthen our relationships with all partner bodies, including dental, veterinary and PA forums, and administrators and managers in medical education
- Aim to be the definitive voice on education issues within medicine and healthcare, and to continue to respond to appropriate consultations.

Finance

Recognising that 90% of the Academy's income comes from membership subscriptions our Council acknowledged that it would be difficult to increase our level of activity without increasing our income. Council agreed that protecting our existing income and finding new sources of income (or resurrecting older ones) is critical.

Membership

Membership has grown steadily over the past four years and our improved systems are enabling us to stabilise subscription income and control attrition rates. A significant increase in members will be essential for us in demonstrating our continued relevance for medical education professionals. The more members we have, the more opportunities we will have to influence the sector and to increase our level of activity to benefit those members.

AoME has a unique position in medical education in the UK. We are the only organisation that offers a robust mechanism for formal professional recognition for all those involved in the education of doctors, PAs, dentists and vets. Our influence is felt across NHS trusts, HEIs, and regulatory bodies. Our Standards were used as the basis for the programme at the third DEMEC conference in Manchester in December 2019, a major event for everyone involved in medical education in the UK.

We continue to offer our members a unique way of recognising their own commitment to excellence in medical education and the value of our Professional Standards as a benchmark for quality in education is increasing all the time. We engage with our members, our partners in other professional organisations, regulators, care providers and higher education institutions through involvement in many projects, plans and initiatives that contribute to the development and promotion of the Professional Standards; the accreditation of medical educators and courses; the provision of resources for medical educators; supporting the medical education profession; securing a sustainable and well managed organisation; and promoting patient-centred care in medical education.

You can read more about our progress towards our aims over the following pages.

Membership and Assessment

Chair's Report - Professor Nick Cooper



Membership applications

During the 2019-20 financial period the Academy's membership exceeded 1000

New Applications 1 October 2019 to 30 September 2020

Membership Category	Application approved	Subscription remaining unpaid
Associate Member	44	17 (39%)
Student Member	5	2 (40%)
Member	163	9 (6%)
Fellow	42	3 (7%)
Total all categories	254	31 (12%)

Only one application was rejected outright in the period. In most cases incomplete or inadequate applications are returned to applicants with the request to update or enhance the evidence supplied. The assessors have the ability to recommend Membership for an applicants whose skills and experience are not yet equal to the standards expected for Fellowship.

Renewal rates 1 October 2019 to 30 September 2020

Membership Category	Subscriptions due for renewal	Subscriptions renewed
Associate Member	30	14 (47%)
Student Member	2	2 (100%)
Member	355	272 (77%)
Fellow	137	118 (86%)
Total all categories	524	406 (77%)
All categories and previously lapsed who renewed following reminder		467 (89%)
All categories, previously lapsed, and newly admitted members in good standing		690* (132%)

*At April 2021, half way through the current 2020-21 financial period the comparable figure is already 650, which is a direct result of the efforts to make renewing subscriptions easy for members through regular reminders and the promotion of the direct debit scheme. Currently over 50% of members pay by direct debit or standing order.

The figures above demonstrate the perceived value of the Membership and Fellowship recognition schemes. The Academy is reviewing Associate membership benefits and through its newly formed Developing Medical Educators Group is looking at how to attract and support medical educators at the start of their careers.

The Academy's Assessment Team is made up of experienced Members and Fellows working at an appropriate level. In January 2020 the following were active Team members:

Nick Cooper (lead assessor); Tarig Ahmed; Sateesh Babu Arja; Anjan Banerjee; Julie Browne; Kate Burnett; Angharad Davies; Alan Denison; Louise Dubras; Andrew Grant; Jennifer Heathcote; Christopher Holland; Melvyn Jones; Mahzuz Karim; Ming Lee; Deborah Murdoch Eaton; Robert Namushi; John Sandars; Andrew Smith; Paul Stevens; Claire Stocker; Michael Vassallo; Ghada Zakout

Review of Fellowship Application Process

In 2019 AoME Council requested a review of the processes and outcomes of Fellowship applications.

The rationale for the review:

- Fellowship applications had been seen to decline somewhat over the last few years and fewer existing Members were progressing to Fellowship
- Formerly the process involved a natural benchmarking element, as assessors met regularly to discuss applications. While the process is overall more flexible some opportunities for benchmarking or calibration were felt to have been lost
- AoME wanted to ensure that its recognition scheme maintains credibility. The Academy's Council and Assessment Team need to be satisfied that the process it has is fit for purpose.

In February 2020 Professor Sean Hilton, former President of The Academy, was asked to provide a review which concluded with several recommendations and areas for discussion.

The Academy's Council was given the opportunity to comment on the report and the Assessment Team met in May 2020 to review the findings and agree actions and responses to them. There follows a summary of the key decisions and discussions at this meeting.

AoME will seek to:

- Enhance and improve guidance for both new applicants, and those progressing to Fellowship from Membership, through accessible information on the website and by developing a webinar to clarify the process
- Encourage Fellowship applications through website information and positive marketing
- Improve guidance to assessors to ensure experienced assessors are confident to mentor new assessors and new assessors have tools readily available
- Emphasise conflict of interest and monitoring processes, quality assurance and attendance at (online) training and benchmarking sessions
- Arrange a series of quarterly training and benchmarking sessions for assessors through Zoom
- Encourage new Fellows to become involved with the assessment process
- Design an adapted assessment process that supports experienced and new assessors working together
- Following improvements to processes investigate the possibility of external scrutiny

- Emphasise the importance of Fellowship as a recognition of length, breadth and depth of educational practice; completion of an MSc in Clinical/Medical Education or a PhD is not in itself sufficient for the automatic award of Fellowship and the current process of providing evidence against the *Professional Standards* is necessary
- Consider changes to the process of obtaining references. Dependent on future website developments two confidential references may be provided directly to the Academy (one of whom should be a Fellow of the Academy). Prior to website development to provide a framework within the current reference form as to the detail required.

Having last met in person in Birmingham on 18 December 2019, the Assessment Team began meeting quarterly in September 2020, with meetings arranged to autumn 2021. Work on guidance documents and enhanced communication of the benefits of Fellowship and the application process has begun.

Course accreditation

Again in the 2019/20 period those who had completed an AoME accredited course made up the vast majority of applicants for Membership, over 90% by September 2020. The difference in follow-on AoME applications between the courses is significant. AoME has begun discussions both internally and with course providers on making the application process for those who have completed courses even more straightforward. It is hoped that changes to the scheme will be announced in 2021.

Accreditation by AoME provides an independent validation of a course's quality judged against the Academy's Professional Standards. Anyone who has successfully completed the course will be able to apply for Membership of the Academy without the need to complete the full application form. Professor Aidan Byrne leads on the accreditation of courses, supported by Professor Jim Price.

