

#### July 2023 edition

Welcome to NICOR's July newsletter. As we approach the summer months, we have a lot to be proud of in the first quarter of this financial year and we have much to look forward to. The 2023 NICOR reports were published in June, and we are in the process on onboarding the new National Cardiac Audit Programme, which comprises of total of 11 specialist domains.



I would like to thank everyone who has worked extremely hard on the delivery of our annual reports. They are very insightful and unfortunately show the continued detrimental effect to

cardiovascular services following the COVID-19 pandemic with continued delays for treatment for patients. The reports highlight the priorities that need addressing to improve cardiovascular health services for patients.

We continue to finalise the improvements being made to increase automation and reporting real world contemporaneous data online. I would like to take this opportunity to thank everyone for their continued support and contribution to NICOR.

#### John Deanfield CBE, NICOR Director

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## **Publications**



#### NICOR has published its National Cardiac Audit Programme (NCAP) Annual Report 2023

The report called <u>'Time is of the essence: delays and waits need urgent action'</u> covers the 12 months from 1 April 2021 to 31 March 2022, during the second year of the COVID-19 pandemic and records the initial

recovery of NHS hospital services for patients with cardiovascular disease.

The Annual Reports include domain reports from the six sub-specialties covered by the NCAP and a dedicated <u>Annual Report for Patients, Carers and the Public</u>, which was cowritten by the NICOR Patient Representative Group Chair, Sarah Murray, and patient representative Richard Corder and includes patient experiences during the recovery period.

#### Key points from the report:

- The number of patients presenting to hospital and the number of treatments delivered were nearly back
- to pre-pandemic levels in the majority of sub-specialties
- The number of congenital heart procedures overall had partially recovered but were still 8% fewer than pre-pandemic levels; recovery was mainly for percutaneous interventional and pacing procedures but cardiac surgical procedures in children had not recovered
- 19% of heart attack patients self-presented to hospital rather than waiting for an ambulance
- The times to emergency treatment of patients with high-risk heart attacks worsened and there were significant delays to urgent treatment for patients with lower risk heart attacks
- Waiting times for urgent coronary artery bypass graft (CABG) procedures were worse, with no hospital achieving the 7-day target
- Fewer than half of patients with heart failure were admitted to cardiology wards with noticeable gender and age inequalities
- Just under 10% of patients admitted with heart failure in 2021/22 were referred during hospitalisation
- for cardiac rehabilitation
- 30-day mortality has improved for heart failure patients
- Use of leadless pacemakers increased significantly.

We would welcome your comments, feedback, queries, or ideas for our future reports at <u>nicor.auditenquiries@nhs.net</u>.



### Latest developments

#### New registries and reporting

The purpose of the national clinical audits/registries is to collate data to facilitate clinical service planning, benchmarking and to inform clinical best practice. The data also enable research including identification of eligible volunteers for clinical trials.

Following NHSE's commissioning decision the new National Cardiac Audit Programme (previously comprising of six specialist NCAP domains) will now include:

- The National Audit of Cardiac Rehabilitation, which has transitioned from York University to Arden and GEM.
- The UK Transcatheter Aortic Valve Implantation (TAVI) Registry. TAVI is a non-surgical alternative to open heart surgery to replace the aortic valve.
- Structural Heart Intervention Registries including:
  - o Transcatheter Mitral and Tricuspid Valve (TMTV) Registry,
  - Left Atrial Appendage Occlusion (LAAO) Registry, and
  - Patent Foramen Ovale Closure (PFOC) Registry.

In addition, we will be providing NHS England monthly reports of Critical Time Standards (door to balloon, call to balloon times) for patients admitted with ST elevation Myocardial infarction (STEMI) – using Myocardial Ischaemia National Audit Project (MINAP) data.

#### New ways of reporting and data validation – Quality Improvement

#### process

NICOR will be making big changes to the way we validate and report our data. We are encouraging hospitals to undertake continuous data validation using the online data tools available within our web platform. These changes will eliminate the demanding task of validating a full year's worth of data and will ensure that you have up to date and accurate data throughout the year. At NHSE's request we will also be publishing this validated data on-line on an ongoing basis. In efforts to publish the annual reports within the same calendar year as the end of the previous financial year's data collection, we are reviewing the data deadline date, currently set at 30 June.

Keep an eye out for further information on these developments which will be communicated within the coming weeks. If you have any questions in the meantime, please contact <u>Anthony Bradley</u>, Senior Project Manager.



#### Data Access Requests back up and running

In January 2023, the NICOR Data Access Request Service (DARs) was up and running again with NHS England and GIG Cymru/NHS Wales the sole data controllers for their elements of the NICOR data.

A new process has been developed for data applications, which replaces the previous process managed by the Healthcare Quality Improvement Partnership (HQIP) on behalf of the NHS England. For full details please read the article on the <u>NICOR website</u>.

# National Data Opt Out Exemption Granted for NCAP, TAVI data and new Structural Heart Interventions Registries

In June 2023, NICOR was recommended for exemption from the national data opt-out legislation by NHS England's Confidentiality Advisory Group (CAG) for the six former domains of the National Cardiac Audit Programme (NCAP) and the TAVI Registry. In addition we have also been granted the same exemption for the new structural heart intervention registries.

We help the NHS, the government and regulatory bodies improve quality of care by checking that the care received by heart disease patients meets good practice standards. We do this by conducting clinical audit and by comparing patient outcomes, such as case mix-adjusted survival and readmission rates. Ensuring comprehensive coverage of all patient groups was deemed important for safety reasons and to ensure no health inequalities.

At NICOR we encourage research using real world data to complement and refine the lessons learnt from randomised clinical trials. We collect clinical information from UK

hospitals into secure registries established by the cardiovascular specialist societies. The uses of data for research are not exempt from the data opt-out legislation and NICOR will ensure that data from patients who have opted-out are not shared with research teams.

#### **Recent appointments**

We have been successful in recruiting to several positions recently. We would like to official welcome you all to team NICOR. It is great to have you on board and we look forward to working with you.

- Pete Jones, High Information Analyst
- Narinderpal Kalirai 'Kal', Project Manager for Structural Heart Intervention Registries
- Francesca Riccioli, Data Manager
- Rajesh Kharbanda, Clinical Lead for the TAVI registry
- Mamta Buch, Clinical Lead for Transcatheter Mitral and Tricuspid Valve Registry
- Anthony Bradley, Interim Senior Project Manager. Anthony worked with NICOR previously and we are pleased to be able to welcome him back.



#### **Current Opportunities**

We are recruiting members for our Patient Representative Group (PRG) as well as members for our UK wide Virtual Patient Representative Group (VPRG). The PRG and VPRG advises and supports NICOR in the development of its Patient and Public Engagement (PPE) strategy. This includes advising on audit design and structure as well as outputs; design and content selection of NCAP reporting and ensuring that patients' views are considered in dataset planning so that we reflect issues and measure outcomes which are important to patients. Our panel membership is invited to attend our quarterly PRG meetings, via MS Teams primarily. This work is supported by a wider VPRG who operate and are kept informed electronically via email. If you are interested and require further information, please contact <u>Sarah</u> Colston, Senior Communications and Engagement Manager or visit the NICOR website.



#### Looking ahead for 2023/24

We are in the process of developing innovative ways to report data across the programme annually. This will provide modern, interactive and visually appealing dashboards to help in the understanding and communication of the insights from the data. Watch this space for exciting developments coming soon.