Clinical Coding Auditor (CCAP) Handbook

2023-24

Terminology and Classifications Delivery Service

Contents

1 Introduction

The Clinical Coding Data Quality Framework provides the activities, roles and protocols which individually and collectively ensure that standards associated with auditing of coded clinical data are met.

The Terminology and Classifications Delivery Service' Clinical Coding Auditor Programme (CCAP) provides the associated training on the application of the methodology to individuals that possess the necessary general and specialist knowledge and skills to conduct a clinical coding audit.

The success of the audit depends upon the competence of the auditor, the key resource for the inspection of coded clinical data. It is therefore essential that an individual and their organisation understand the base knowledge and skills needed as well as the ongoing commitment required to retain 'approved' clinical coding auditor status.

1.1   Purpose of document

The document provides an outline of the CCAP so that the reader has a thorough understanding of:

- Pre-requisite skills and knowledge
- Entry level Assessment Day
- Train the Auditor Workshop content, and related online elements
- Ongoing post-course requirements and continued professional development to maintain approved clinical coding auditor status.

1.1.1 Audience

Accredited clinical coders interested in developing and maintaining their existing skills and knowledge to become an approved clinical coding auditor through continued professional development.

Line managers, to understand the level of commitment required by the individual and organisation to embed and support a skilled auditor in the department to conduct a regular and robust cycle of clinical coding audit within the organisation / department.

1.1.2 Background

Accurate and comprehensive coded clinical data is essential for reliable and effective clinical and statistical analysis. A regular internal programme of clinical coding audit ensures the quality of coded clinical data, and NHS regulatory bodies increasingly use the outcomes of clinical coding audits as evidence that organisations exemplify best practice and promote a culture of continuous improvement.

The CCAP supports organisations by ensuring only the most highly skilled staff qualify to become approved clinical coding auditors and that continued professional development in this expert field is maintained.

2 Pre-requisite skills and knowledge

The CCAP pre-requisite criteria ensure that an applicant has the basic skills and knowledge required to become an approved clinical coding auditor and are based on elements of the five core competencies identified for the 'Trainee' auditor in the Clinical Coding Auditor Competency Framework:

Core Competency 1 (CC1) = Audit

Core Competency 2 (CC2) = Technical

Core Competency 3 (CC3) = Interpersonal

Core Competency 4 (CC4) = Knowledge

Core Competency 5 (CC5) = Digital Literacy.

An approved clinical coding auditor must possess a wider range of skills and knowledge than those required for day-to-day clinical coding. Whilst excellent technical coding skills are necessary, they are not sufficient without the other competencies.

It is essential therefore, that applicants fulfil **all** the criteria below **prior** to applying for the CCAP – each criteria map to at least one of the core competencies listed above and a rating of **HIGH**, **MEDIUM** or **LOW** has also been assigned to indicate the importance of each so that applicants and their line managers can assess a person's suitability to apply. Where competencies of different ratings apply, the higher rating takes priority.

1. Attain Accredited Clinical Coder status (ACC) by passing the National Clinical Coding Qualification (UK) examination and have **a minimum of 3 years** clinical coding experience **post** accreditation before submitting their application for the programme. **CC2, CC4 HIGH** (*Provides certificate*). **NB:** We will not be able to accept applications from candidates who have sat and passed the National Clinical Coding Qualification (UK) examination in March 2021 until March 2024 and only if there are still places available.

2. Successfully complete a Clinical Coding Standards Refresher Course* delivered by a Terminology and Classifications Delivery Service approved clinical coding trainer **within 3 years of the application date**. **CC2 HIGH**
    (*This is not required if the applicant is already a Terminology and Classifications Delivery Service approved trainer due to mandatory completion of a Trainer Refresher course every three years.*) (*Provides certificate confirming successful completion*)

3. Have proven expertise and specialist knowledge in the application of the rules and conventions of ICD-10 and OPCS-4 and a thorough understanding of national clinical coding standards for these classifications. **CC2 HIGH**

4. Have experience in coding across a wide range of speciality areas including general medicine, general surgery, trauma and orthopaedics and obstetrics **as a minimum**. **CC2 HIGH** (*Acceptable evidence on the CV includes if the applicant can list dates when they have been responsible for coding these specialties within their organisation and these dates are verified by their line manager as part of*

their signing of the CCAP application form, or if they have results of individual coding audits confirming their performance in these specialties)