In September 2020 there were 48 courses in the scheme. Five new courses joined and three renewed their accreditation. Our [website](#) lists all of the courses accredited with links to the course providers' own sites.

Professional Standards

Chair's Report - Professor Alan Denison and Dr Melvyn Jones



The Academy of Medical Educators developed and launched the first edition of the Professional Standards Framework for medical educators in 2009. The Standards and associated assessment processes provide a robust mechanism for formal professional recognition for all those involved in the education of doctors, dentists, veterinary scientists, physician associates and students of those disciplines. We think that these standards matter to medical educators and are a valuable tool in improving medical education for the benefit of patients. The Professional Standards were designed to enable all those involved in the delivery and management of medical education to:

- Identify the competencies required of medical educators who fulfil a wide variety of educational roles
- Benchmark individuals' educational performance against nationally agreed standards of good practice
- Identify professional development needs or develop existing skills
- Set objectives in performance and appraisal
- Assist with job planning for medical educators
- Recognise excellence in individual medical educators
- Develop frameworks for the recognition, approval and accreditation of medical educators
- Develop and quality assure training programmes and assessments to ensure they meet the needs of medical education professionals.

The current 2014 *Professional Standards for Medical Educators* are used by multi-professional educators and the Academy alike to underpin and empower personal and professional development as an educator. Membership or Fellowship of the Academy is an independent judgement that an educator is meeting these professional standards and is a valued and recognised esteem measure.

The Professional Standards Committee of the Academy includes experts across the continuum of education, and in 2019 proposed a revised, refreshed and expanded standards framework. This acknowledges the increasing breadth and depth of educational skills and behaviours required for sustainable and safe clinical care. The principal proposed changes are:

- The addition of Principal Fellowship, recognising the highest levels of strategic and systems leadership as an educator. Principal Fellowship holders will typically demonstrate senior leadership roles within and across systems. This is underpinned by a new (fourth) level of activity across all domains
- Renaming of the *Educational research and scholarship* domain to *Educational scholarship and evidence-based practice* acknowledging the rise in scholarship as a distinct entity from research
- An expanded suite of standards in *Educational management and leadership*, recognising the increasing complexity and importance of leadership in contemporary clinical education.

Every other standard has been scrutinised, refreshed and updated.

The proposed updated *Standards* are anchored within the scope of practice of the professional constituencies of the Academy. However, it is envisaged that they will also be of wide interest and relevance to other individuals and organisations with activity in, or oversight of healthcare education.

The Academy carried out a comprehensive consultation on the revisions to the *Professional Standards* lasting 37 days in June and July 2020. There follows a summary of the consultation, questions and responses.

Profile of respondents

In total 39 consultation responses were collected. 25 (64%) from individuals and 14 (36%) on behalf of organisations.

How was the consultation promoted?

The consultation survey was sent to 296 relevant stakeholder organisations (Medical, Dental, Physician Associate, Veterinary, Healthcare) and 864 AoME Members.

Questions and summary of responses

Q1: Have we identified the key reasons for the continued existence and development of the Professional Standards?

91% of respondents agreed.

Some respondents wished there to be greater clarity of the relationship between the new Professional Standards and the General Medical Council's process for Recognition and Approval of Trainers. The 2012 GMC Recognising and Approving Trainers Implementation Plan was underpinned by the original AoME Standards.

Some respondents noted that educators in Higher Education (and the institutions themselves) may prefer the 2011 UK Professional Standards Framework for teaching and supporting learning in higher education (Advance HE) to benchmark and support teaching. It should be noted that the parallel UKPSF applies to teaching and scholarship across all programmes in Higher Education, is not context specific, and in particular does not address the complexities of healthcare and patient safety.

“There is a clear rationale for the professional standards to help develop medical education”

Q2: Do the core values adequately reflect the shared values of medical educators?

80% of respondents agreed. 14% felt something was missing and 6% felt something should be removed.

Respondents were generally supportive of the core values. Specific comments focused on the need for the core values to better reflect the equality and diversity agenda, multi-professional education, and that the *Standards* should be updated on a regular basis in light of these issues.

Q3: Does Domain 1 *Design and planning of learning activities* reflect the skills, knowledge and behaviour of medical educators in this domain of practice?

89% of respondents agreed that Domain 1 did reflect these skills knowledge and behaviour. 8% felt something was missing and 3% that something should be added.

Specific comments included:

- that this domain did not sufficiently capture the impact of teaching (i.e. outcomes) and that the *Standards* instead considered approaches and attitudes. This was exemplified by the comment “...you could be at level 3 or 4 but still not do a very good job of teaching.”
- the phrase “learning outcomes” should be rephrased to wording that is broader in reach e.g. aims and objectives; goals and action plans; entrustable professional activities
- it should be made clearer that the levels correspond to the different tiers of Academy recognition.

Q4: Does Domain 2 *Teaching and supporting learners* reflect the skills, knowledge and behaviour of medical educators in this domain of practice?

85% respondents agreed, 12% felt that something was missing and 3% that something needed removing.

Comments included a call for more explicit reference to the essential role of educational supervisors in learner well-being, reflective practice and mentoring of students.

Q5: Does Domain 3 *Assessment and feedback to learners* reflect the skills, knowledge and behaviours of medical educators in this domain of practice?

82% were in agreement. 12% said something was missing and 6% that something should be removed.

Comments and suggestions included:

- that selection and recruitment might fit better within the management and leadership domain
- that while equality and diversity was well captured within recruitment and selection, there could be more explicit acknowledgement of the issues around and the approaches to differential attainment
- that the role of workplace based assessments should be mentioned, to highlight that the *Standards* apply to this type of assessment, as well as high stakes assessments.

“I believe that your standards are an important aspect of the profession of medical education. In theory, they provide a level playing field upon which to measure oneself and strive for improvement. As the profession progresses and evolves, I see a greater role for them in the future.”

Q6: Does Domain 4 *Educational scholarship and evidence-based practice* reflect the skills, knowledge and behaviour of medical educators in this domain of practice?

There was general agreement (86%) with this question. Specific issues raised were:

- widening scholarship to writing course materials was a positive step and could improve applications
- the pursuit of formal qualifications in medical education or contributions to educational research may be a disincentive to considering membership of the Academy
- The development of new educational theories/practices is rare, and their uptake by others even rarer. It was suggested that could even be seen as level 4 activity.

Q7: Does Domain 5 *Educational management and leadership* reflect the skills, knowledge and behaviour of medical educators in this domain of practice?

91% of respondents agreed. Suggestions were to include a commitment to interprofessional learning and working, responsibilities as a role model and demonstrating training and impact in equality and diversity

Q8: What do you think has been the impact of these standards on the profession? What will be their impact in future?

