

NCP CR BACPR and NACR Report 2022

Introduction

This year's National Certification Programme for CR (NCP_CR) report captures the transition from two years of hard hitting Covid-19 pandemic service provision to a more optimistic, albeit challenging, period where many cardiac rehabilitation (CR) teams have managed to return to a level of delivery similar to that of the 2019 period. Once again clinical teams have been able to supply data to the NCP_CR enabling us to assess the quality of CR service delivery. The increase in data entry in this period has enabled NCP_CR to revert back to the four-category certification approach (Green certified, Amber, Red, Fail) standing down the Green (not certified) status. The BACPR and NACR thank all CR teams for making data entry into the national audit a priority.

Certification Breakdown

A total of 205 programmes this year were eligible for the certification process, and of these 185 had NACR data entered allowing them to meet KPIs above the MDT standard (19 programmes in England and one in Wales had no electronic data). As shown in **Table 1**, 82 programmes (40%) met all seven standards and will be certified for the 2022-23 period (based on Jan-Dec 2021 data). This represents an increase of 18 programmes (10%) being Green certified compared to last year. At the same time there has been an increase in Amber status programmes (69 up from 62 last year) and a reduction in Red status which is also encouraging.

On the less positive side, with the exception of Northern Ireland, there has been an increase of nine programmes in the Fail category compared to last year. Some of these programmes continue to be significantly impacted by the pandemic and associated redeployment. When this is set against NHS staff losses due to retirement it highlights the pressures clinical teams are facing.

Nation specific certification outcomes

England, with 184 programmes, has some clear positives with big gains in Green certified programmes (an increase of 18) on last year but at the same time there were eight programmes more in the Fail category.

Northern Ireland, with nine programmes, has the same number of Green certified programmes (2) as last year but two programmes have slipped into Red status. For two years running they have zero Fail status programmes.

Wales, with 12 programmes, has the same number of Green certified programmes (7) as last year, but now has one Fail status programme that was in the Red status category in 2021.

Table 1 - NCP_CR certification status for all CR programmes across England, Northern Ireland and Wales				
	England N=184	N. Ireland N=9	Wales N=12	UK N=205
Green certified	73 (40%)	2 (22%)	7 (59%)	82 (40%)
Amber	60 (33%)	5 (56%)	4 (33%)	69 (34%)
Red	30 (16%)	2 (22%)	0	32 (16%)
Fail	21 (11%)	0	1 (8%)	22 (10%)
<i>Green certified (7 standards met), Amber (4 to 6 standards met), Red (1 to 3 standards met) and Fail (0 standards met)</i>				

Table 2 shows the number of programmes meeting each of the NCP_CR standards. The latent effect of staff redeployment and increasing numbers of patients not being seen face to face has led to uncertainty around the fidelity of routine practice CR.

In the data period 2021 (Jan-Dec) there has been a drop in the rates of MDT in programmes across all three countries. This may be due the impact of the pandemic on services, loss of specific staff involvement e.g. dietitian or pharmacist, and finally retirement.

Of the seven KPI requirements the pre and post CR Assessment percentage is the most minimum of them all. Presently the NCP_CR assessment criteria requires that only one assessment measure, of the 16 possible NACR assessment items, is completed. Given the radical change in CR service provision it is more important than ever that assessment is done and that it is comprehensive. On that basis we are proposing that the NCP_CR requirement for just one assessment item will remain next year, however, there will be additional reporting of the extent to which pre assessments contain each of the three BACPR core component areas (risk factors, psychosocial and fitness). This will inform a new 3 item core component minimum for baseline and post CR assessment that will replace the old KPI criteria.