5. Basic analytical skills to translate medical terminology into codes and extract relevant data, and to interpret percentages. **CC2 HIGH** (*Partly demonstrates by written answers in CV*)

6. Knowledge of Data Protection laws. (The applicant should have received Data Security and Protection training within their own organisation and be able to provide an up-to-date certificate as evidence of this training. Where a certificate is not available/issued, a screenshot confirming the training and date(s) completed will suffice). The certificate must be valid and obtained within 12 months of the application date. **CC2 HIGH** (*Provides valid certificate*).

7. Knowledge and understanding of the use of Microsoft Word, PowerPoint, and Excel. **CC2 HIGH** (*Demonstrates by providing a practical example of how they have used each on their CV*)

8. Demonstrated commitment to continued professional development. **CC2 HIGH**

9. Excellent communication skills both verbal and written to enable effective interaction across multi-professional teams. **CC3 MEDIUM** (*Partly demonstrates by written answers in CV*)

10. Excellent planning and organisational skills. **CC3 MEDIUM**, **CC1 LOW** (*Demonstrates with a practical example on their CV*)

11. Excellent time management skills. **CC3 MEDIUM** (*Demonstrates with a practical example on their CV*)

12. Experience in problem solving. **CC3 MEDIUM** (*Demonstrates with a practical example on their CV*)

13. Experience of using an online platform such as MS Teams or Zoom. **CC5 MEDIUM** (*Demonstrates by providing a practical example of use, either personal or professional, on their CV*)

14. Demonstrate a basic understanding of what is meant by the terms 'findings', 'conclusions' and 'recommendations' in the context of a report. **CC1 LOW**

IMPORTANT INFORMATION:
Criteria 1, 2 and 6 – Will be evidenced by provision of certificates.

Criteria 8 – Will be evidenced in the Educational and Professional Qualifications and Training Courses sections of the CCAP Curriculum Vitae and will also be confirmed by the applicant and line manager declarations on the applicant's CCAP booking form.

Criteria 4, 5, 7 and 9 to 13 – Will be evidenced within the applicant's CCAP Curriculum Vitae through the provision of evidence or practical examples and any other requested supporting information. ***Please see section 3.1 below for further guidance and information.***

Criteria 3 to 5, 9, 11, 12 and 14 – Will be demonstrated/further demonstrated through successful completion of the CCAP Assessment Day.(Also see CCAP Assessment Day Bibliography.)

It is important that the applicant and line manager work together to ensure the applicant meets <u>all</u> the criteria listed above.

3 Applying to attend the Clinical Coding Auditor Programme

The CCAP is very popular, and places are offered on **<u>a first come, first served basis</u>** subject to availability. Available places can only be secured by submitting a fully completed course booking form, a CCAP CV clearly evidencing **<u>ALL</u>** the necessary listed criteria and all other required documentation with the initial application. (See IMPORTANT INFORMATION in section 2. Pre-requisite skills and knowledge).

The course booking form and CCAP CV can be downloaded from the Delen website.

3.1 Payment information

When applying for the programme a purchase order covering both the cost of the assessment day and Train the Auditor Workshop must be included.

The purchase order must detail the cost of the assessment day and Train the Auditor Workshop separately (plus VAT, if applicable) with the total amount being the cost of the two courses added together. The purchase order must display the amount to be billed to the organisation as below:

Course Details	Cost
Clinical Coding Auditor Programme (CCAP) Assessment Day	£XXX.XX (plus VAT, if applicable)
Clinical Coding Auditor Programme (CCAP) Train the Auditor Workshop	£YYY.YY (plus VAT, if applicable)
Total cost	£ZZZ.ZZ (£XXX.XX + £YYY.YY) (plus VAT, if applicable)

It would also need to include the following information:

- Purchase Order number

- Full invoice address and contact details (telephone number / email address)

<u>If any of the above details are missing the purchase order will not be acceptable.</u>

A screenshot of the Purchase Order number (from the finance system) without the above details will also **not** be acceptable.