Many expressed the view that the *Standards* are a useful benchmark; that they have "... helped to professionalise medical education, and will continue to do so". There was some concern that awareness of the *Standards* is limited, and that the application process could be perceived as onerous and may act as a disincentive, particularly at the entry levels.

Q9: What do you think has been the impact of these *Standards* from the perspective of patient safety? What will be their impact in future?

While some respondents acknowledged that demonstrating impact of the *Standards* in themselves would be difficult, a larger number described how they could indirectly have a positive impact, with benefits for patient safety, improved educational practice, and professionalisation and esteem of educators.

Some respondents stated that the link between the Academy *Standards* and GMC processes (recognition and approval of trainers) should be stronger.

"When these standards came out in 2014, this was the first time, the necessary values and skills for medical educators had been delineated."

"These standards have had a positive impact on patient safety because they promote reflection on actions whilst aiming to provide the best care for our patients. The continued education of the medical workforce will always have a positive impact on and always improve patient safety."

Q10: What do you think has been the impact of these standards from the perspective of equality and diversity? What will be their impact in future?

Comments included:

- that the standards "promote mutual respect and tolerance", key to an E&D agenda
- that the high entry standard may deter applicants particularly from a wider range of backgrounds and where finance is an issue
- that educators are well placed to provide tailored support and guidance for trainees with protected characteristics and to promote inclusive learning environments, and this should be more explicitly required within the standards.

"These standards promote mutual respect, good communication and tolerance in the team and these are important qualities for equality and diversity"

Q11: Do you have any further comments about the Revisions to the Academy of Medical Educators' Professional Standards for Medical Educators.

Additional comments were largely positive, across all sectors taking part in the consultation, indicating that the standards have a relevance and resonance across professions and contexts.

The proposed Principal Fellowship was welcomed, and Level 4 descriptors were felt to be helpful and reflective of the complexity and richness of contemporary senior activity in medical education.

There was a call for illustrative examples of roles/activities that would typically be associated with each AoME category of recognition.

Respondents felt that the revision is an opportunity for the Academy to engage more closely with the GMC and other relevant healthcare regulators that should not be missed.

"This is an exciting revision, and will help to drive up standards through an appropriate process of recognition and excellence"

Conclusion and next Steps

The Academy of Medical Educators' Professional Standards Committee is grateful to all individuals and organisations that took the time to contribute to this consultation.

In light of the comments made the Committee has made further revisions to some sections of the *Standards*.

Notably the new version will refer to how the AoME *Standards* relate to the GMC standards for trainers, as well as equivalence with Advance HE recognition levels.

The Committee considered comments around the quality of teaching of those in leadership roles and agreed that if teaching standards are not good enough the appointment process needs not be reviewed and the *Professional Standards* can be helpful in this regard. It is the Academy's view that where opportunities for teaching do not present themselves as easily, leaders should be proactive in creating them.

It will be made clear that individuals will be able to apply for recognition at the new principal level without having achieved lower levels first.

To further clarify for applicants (as well as for assessors) which Standard levels correspond to which level of recognition the Professional Standards Committee will work with the Membership Committee and Assessment Team to improve guidance.

The Committee considered the role of an educational supervisor in identifying and addressing well-being issues. While the role is not a pastoral one, they need to have the skills and language to deal with issues, in both undergraduate and postgraduate contexts. The new *Standards* signpost well-being issues; teachers adapting to learners' needs and the impact of workplace and home environment issues on the ability to learn, ensuring the wording is applicable across all relevant professions. The *Standards* have also been reviewed to ensure reflective practice and mentoring are adequately covered.

The Committee agreed that assessors would expect evidence of developing practices and insight in teaching, but theories might be rarer at the lower levels. They commented that an application is looked at holistically and is not a tick box exercise, so evidence will help the application but lack of it may well be mitigated in other areas.

Further work has been done to ensure that AoME's commitment to the Equality Diversity and Inclusivity agenda is appropriately reflected through the language of the revised *Standards*, specifically in the *Core Values*. The relevant areas of the *Standards* have also been revised to ensure the inclusion of interprofessional education.

The Academy of Medical Educators' Council has agreed that consultation responses indicate AoME should take forward the third level of recognition - Principal Fellowship. The next step is to seek the wider agreement of AoME's membership at its Annual General Meeting.

The launch of a revised set of *Standards* presents a number of opportunities for the Academy and for the healthcare education workforce. AoME will endeavour to engage with all stakeholders in medical education as part of a campaign to bring the *Standards* to a greater level of awareness. It is the Academy's ambition that its *Professional Standards for Medical Educators* become a key tool for recruitment, benchmarking and appraisal across all relevant areas of healthcare education, and welcomes the opportunity to discuss with leaders and policy makers how they can support the aim of excellence in patient care through excellence in teaching.



Education and External Relations

Outgoing chair of Education Committee - Dr Gabriel Reedy

Incoming chair of Education Committee - Dr Claire Stocker

Chief Executive Officer - Tony Carlisle



As usual the Academy began the 2019 - 2020 period with a varied and developing schedule of events, educational opportunities, conferences and engagements with members, partners and stakeholders.

Tony Carlisle was very pleased to be invited to the *Physician Associate Schools Council* meeting in Worcester on 11 October 2019. Supported by Nick Cooper, AoME's Membership Committee chair and also a PASC member, he gave an introduction to the Professional Standards and the AoME recognition process, making some great links with PA School leaders and representatives from the PA Federation.

At Imperial College London on 16 October, the President addressed a group of post-core junior doctors doing a Clinical Teaching Fellow year (not yet having applied for their CT) with an interest in Medical Education. Many of the audience were undertaking the Imperial PGCertificate in Clinical Teaching which is accredited by the Academy, and were keen to know more about the benefits of AoME recognition.

Professor Hayden also presented at the Faculty of Medical Leadership and Management (FMLM) *Leaders in Healthcare* event from 4-6 November in Birmingham. She also joined the planning Committee for the 2020 conference.

Tony Carlisle took the AoME exhibition stand to the Medical University of Łódź, Poland for the European Board of Medical Assessors' (EBMA) conference *New Approaches to Assessment in Health Professions Education* 7-10 November.

Paul Yeboah Afari attended Health Education and Improvement Wales' (HEIW) *Sharing Training Excellence in Medical Education* (STEME) Conferences for secondary care medical trainers in Swansea on 2 and 3 September and in Bangor on 8 November. The overarching theme for the two events was *Learning and Working Together*. It provided an ideal opportunity to promote AoME's work supporting trainers in Wales.

On 28 November Ricky Frazer spoke to staff, including Clinical Fellows, at the Aneurin Bevan University Health Board. ABHB is keen to promote the Academy and through our Professional Standards wants to make CF posts more attractive.