Table 2 - NCP_CR standards for all CR programmes with NACR electronic data across England, Northern Ireland and Wales				
NCP CR KPIs	Standard	CR Programmes Meeting Standards		
		England N=165*	N. Ireland N=9*	Wales N=11*
Agreed Minimum Standards				
Multidisciplinary team	>=3 different staff types	136	3	10
Receiving all Patient Priority Groups	Each Group >0	127	8	10
Duration	>=56 days (8weeks)	133	8	11
Standards Based on 2016 national averages				
Assessment 1	England 80%	118	8	11
	N.Ireland 88%			
	Wales 68%			
Referral to CR Start (CABG)	England 46 days	120	7	11
	N.Ireland 52 days			
	Wales 42 days			
Referral to CR Start (MI/PCI)	England 33 days	123	6	9
	N.Ireland 40 days			
	Wales 26 days			
Assessment 2	England 57%	102	3	9
	N.Ireland 61%			
	Wales 43%			

* N = number of programmes entering data on the NACR database

Figure 1a-c shows the regional breakdown of the certification status. For full network and regional names see appendix 1



Further breakdown of NCP_CR findings are available via the NCP_CR Supplement [online](#)

Summary

The NCP_CR report highlights significant progress achieved during a period of unprecedented challenge for the NHS and its staff. Given the stricter application of this year's certification approach (i.e. 4 rather than 5 categories) all three nations have shown improvement. The continued

commitment of CR teams to improve the quality of their service and to have it reviewed by their peers as part of the NCP_CR is commendable.

Concerns remain around the low quality of some programmes, notably those in the Fail and Red status categories. The NACR team will continue to liaise with programmes about entering CR data and reporting on staffing which have impacted on some programme in this review period.

Next steps

In order to offer patients a choice of mode of delivery of CR during the pandemic and in response to NHS infection control strategies and NHS premise optimisations there has been a significant change in practice evidence by a huge (over 60%) increase in home-based provision. The ability for patients to choose their own mode that suits their needs and lifestyle is very important to maintain engagement, which in turn will increase participation and adherence rates. As such, the NCP_CR will seek to include mode of delivery as one of the new key performance indicators in 2023. In addition, over the next two years, NCP_CR will seek to add clarity and relevancy to the CR Assessment KPIs, by specifying the need for a minimum of assessment items from each BACPR core component area: (risk factors, psychosocial and fitness) The information will be gathered and reported to programmes on this new metric prior to it becoming a formal KPI requirement.

More detail on these changes will be made available in the next few months through the NACR newsletter.

The NCP and NACR will continue to monitor this and report wider changes to staffing profiles this year and going forward.

Throughout 2022/2023 the NACR in partnership with NHS England/NHS Improvement, BACPR and BHF will work together to support CR teams to achieve certification against clinical minimum standards.

Acknowledgements

The NCP_CR Steering Group would like to thank NHS England for funding the NACR and supporting the NCP_CR service quality programme over this period. Thanks also to the BHF for their substantial support over the last ten years enabling the NACR to become a high-quality national audit.

Appendix 1

Country	Full Name	Abbreviation
England	Cheshire & Merseyside	C & M
	East Midlands	EM
	East of England	EoE
	Greater Manchester	GM
	Lancashire & South Cumbria	L & SC
	London (North)	L (North)
	London (South)	L (South)
	North East	NE
	South East	SE
	South West (North)	SW (North)
	South West (Peninsula)	SW (Peninsula)
	West Midlands	WM
	Yorkshire and The Humber	Y & TH
	Other	Other
Northern Ireland	Belfast Health and Social Care Trust	BHSCT
	Northern Health and Social Care Trust	NHSCT
	South Eastern Health and Social Care Trust	SEHSCT
	Southern Health and Social Care Trust	SHSCT
	Western Health and Social Care Trust	WHSCT
Wales	Aneurin Bevan University Health Board	ABUHB
	Betsi Cadwaladr University Health Board	BCUHB
	Cardiff & Vale University Health Board	C & TVUHB
	Cwm Taf Morgannwg University Health Board	CTMUHB
	Hywel Dda University Health Board	HUHB
	Powys Teaching Health Board	PTHB
	Swansea Bay University Health Board	SBUHB