We are aware that some NHS Trusts / commercial or independent organisations do not issue purchase orders, and that some applicants will be self-funding, and if this is the case a 'Promise to Pay' letter is acceptable which must include the following information:

- The Trust / organisation / individual promises to pay the amount of £ZZZ.ZZ for FULL NAME to attend the Clinical Coding Auditor Programme.

- Invoice address

- Contact details for finance contact including full name, telephone number and email address.

If any of the above details are missing the Promise to Pay will not be accepted.

NB: Should the candidate be unsuccessful on the assessment day, only the cost of the assessment day will be charged.

3.2 Clinical Coding Auditor Programme Curriculum Vitae

The Clinical Coding Auditor Programme Curriculum Vitae (CCAP CV) is the applicant's first step towards demonstrating they have the necessary qualifications and skills to become an approved clinical coding auditor. Completing the CCAP CV should be compared to reviewing a job description and matching key skills when applying for a job. It is expected that the CCAP CV will be well structured and formatted to evidence good use of Microsoft Word. All the relevant documents are available by accessing the Delen website.

Entry onto the CCAP is subject to the applicant evidencing within the CCAP CV that they fully meet skills **4, 5, 7 and 9 to 13** of the pre-requisite criteria. The Clinical Coding Auditor Competency Framework is included in these pre-requisites and can be found as a separate document on the Delen website.

Applicants must provide **practical** examples demonstrating use of skills listed in criteria **4, 5, 7** and **9** to **13** in either a current or previous role. Simply writing statements such as '*I have problem solving skills*'/'*I have excellent time management skills*'/'*I can use Microsoft Excel*' does not evidence application of these skills, nor does it demonstrate excellent written and verbal communication skills, which are also a fundamental criteria for attending this programme.

When completing the CCAP CV, the relevant sections should be populated with descriptions/explanations of how an applicant meets the pre-requisite criteria and how they utilise these skills and knowledge in their current or previous role (this can, as previously mentioned, be supplemented with practical examples). It is the applicant's opportunity to describe exactly how and why they believe they would make a good auditor. It is not acceptable to simply embed word/PDF/Screenshots into the CV against the individual pre-requisite criteria with no accompanying text, doing so will result in the application being rejected.

All the required information must be present within the CCAP CV template. If the applicant attaches their own CV document, stating "*Please see CV*" (or similar) on the CCAP CV template, the application will be declined.

Whilst we do give an indication as to which area(s) requires improvement, we do not provide specific feedback as to why a CV has been declined. The Terminology and Classifications Delivery Service would encourage all applicants prior to their

application being submitted to review and discuss their CV with their line manager to ensure they have provided clear practical examples that evidence each skill.

Applicants are allowed **two submissions** of their CV. If unsuccessful at the second attempt the applicant will be advised to re-apply for the next available programme. A place cannot be reserved on the assessment day until a fully completed and satisfactory CV (along with all other required documentation) has been submitted.

4 Clinical Coding Auditor Programme Assessment Day

4.1 Overview

The assessment day ensures that only competent and experienced accredited clinical coders are admitted onto the Clinical Coding Auditor Programme (CCAP).

4.2 Purpose

- The applicant's second step towards demonstrating that they have the skills and knowledge to become an approved clinical coding auditor.
- An opportunity for applicants to network with potential approved clinical coding auditors from other organisations.

4.3 Attendance criteria

The assessment day is open to existing accredited clinical coders (ACC) who have submitted a CCAP CV that evidences the required criteria **and** provided the appropriate certificates/documents with their application. The applicant and their line manager must both confirm their ongoing commitment to all aspects of the CCAP on the course booking form.

Should applicants have specific requirements in relation to sitting the assessment day, these should be emailed to information.standards@nhs.net on application, or as soon before the assessment day as possible to allow for any potential arrangements to be made.

A section is available on the programme booking form to allow applicants to add this information, or to indicate if they would prefer to speak to a Classifications Specialist Trainer / Developer to discuss. We are unable to guarantee what support, if any, will be available and as a result such requests will be considered on an individual basis.

4.4 Pre-Assessment Day work

The following are available once an applicant has a confirmed place on the CCAP Assessment Day. The practice booklets will be sent to successful applicants on confirmation that their application has been accepted. The eLearning will be available to successful applicants from 1 April 2023.

- **Findings, Conclusions and Recommendations** eLearning – accessible on the DLS.