The third *Developing Excellence in Medical Education Conference* (DE-MEC) took place on 2-3 December in Manchester. Jacky Hayden, Julie Browne and Tony Carlisle represent AoME on the planning committee for the event. Sessions were grouped in to themes that mapped to our *Professional Standards* and we were able to engage with members, potential members and partners at our exhibition stand. AoME hosted the **Calman Lecture** at the end of the first day of the conference. The speaker was Dr David A Ross, Associate Professor, Department of Psychiatry, Yale School of Medicine, New Haven, USA, and his fascinating lecture was entitled *Integrating Neuroscience into 21st Century Medical Education: Lessons from the National Neuroscience Curriculum Initiative*



The President was delighted to introduce Dr Ross and to confer on him the award of **Honorary Fellowship**. Also receiving Honorary Fellowship was Dame Clare Marx, Chair of the General Medical Council.

We congratulated a number of new Members and Fellows who attended the evening to receive their certificates from the President and Registrar.

On 6 January 2020 a group of early career educators from medical, dental, and physician associate backgrounds were invited to attend a *Vision Day*. Facilitated by Kate Burnett, the day focused on exploring the needs and expectations of those starting out on a career in medical education and looked at how AoME can support these through networks and resources. The day resulted in a greater involvement in Academy activities by early career educators and representation of the group at Council level.



COPMeD (Conference of Postgraduate Medical Deans) invited AoME to host a stand at its careers conference at the Sage Centre in Gateshead on Fri 28 February.

In the autumn/winter 2019 Julie Browne, Ricky Frazer and Tony Carlisle were invited to speak to the local faculty of trainers from the junior medical staff at the Cardiff and Vale University Health Board, about the benefits of AoME recognition and to give tips and advice on how to apply. As part of the group's involvement with teaching the Board encourages them to apply for AoME Membership and supports applications from individuals who deliver ten formalised teaching sessions throughout a year. Our connection with this very enthusiastic group sowed the seed for the *Medical Educators Day 1* that took place in Cardiff in March 2020. This early career member-led one day conference featured keynote speakers Professor Ian Collings, HEIW and Dr Jamie Read, University Hospitals Plymouth NHS Trust, workshops presentations and posters.



Plans for the Academy's own annual spring meeting were disrupted by the onset of the coronavirus pandemic. We took the decision to postpone *Learning Together for Patient Care*, which was due to take place in Nottingham on 21 April, until we had a better understanding of the impact of the changes the virus would bring. The lockdown and social distancing measures put in place across all UK nations were more extensive and longer lasting than anyone anticipated, and in the medium term we have decided like many other organisations to focus on providing accessible support and virtual resources for our community. The conference will now be held on a virtual platform in autumn 2021.

Early in the first lockdown, the Academy was invited to join a group of senior educators led by Health Education England which identified a group of retired medical educators who were able to contribute to medical education during the pandemic. The Academy was delighted by the response from our Members and Fellows to help with educational activity. This enabled educational activity to continue during difficult times.

Professor Hayden, as President of AoME opened the Health Leadership Academy Conference in June, one of the early virtual conferences. The Academy was delighted to see so many early careers educators coming together to produce an effective virtual conference.

AoME enthusiastically supported its partners' virtual offerings including the AMEE (the Association for Medical Education in Europe) conference where we had a virtual exhibition booth and enjoyed interacting with delegates from around the world, and the innovative EBMA (European Board of Medical Assessors) *Past, Present and Future Assessment in Medical Education*, which began in September 2020 with events continuing until March 2021

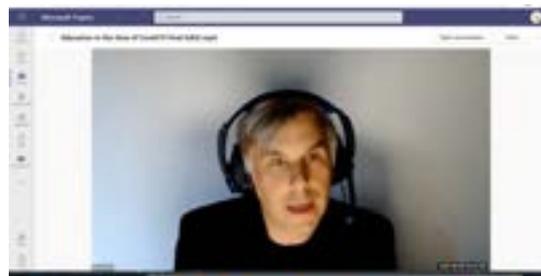


The President and Chief Executive attended the online *Supporting International Doctors in the NHS* conference on 11 September. It was a great opportunity to try to better understand the experience of those coming from other countries to live and work in the United Kingdom and to promote the benefits of gaining recognition for the teaching you bring.

The Academy began its own programme of virtual events with a series of webinars entitled *Education in the Time of COVID19* delivered in partnership with Swansea University Medical School, on 14, 16 and 30 September.

The sessions included

- Maintaining the standards of educational activities when methods of delivery have to change
- The role of *Professional Standards* in maintaining educational quality
- Sharing experience of having to change modes of delivery
- Applying webinar content to your institution/course/module requirements



We are grateful to Professor Andrew Grant, Professor Phil Newton and Dr Jamie Jones from Swansea University, and Dr Adam Crewe Hywel Dda University Health Board, for their expert input.

(The session was also repeated as part of FMLM's *Leaders in Healthcare* conference in November 2020.)



Education in the Time of COVID19

www.medicaleducators.org

In July 2020 Dr Gabe Reedy stood down as chair of the Education Committee and was succeeded by Dr Claire Stocker. The Committee took the opportunity at this handover to review its own terms of reference to better reflect current operational thinking, the Academy's overall strategic objectives, resource availability and finances.

The Academy of Medical Educators exists to provide leadership, promote standards and support all those involved in the academic discipline of medical education. In pursuit of these goals, the Education Committee provides leadership in the planning of all AoME educational activity, including our annual conference, winter event and Calman lecture; advises on educational content for other AoME events and AoME contributions to partners' initiatives. It liaises with Academy Council and its sub-committees and with other national and international organisations in medical education to ensure best use of resources and minimum duplication of effort in the provision of education for medical educators.

The Education Committee also fully embraces AoME's commitment to providing equality of opportunity for all of its members, endeavouring to listen to and understand the needs of the groups that make up its membership and the wider medical education community; not simply declaring its support for minority and under-represented groups, but actively addressing the challenges they face and standing with them against prejudice.

In to the 2020/21 period we have plans for a number of initiatives with a focus on promoting the recognition of teaching excellence to support faculty development.

These include the *Interrobang?!* series of three microconferences in partnership with a group of early career educators enthusiastic about the future of inter-professional teaching and learning; a number of one off webinars addressing current issues important to medical educators, and of course plans for our own main conference. We look forward to working with our partners at ASME, AMEE, EBMA, and with the GMC and the four nations' statutory medical education bodies, notably as part of the DEMEC planning committee.



All of these initiatives are dependent upon available resources and budgets and the alignment of values. The Education Committee seeks to ensure all projects promote the three main strategic priorities of the Academy:

1. Financial viability (including staff resources)
2. Protecting and growing our reputation
3. Increasing our membership.



