

National Consultant Information Programme - Frequently Asked Questions

About NCIP

The National Consultant Information Programme (NCIP) has created an online portal that enables NHS consultant surgeons to review information about their clinical activity and their patient outcomes.

The portal provides access to individual outcomes data and unit-level data across a range of surgical specialties. It is intended to support NHS consultant surgeons in England as part of their personal learning and development. It provides both local and national benchmarks against which consultants can review and assess their patient outcomes with the aim of delivering improved patient care.

It has been developed through the **Getting It Right First Time (GIRFT) programme**, in collaboration with GIRFT's clinical leads, the Royal Colleges and specialty associations. It has been developed initially across the following surgical specialties:

- general surgery
- paediatric surgery
- orthopaedic surgery
- obstetrics and gynaecology
- ENT surgery
- oral and maxillofacial surgery
- ophthalmology
- urology

It is intended that, in time, NCIP will be extended to all surgical specialties in a phased approach.

The portal provides data at both surgical team/unit and consultant level. However, data developed for the NCIP portal are not for publication. The portal, to be hosted by NHS Improvement on its Model Hospital platform, will allow registered users to log in and access the data. Only the registered individual consultant and their Medical Director or their senior responsible officer will be able to access any individual consultant-level data.

The GIRFT consultant specialty leads and their specialty associations have worked with NCIP on establishing agreed metrics for benchmarking. The content is presented on the portal via a series of procedure-specific dashboards and offers a unique secure point of access to existing information from Hospital Episode Statistics (HES) and, in time, also from audit and registry, and private sector data sources.

It is hoped that access to this information will help consultants to reduce variation in patient outcomes and identify good practice, leading to better patient care and safety within the NHS.

What does the portal show?

The NCIP portal is an easy to navigate platform that allows consultants to access their outcomes data whenever they need.

Metrics are displayed at a procedure-level, on a series of dashboards. Metrics include volumes, length of patient stay or day case rate, and readmission rate. Other metrics such as re-operation rates, revision rates, complication rates and mortality are included for procedures where they are deemed appropriate.

It also allows users to drill down to individual patient-level information via pseudonymised patient records to allow for full interrogation of consultant-level outcomes data.

What are the aims of NCIP?

The key intended benefits are to:

- Provide surgeons with easy access to their outcomes data and information to support the appraisal process.
- Improve the visibility of outcomes data and therefore encourage improved coding accuracy.
- Understand different approaches to care and reduce variation, for example by comparing length of stay and readmission rates resulting from different operating methods.

Where does the data come from?

The NCIP portal has been built using the national HES (Hospital Episode Statistics) dataset. This is populated with data from the individual trust's patient administration system (PAS), subsequently submitted to NHS Digital. Information recorded by clinicians (either written/ electronic entries to the notes, letters or discharge summaries) will generally be extracted to the PAS by the clinical coding team.

Over time we will be expanding the data sources that we draw on. The ultimate ambition is to provide a unique service – a single, secure point of access to existing information from HES, audit and registry, and private sector data sources.

Who has NCIP worked with to develop content?

NCIP has worked with clinicians identified by sub-specialty associations to select the procedures and metrics that will be included within the portal. These clinician groups have also helped design the way in which this information is displayed to ensure it is beneficial to their professional colleagues.

Who will be able to see this data?

The portal is a resource for the profession, and the consultant-level metrics developed for it will not be published outside of the portal. Those accessing the portal include:

- the individual consultant registered to receive personal login details;

- medical directors who, in support of their clinical governance responsibilities, will have access to NCIP outcomes data for all activity delivered within their trust, including consultant-level data;
- responsible officers who will have access to outcomes data across NHS providers for consultants for whom their organisation is the designated body in maintaining professional standards and improving the effectiveness of clinical care.

Consultants are encouraged to share their outcomes data with their appraiser and with colleagues as part of collaborative quality improvement activities.

How should the portal be used?

NCIP's primary objective is to support quality improvement activities and, if deemed appropriate, professional appraisal, with the aim of delivering improved patient care.

The intention is that consultants will use the portal to gain insight and an overview of their own patient outcomes. There is deliberately no application of a blanket case-mix adjustment methodology – rather than trying to directly compare personal outcomes data between one another, consultants are encouraged to review the outcomes data in the context of their particular case-mix and the specifics of their individual practice.

We would encourage consultants to share their outcomes data with their appraiser and with colleagues as part of collaborative quality improvement activities.

We hope the portal will also support improved data quality within HES. With greater visibility of data relating to a consultant's practice, problems can be highlighted and changes to the way information is recorded and processed can be made.

What are the limitations of the portal?

The portal is built using the national HES dataset, which is the best available starting point. However, there will be instances where the data does not entirely match with a consultant's activity. For example:

- An individual consultant's data for a particular procedure may include the surgery performed by non-consultant grades under their supervision.
- Where a consultant jointly operates, the activity can only be assigned to one consultant.
- Pooled operating lists can often lead to poor attribution of activity.
- The underlying coding logic may need updating in order to more accurately reflect activity.
- For elective activity, the portal is able to present information on the procedures where individual consultant volumes are generally high. Consultants will not be able to see data for procedures where they have carried out fewer than six in the viewable period on the dashboard. Some procedures have also been excluded due to difficulties in being able to identify the relevant activity in the coding data.

In the longer term, we plan to link theatre data to the NCIP portal as a means of developing superior attribution.

Why is non-elective activity not included?

Currently, attribution for non-elective procedures in HES is not accurate enough for non-elective activity to be shown via the NCIP portal. Linking to hospital theatre data will expand the range of procedures for which the portal is able to show data.

Will NCIP be rolled out to junior doctors, anaesthetists and other clinical team members?

Over time we will be expanding the data sources that we draw on to include theatre data. This will provide the opportunity to roll out the NCIP portal to anaesthetists and non-consultant grade surgeons. It may be possible to extend the portal to include other staff groups in the future.

How do consultant surgeons sign up?

NCIP registration is automatic and there is no need to sign up. The NCIP team works with a trust's CEO, medical directorate, coding and information governance teams to set up access to the portal via a trust administrator. Once all governance processes are complete, eligible users will receive login details via their trust email account. Only consultants for whom the trust is their designated body (for the purpose of revalidation) will be invited to access the portal.

The portal is being rolled out across NHS trusts in phases. The first five 'early adopter' trusts went 'live' with the portal in 2019, and more trusts are being invited to launch the portal from the autumn 2020.

Which trusts are early adopters?

The trusts involved in the initial pilot phase are:

- Salford Royal NHS Foundation Trust
- Alder Hey Children's NHS Foundation Trust
- Royal Free London NHS Foundation Trust
- Kingston Hospital NHS Foundation Trust
- University College London Hospitals NHS Foundation Trust

A further ten 'fast-follower' trusts joined the programme from the autumn, 2020:

1. University Hospitals Plymouth NHS Trust,
2. Nottingham University Hospitals NHS Trust
3. The Leeds Teaching Hospitals NHS Trust,
4. Royal National Orthopaedic Hospital NHS Trust
5. Gloucestershire Hospitals NHS Foundation Trust
6. St George's University Hospitals NHS Foundation Trust
7. Epsom and St Helier University Hospitals NHS Trust
8. Moorfields Eye Hospital NHS Foundation Trust
9. Robert Jones and Agnes Hunt Orthopaedic Hospital NHS Foundation Trust
10. Calderdale and Huddersfield NHS Foundation Trust

The intention is to roll out the programme nationally to 155 trusts by 2023, across more surgical and interventional specialties, with a further pilot for some medical specialties.