- Practice some general surgery, general medicine, trauma & orthopaedic, obstetric and other specialty case studies available in the **CCAP Assessment Day Case Studies Practice Booklet**.

- Practice some data extraction and communication skill scenarios available in the **CCAP Assessment Day Data Extraction and Communication Skills Practice Booklet**.

These documents described here are revision aids only and the responsibility of the applicant to complete should they choose to. The classifications training team does not offer marking or feedback on any of the revision work completed by applicants.

4.4.1 Important information

To support selection of individuals with the highest level of skills and knowledge the CCAP Assessment Day is challenging. The **CCAP Bibliography** together with the **Summary of Common Errors** documents produced after previous assessment days and provided on Delen are useful preparation tools for candidates preparing for the assessment day to provide an indication of the various sources of questions in the written assessment papers – of note, there are only case study questions available on the assessment day from 2023-24, however this document is still a valuable resource for preparation for the assessment day.

We also recommend that potential candidates ensure their classification books – both ICD-10 and OPCS-4 – are suitably annotated (if hard copy books are being used) and that paper coding is practised before the assessment day. In previous years some candidates have struggled, having been more accustomed to directly inputting codes into an encoder in their day to day job and using that as a double-checking mechanism; this is **not** an option on the assessment day.

Due to the limited amount of question topics, actual past assessment day papers are NOT available.

The Terminology and Classifications Delivery Service practices the policy that no written papers will be returned to assessment day delegates after the event. Detailed feedback including relevant scanned extracts from the papers where applicable is provided on the candidate's Individual Feedback Form.

A Summary of Common Errors document is also produced and made available to the service via Delen following the assessment day.

4.5 Objectives

Attendees must meet the required pass marks and skills criteria in both written papers of the CCAP Assessment Day before being invited to complete the programme. Both papers allow delegates to further demonstrate that they possess all the pre-requisite criteria for attending the CCAP. These are set out below:

- Read the provided background information and associated findings to write three conclusions and three recommendations linked to the conclusions.

    o This paper is one hour in length and is an opportunity to demonstrate the skills learnt after completing the Findings, Conclusions and Recommendations eLearning module.

- Assign classification codes to at least 95% accuracy for the case studies in the written Practical Pre-course assessment Paper. (Demonstrates pre-requisite criteria 3, 4, 5, 9 and 11).

    o The paper comprises five case studies only, each containing both ICD-10 and OPCS-4 codes.

    o There will be three mandatory case plus two others to be chosen by the candidate from three other optional case studies. The optional case studies will all be worth the same number of marks.

- o The paper is 2 hours in length. Suggested timeframe for completion is 20-25 minutes per case study.

- o Marks are awarded for the following:

  - Correct code in primary diagnostic/procedural position.

  - Correct assignment of 5th characters.

  - Correct sequencing of codes where a national standard dictates the sequencing.

- o No mark will be awarded where the 'X' filler code has not been assigned.

*Practice case studies are available in the **CCAP Assessment Day Case Studies Practice Booklet**.*

- Correctly answer at least **90%** of questions in the written Theory Pre-course assessment Paper. (Demonstrates pre-requisite criteria 3, 4, 5, 9, 11 and 12).

  - o The paper comprises one section only on Data Extraction and Communication Skills. There are two ICD-10 and two OPCS-4 scenarios.

  - o This section assesses delegates' understanding of current national coding standards, data extraction and analysis skills, problem solving skills and the ability to effectively communicate in writing key facts about current national coding standards.

  - o The paper is 2 hours in length. Suggested timeframe for completion is 30 minutes per scenario.

*Refer to the example question for this section below. Further practice questions are available in the **CCAP Assessment Day Data Extraction and Communication Skills Practice Booklet**.*

Example

Each of the tables below provides the codes and sequencing assigned by a Trust and an Auditor. **The auditor's coding is correct**, but there are aspects of the Trust coding that contravene national coding standards and/or rules / conventions. Either the Trust or Auditor's code assignment is acceptable when describing the discrepancy.