Developing Medical Educators

Much of AoME's activity in the 2019 - 2020 period involved medical and healthcare educators towards the beginning of their careers. It is clear to the Academy that the continuing professionalisation of medical education as a discipline is making it a more and more attractive and competitive career option. With many applications coming from younger educators through the accredited course route to Membership, the Academy is ideally placed to support junior educators who choose to take this path. A significant group of members has coalesced through activities over the last two years including the *Clinical Teaching Fellows Forum*, *Interrobang?!* committee and the *Cardiff Medical Educators Day* committee, and a new group has emerged. The *Developing Medical Educators Group* has been formally recognised by Council and will play an active role across all committees from 2021, working particularly closely with the Education Committee to steer events and resources targeted at its own demographic.



The British Student Doctor Journal

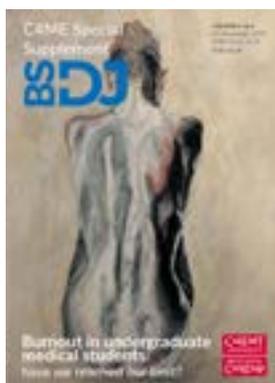
The [British Student Doctor](#) is a high quality, open access, biannual, peer-reviewed, general medical journal, which publishes articles written primarily by medical students. In addition to publishing original research and systematic reviews, it also provides a platform to medical students to express original thought and reflections on clinical practice, student life and medical education.

All content is fully open access, available without subscription and with no authorship charges. All articles published in *The British Student Doctor* go through a rigorous peer-review process, led by its student editorial team. The governance of the journal is overseen by the faculty advisory board, and the journal is published by Cardiff University Press and funded by Cardiff University School of Medicine.

The journal is a publication of The Foundation for Medical Publishing, a charitable incorporated organisation registered in England and Wales (1189006), itself a subsidiary of the Academy of Medical Educators. *The British Student Doctor Journal* is proud to be the official journal of the Academy of Medical Educators.



The British Student Doctor is an accredited member of COPE (The Committee on Publication Ethics), reflecting the journal's rigorous commitment to editorial best practice.



During the period October 2019 to September 2020 the BSDJ published two issues as well as a special supplement authored by intercalating medical students at Cardiff University School of Medicine. The editorial, written by Julie Browne and Professor Steve Riley, Head of the School of Medicine, is entitled: *Intercalating medical students: the future is in their hands*.

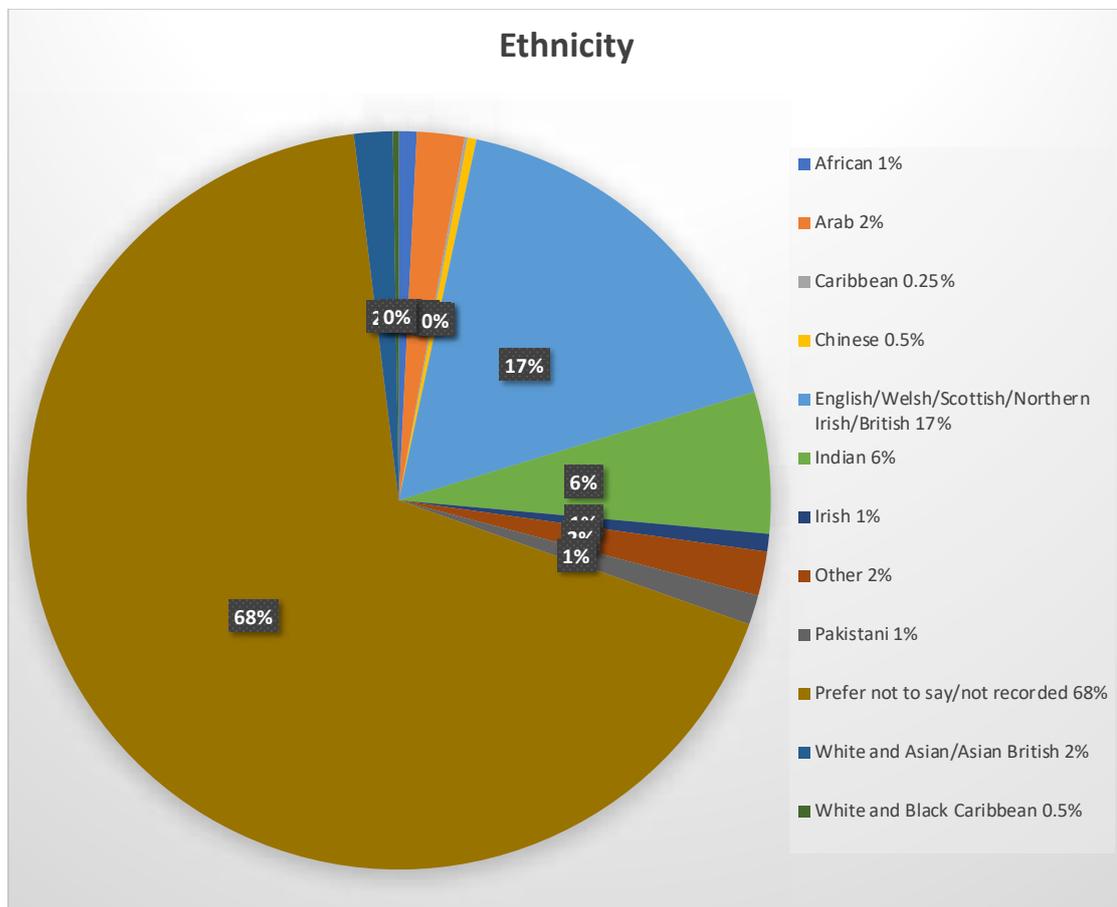
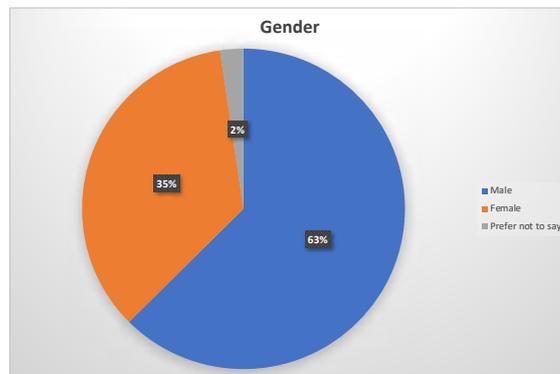
The latest issue as well as a complete archive is available at the journal's own [website](#).

Diversity

The Academy of Medical Educators was developed to advance medical education for the benefit of the public through the development of a *Professional Standards* framework and qualification systems and the promotion and dissemination of current best practice in medical education. Acting in full accordance of its accountability to the Equality Act of 2010, the Academy celebrates, values and seeks to support its diverse staff, Members and Fellows in its day-to-day work; shaping policy, delivering services and enhancing the overall aims and standing of the Academy.

The Academy is committed to examining and improving its active promotion of equality, diversity and inclusivity throughout its spheres of influence. There is certainly diversity within AoME's membership, but we are aware that we have not done enough in the past to record and monitor that representation. In 2021 the Academy will seek to improve the data it holds on its members with a view to redressing imbalances and it will try harder to consult with its members to ensure that our offering is relevant and fair to all.

Our Membership



Financial Review

Despite the additional challenges thrown up by the pandemic which curtailed conference activity from March 2020, including our main spring meeting, winter meeting and the second *Clinical Teaching Fellows Forum* event, the Academy has achieved its goal of reducing the deficit experienced in the previous two financial periods. Moreover, while the Academy has relied almost entirely on membership subscriptions and anticipated that members, particularly those on the front line of the fight against COVID19, might not renew as a priority, this has not been the case. Membership and income from membership have increased and the means by which we remind members and collect subscriptions has become more efficient. The accounts show a deficit of £26,084 (2019: deficit of £36,154).

Expenditure was also reduced in the period. Conference activity usually makes a net surplus for the Academy, but other meeting expenses have been saved with all meetings taking place online since March 2020, and further staff and trustee travel expenses not being incurred since then. There has of necessity been some capital expenditure on equipment required for staff to work at home, but this has been kept to a minimum. Once again we are grateful to Cardiff University for facilitating the move to home working and supporting staff with additional equipment and resources. The Academy has not commissioned any IT development work, postponing a website refresh until more certain times. Ongoing website and assessment portal maintenance has of course been necessary.

Reserves

Overall fund balances carried forward stand at £104,090 (2019 £130,174)

As agreed in 2014, free reserves, (unrestricted funds in excess of amounts invested in fixed assets,) should be held which amount to at least six months expenditure. On this basis there would be a requirement for free reserves of around £93,785. At the year-end total free reserves were £104,090.

Future developments

As we have seen AoME's membership continues to grow steadily and the accredited course scheme provides a solid platform for recruiting members in the earlier stages of their careers. We will work with our course provider partners to ensure that the scheme represents value for them and those undertaking courses, reviewing the path from course completion to Membership and ensuring we communicate the benefits of AoME recognition as part of the same journey to excellence in medical education.

In April 2020 the Academy's Council chose to defer a planned rise in subscription rates across all membership categories (with the exception of student). We felt that making such a change during the COVID 19 pandemic would be unreasonable on our members. The rise was implemented in January 2021 with all subscriptions adjusted by approximately 10%. Academy membership fees have not increased since 2010. In addition, in March 2016 rates were simplified with all Members and Fellows paying either the higher or lower rate depending on salary. This streamlining resulted in an overall reduction in subscription costs.

We have identified four key issues affecting membership and income levels on which to focus:

1. The importance and potential of the accredited course scheme and how we can make changes to make it even more successful
2. The transition to the virtual world and our need to focus available resources to take full advantage of the opportunities offered
3. Improving the way we plan, communicate and operate to make best use of all of our staff and volunteer resources
4. The revised *Professional Standards* provide us with a huge opportunity both to promote and grow the Academy and as a tool to help the next generation of health and social care professionals.



Professor Jacky Hayden CBE,
President

Professor Andrew Grant
Honorary Treasurer



Statement of Trustees' Responsibilities

The Trustees (who are also Directors of The Academy of Medical Educators for the purposes of company law) are responsible for preparing the Trustees' Report and the financial statements in accordance with applicable law and United Kingdom Accounting Standards (United Kingdom Generally Accepted Accounting Practice.)

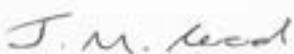
Company law requires trustees to prepare financial statements for each financial year which give a true and fair view of the state of the affairs of the charitable company and of the outgoing resources and application of resources, including the income and expenditure, of the charitable company for that period. In preparing these financial statements, the trustees are required to:

- select suitable accounting policies and then apply them consistently
- observe the methods and principles in the Charities SORP
- make judgements and estimates that are reasonable and prudent
- state whether applicable UK Accounting Standards have been followed, subject to any material departures disclosed and explained in the financial statements
- prepare the financial statements on the going concern basis unless it is inappropriate to presume that the charitable company will continue in business.

The Trustees are responsible for keeping proper accounting records that disclose with reasonable accuracy at any time the financial position of the charitable company and enable them to ensure that the financial statements comply with the Companies Act 2006. They are also responsible for safeguarding the assets of the charitable company and hence for taking reasonable steps for the prevention and detection of fraud and other irregularities.

This report has been prepared in accordance with the special provisions of Part 15 of the Companies Act 2006 relating to small companies.

By Order of the Board



21 April 2021

Dr J Read
Company Secretary



Independent Examiner's Report to the Council of The Academy of Medical Educators

I report to the charity trustees on my examination of the accounts of the Company for the year ended 30 September 2020.

Responsibilities and basis of report

As the charity's trustees of the Company (and also its directors for the purposes of company law) you are responsible for the preparation of the accounts in accordance with the requirements of the Companies Act 2006 ('the 2006 Act').

Having satisfied myself that the accounts of the Company are not required to be audited under Part 16 of the 2006 Act and are eligible for independent examination, I report in respect of my examination of your charity's accounts as carried out under section 145 of the Charities Act 2011 ('the 2011 Act'). In carrying out my examination I have followed the Directions given by the Charity Commission under section 145(5) (b) of the 2011 Act.

Independent Examiner's Statement

I have completed my examination. I confirm that no matters have come to my attention in connection with the examination giving me cause to believe:

- 1) accounting records were not kept in respect of the Company as required by section 386 of the 2006 Act; or
- 2) the accounts do not accord with those records; or
- 3) the accounts do not comply with the accounting requirements of section 396 of the 2006 Act other than any requirement that the accounts give a 'true and fair view which is not a matter considered as part of an independent examination; or
- 4) the accounts have not been prepared in accordance with the methods and principles of the Statement of Recommended Practice for accounting and reporting by charities.

I have no concerns and have come across no other matters in connection with the examination to which attention should be drawn in this report in order to enable a proper understanding of the accounts to be reached.

Shivani Kothari, FCCA. DChA
For and on behalf of Moore Kingston Smith LLP,

Devonshire House
60 Goswell Road
London EC1M 7AD

Date:

The Academy of Medical Educators
Statement of Financial Activities
(incorporating the Income and Expenditure account)
For the year ended 30 September 2020

	Notes	2020 Unrestricted Funds	2020 Restricted Funds	2020 Total Funds £	2019 Total Funds £
Income					
Voluntary Income					
Gifts in Kind	4	30,000	-	30,000	30,000
Charitable activities					
Membership subscription		104,538	-	104,538	95,897
Annual Conference and educational activities		5,957	-	5,957	26,003
Total Income		<u>140,495</u>	<u>-</u>	<u>140,495</u>	<u>151,900</u>
Expenditure on:					
Expenditure on raising funds		50,948	-	50,948	49,629
Charitable Activities					
Professional standards & regulation		40,759	-	40,759	39,703
Educational activities		74,872	-	74,872	98,722
Total Expenditure	3	<u>166,579</u>	<u>-</u>	<u>166,579</u>	<u>188,054</u>
Net (Expenditure)/Income	2	<u>(26,084)</u>	<u>-</u>	<u>(26,084)</u>	<u>(36,154)</u>
Transfers between funds					
Gross transfers between funds	10/11	-	-	-	-
Net movement on funds		<u>(26,084)</u>	<u>-</u>	<u>(26,084)</u>	<u>(36,154)</u>
Funds as at 1 October 2019		130,174	-	130,174	166,329
Fund balances carried forward as at 30 September 2020	10/11	<u>104,090</u>	<u>-</u>	<u>104,089</u>	<u>130,174</u>

All activities in the year were attributable to continuing operations.

The Academy of Medical Educators

Balance Sheet as at 30 September 2020

	Note	2020 £	2020 £	2019 £	2019 £
Fixed Assets					
Intangible fixed assets	6		13,154		14,653
Tangible fixed assets	7		2,320		-
			15,474		14,653
Current Assets					
Debtors	8	4,716		690	
Cash at bank and in hand		118,336		145,105	
		123,052		145,795	
Creditors: Amounts falling due within one year					
	9	(34,436)		(30,274)	
Net Current Assets			88,616		115,521
Total Assets less current liabilities			104,090		130,174
Funds					
Restricted funds	11		-		-
Unrestricted funds	10		104,090		130,174
			104,090		130,174

These financial statements have been prepared in accordance with the provisions applicable to companies subject to the small companies' regime.

For the financial year ended 30 September 2019 the company was entitled to exemption from audit under section 477 of the Companies Act 2006 relating to small companies.

The members have not required the company to obtain an audit of its financial statements for the year in question in accordance with section 476 of the Companies Act 2006.

The directors acknowledge their responsibility for complying with the requirements of the Act with respect to accounting records and the preparation of the financial statements.

Approved and authorised for issue by the Board on
Signed on their behalf by:



J Hayden
Trustee

21 April 2021

Company Number 05965178

The Academy of Medical Educators

Notes to the Financial Statements

For the year ended 30 September 2020

1 Accounting Policies

Company information

The Academy of Medical Educators is a charity limited by guarantee and incorporated in England and Wales. The registered office is Neuadd Meirionnydd, Heath Park, Cardiff, CF14 4YS.

Accounting convention

The financial statements have been prepared in accordance with the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS 102), published on 16 July 2014. The Charitable Company is a public benefit company for the purposes of FRS 102 and therefore the charity also prepared its financial statements in accordance with the Statement of Recommended Practice applicable to charities preparing their accounts in accordance with the Financial Reporting Standard applicable in the UK and Republic of Ireland (The FRS 102 Charities SORP), the Companies Act 2006 and the Charities Act 2011.

The financial statements are prepared in sterling, which is the functional currency of the company. Monetary amounts in these financial statements are rounded to the nearest pound.

Going Concern Basis

The financial statements have been prepared on a going concern basis.

Having carried out a detailed review of the Charity's resources and the current economic challenges facing both the Charity and its members the Trustees are satisfied that the Charity has sufficient cash flows to meet its liabilities as they fall due for at least one year from the date of approval of the financial statements.

Further, the Trustees have considered the current Covid-19 pandemic and its effect on the charity as a going concern. As a result of their review, the Trustees deem the charity to continue to be a going concern.

Critical Accounting Estimates and Judgements

In the application of the Charity's accounting policies, the board is required to make judgements, estimates and assumptions about the carrying amount of assets and liabilities that are not readily apparent from other sources. The estimates and associated assumptions are based on historical experience and other factors that are considered to be relevant and are reviewed on an ongoing basis. Actual results may differ from these estimates.

There are two critical estimates included within the accounts. The first is depreciation and amortisation; the rate of depreciation charged on tangible fixed assets (and amortisation on intangible fixed assets) is based on the estimated useful life of the asset and this is reviewed annually. The other critical estimate is the value of gifts in kind which are estimated based on the cost of acquiring the gift on the open market.

Incoming resources

Membership fees

Membership fees are renewable annually and are recognised on a receipts basis.

Grants receivable

Grant are recognised when receivable, income is carried forward at the year end, as restricted fund, where amounts have not been fully spent in the year.

Sponsorship and Other income

Sponsorship and Other income is recognised when it is received.

Resources expended

Cost of generating funds are those costs incurred in furthering the name of the charity.

Charitable activities comprises all expenditure directly relating to the objectives of the charity.

All expenditure is included on an accruals basis and is recognised when there is a legal or constructive obligation for payment to be made. Support costs are allocated against direct costs on a staff time basis.

The Academy of Medical Educators
Notes to the Financial Statements
For the year ended 30 September 2020 (Continued)

Gifts in kind

Where services are provided to the charity as a donation that would normally be purchased from suppliers, this contribution is included in the financial statements as an estimate based on the value of the contribution to the charity. Donated services and facilities are discussed in note 4.

Intangible assets

The coat of arms costs are not amortised as these are expected to be of continued long term benefit to the organisation.

The website and software costs are stated at cost less amortisation and impairment. Amortisation is provided at rates calculated to write off the cost of these assets, less their estimated residual value, over their expected useful lives on the following basis:

Website	33.33% Straight line
Software	33.33% Straight line

Tangible Fixed Assets

Fixed assets are capitalised where the item costs exceed £500. Depreciation is provided to write off the cost of the Fixed Assets over their estimated useful lives at the following annual rates:

Fixtures, fittings and equipment	15% Straight line
Computer equipment & website	33.33% Straight line

Fund accounting

Unrestricted funds comprise those funds which the trustees are free to use for any purpose in furtherance of the charitable objects.

Restricted funds are funds which are to be used in accordance with specific restrictions imposed by the donor.

Financial Instruments

Cash and Cash Equivalents

Cash and cash equivalents include cash at banks and in hand and short term deposits with a maturity date of three months or less.

Debtors and creditors

Debtors and creditors receivable or payable within one year of the reporting date are carried at their at transaction price. Debtors and creditors that are receivable or payable in more than one year and not subject to a market rate of interest are measured at the present value of the expected future receipts or payment discounted at a market rate of interest.

The Academy of Medical Educators
Notes to the Financial Statements
For the year ended 30 September 2020 (Continued)

2 Net Incoming/(Outgoing) Resources

		2020	2019
		£	£
The net incoming/(outgoing) resources for the year is stated after charging:			
Depreciation and amortisation		1,701	8,719
Independent examiner's fee	<i>Current year</i>	4,656	4,615

3 Total Expenditure	Direct Costs	Support costs (note 3b)	Total 2020
	£	£	£
Cost of Generating Funds			
Advertising & PR	-	20,379	20,379
Website Costs	-	30,569	30,569
Charitable Activities (note 3a)	3,544	112,087	115,631
	<u>3,544</u>	<u>163,035</u>	<u>166,579</u>

Total Expenditure	Direct Costs	Support costs (note 3b)	Total 2019
	£	£	£
Cost of Generating Funds			
Advertising & PR	-	19,852	19,852
Website Costs	-	29,777	29,777
Charitable Activities (note 3a)	29,241	109,184	138,425
	<u>29,241</u>	<u>158,813</u>	<u>188,054</u>

3a Charitable Activities	Direct Costs	Support costs (note 3b)	Total 2020
	£	£	£
Professional standards and regulations	-	40,759	40,759
Educational activities	3,544	71,328	74,872
Credential in Medical Education		-	-
	<u>3,544</u>	<u>112,087</u>	<u>115,631</u>

Charitable Activities	Direct Costs	Support costs (note 3b)	Total 2019
	£	£	£
Professional standards and regulations	-	39,703	39,703
Educational activities	22,189	69,481	91,670
Credential in Medical Education	7,052	-	7,052
	<u>29,241</u>	<u>109,184</u>	<u>138,425</u>

The Academy of Medical Educators
Notes to the Financial Statements
For the year ended 30 September 2020 (Continued)

3b Support costs comprise	2020	2019
	£	£
Staff costs (see note 4 & 5)	103,516	91,482
Office running costs	1,293	11
Rent (see note 4)	30,000	30,000
Depreciation & amortisation	1,701	8,719
Database	6,116	9,404
Sundry Expenses	-	1,206
Bank charges	2,084	2,342
Staff travel	432	782
Marketing and publicity	7,782	2,734
Meeting costs	4,048	-
Governance Costs (see note 3c)	6,063	12,133
	<u>163,035</u>	<u>158,813</u>

3c Governance Costs	2020	2019
	£	£
Board Meetings and travel costs	1,407	5,786
Independent examiner's fee- current year	4,656	4,615
Legal and professional fees	-	1,732
	<u>6,063</u>	<u>12,133</u>

4 Gifts in Kind

An estimate of the support in kind, based on the value of the contribution to the charity, has been included as a donation and a cost, at amounts summarised below:

	2020	2019
	£	£
Rent and utilities (Cardiff University)	30,000	30,000
	<u>30,000</u>	<u>30,000</u>

The Academy of Medical Educators
Notes to the Financial Statements
For the year ended 30 September 2020 (Continued)

5	Staff Costs	2020	2019
		£	£
	Gross salaries	103,516	91,482
		103,516	91,482
		103,516	91,482

Staff Numbers

The average number of staff employed by the organisation for the period was nil (2019: nil).
Staff are employed by the University of Cardiff and costs are re-charged to the charity.

No employee received remuneration in excess of £60,000 (2019: None).

Key management personnel are deemed to be the Trustees as they oversee the management of the charity.
No key management personnel were remunerated in the year to September 2020 (2019: None).

6	Intangible Fixed Assets	Website & Software £	Coat of arms £	Total £
	Cost			
	As at 1 October 2019	121,324	12,250	133,574
	Additions	-	-	-
	As at 30 September 2020	121,324	12,250	133,574
	Amortisation			
	As at 1 October 2019	118,921	-	118,921
	Charge for the year	1,499	-	1,499
	As at 30 September 2020	120,420	-	120,420
	Net Book Value			
	As at 30 September 2020	904	12,250	13,154
	As at 30 September 2019	2,403	12,250	14,653

7	Tangible Fixed Assets	Fixtures, Fittings and Equipment £	Computer Equipment £	Total £
	Cost			
	As at 1 October 2019	2,086	7,102	9,188
	Additions	-	2,522	2,522
	As at 30 September 2020	2,086	9,624	11,710
	Depreciation			
	As at 1 October 2019	2,086	7,102	9,188
	Charge for the year	-	202	202
	As at 30 September 2020	2,086	7,304	9,390
	Net Book Value			
	As at 30 September 2020	-	2,320	2,320
	As at 30 September 2019	-	-	-

The Academy of Medical Educators
Notes to the Financial Statements
For the year ended 30 September 2020 (Continued)

8 Debtors	2020	2019
	£	£
Prepayments	4,716	690
	<u>4,716</u>	<u>690</u>

9 Creditors: Amounts falling due within one year	2020	2019
	£	£
Trade Creditors	224	438
Deferred Income	3,605	
Accruals	30,607	29,836
	<u>34,436</u>	<u>30,274</u>

10 Unrestricted Funds	As at 1				As at 30
	October	Incoming	Resources	Transfers	September
	2019	Resources	Expended		2020
	£	£	£	£	£
General Fund	130,174	140,495	(166,579)		104,090
	<u>130,174</u>	<u>140,495</u>	<u>(166,579)</u>	<u>-</u>	<u>104,090</u>

11 Restricted funds	As at 1				As at 30
	October	Incoming	Resources	Transfers	September
	2019	Resources	Expended		2020
	£	£	£	£	£
Credential in Medical Education	-	-	-		-
	<u>-</u>	<u>-</u>	<u>-</u>	<u>-</u>	<u>-</u>

Restricted funds represent funding received from the Wales Deanery to be spent on the senior fellowship recognition project.

12 Net assets by fund	Unrestricted	Restricted	Total funds
	funds	Funds	2020
Fixed assets	15,474	-	15,474
Current assets	123,052	-	123,052
Current liabilities	(34,436)	-	(34,436)
Total	<u>104,090</u>	<u>-</u>	<u>104,090</u>
	Unrestricted	Restricted	Total funds
	funds	Funds	2019
Fixed assets	14,653	-	14,653
Current assets	145,795	-	145,795
Current liabilities	(30,274)	-	(30,274)
Total	<u>130,174</u>	<u>-</u>	<u>130,174</u>

The Academy of Medical Educators
Notes to the Financial Statements
For the year ended 30 September 2020 (Continued)

13 Transactions with Trustees

There was no remuneration or expenses paid to the Trustees during the year (2019: None).

Trustees received reimbursement for costs including attending meetings and travelling expenses which amounted to £4,407 in total paid to 7 trustees (2019 - £5,786 total paid to 9 trustees).

14 Limited Liability

The company is limited by guarantee and has no share capital. In the event of it winding up, the liability of each member is limited to £1.