To obtain maximum marks for each of the questions you need to:

- Analyse the information provided in **both** columns.
- Identify **each** specific code/codes where a national coding standard, rule or convention has been contravened
- A code may contravene **more than one** coding standard – it is expected that a brief but clear explanation of why the coding contravenes national standards / rules / conventions is given and that supporting references are provided for **each standard and contravention**.
- For **each** contravention you must provide the **full** ICD-10 or OPCS-4 reference number **and** title of the associated national clinical coding standard / convention /rule, to support your explanation.
- Where there is no National Clinical Coding Standards ICD-10 or OPCS-4 reference book number and title applicable, you must provide the relevant classification title and

page(s) number to support your explanation. **NB: The number of boxes provided in each table is *not* indicative of the number of contraventions.**

Trust code and sequence		Auditor codes and sequence	
1.	O80.0 Spontaneous vertex delivery	1.	O70.1 Second degree perineal tear during delivery
2.	O70.1 Second degree perineal tear during delivery	2.	Z37.0 Single live birth
3.	Z37.0 Single live birth	3.	J45.9 Asthma, unspecified
4.	J45.9 Asthma	4.	

Answer:
O80.0 Spontaneous vertex delivery
- **Must only be used if no other condition classifiable to Chapter XV is recorded.**
- **As the patient has a second degree perineal tear (O70.1) which is classified to Chapter XV, code O80.0 must not be assigned.**

DCS.XV.28: Delivery (O80–O84) - National Clinical Coding Standards ICD-10 5th Edition reference book (2023)

Z37.0 Single live birth
- **It is mandatory that this code is sequenced in the first secondary position**

DChS.XV.1: Outcome of delivery (Z37) - National Clinical Coding Standards ICD-10 5th Edition reference book (2023)

4.7 Reference materials

Delegates can refer to National Clinical Coding Standard reference products when completing the written practical and theory assessment papers.

Access to these products is included simply to act as an 'aide memoire' rather than replacing the need for the candidate to revise the subject as many questions require them to describe national standards in their own words. Experience has shown that those who rely too heavily on the reference products during the written assessments often struggle to complete them within the allotted timeframe.

Each applicant must supply their own reference books for use during the assessment day. The reference products that can be accessed for both the written practical and theory papers are listed below:

- Volumes 1 and 3 of ICD-10 5th Edition

- OPCS-4.10 Volumes I and II

- National Tariff Chemotherapy Regimens List* (current version)

- National Clinical Coding Standards ICD-10 5th Edition reference book* (current version)

- National Clinical Coding Standards OPCS-4 reference book* (current version)

NB: The CCAP Assessment Day written assessment papers will be based on the version of the National Clinical Coding Standards reference books that is in use on the date of the assessment day, e.g. an assessment day held in May will be based on the new reference books released that April, not the previous versions.

The documents marked with an asterisk are available for download by accessing the relevant area on Delen.

NB: Delegates are welcome to bring laptops/tablets to access electronic versions of the products highlighted with an*; **however, use of mobile phones to access these is NOT permitted**. These products can be downloaded via Delen.

ICD-10 and OPCS-4.10 are also available using the Classifications Browser, which can be accessed via the link below:

https://classbrowser.nhs.uk/#/

4.8 Assessment Day timings

10:00 – 16:00*

*Based on new assessment day content and may be subject to change. Times will be verified in the Assessment Day Joining Pack sent to all successful applicants 3 weeks prior to the assessment day.

4.9 Registration

All aspects of the registration form (with Terms and Conditions) and all associated required documentation must be completed and returned by each applicant. Should the applicant be unsuccessful in passing the assessment day a nominal charge will be made to cover costs.

Applicants requiring overnight accommodation prior to the assessment day will need to arrange this on an individual basis. If booking hotel accommodation as an NHS applicant, always ask for Government rate where this is available.

4.10 Dress code

Ultimately, we want assessment day candidates to feel comfortable, but there is an expectation that for both the CCAP Assessment Day and the Train the Auditor Workshop candidates/delegates will dress smart casual.

4.11 Next steps

Successful completion will result in an invitation to attend the Train the Auditor Workshop.

Candidates are asked to keep their diaries free for ALL Audit Workshop dates/venues.

5 CCAP Assessment Day Bibliography

5.1 Purpose

Everyone who attends the CCAP Assessment Day must be prepared to further demonstrate that they have the pre-requisite skills and meet criteria **3-14** to be accepted onto the CCAP. The bibliography provides a list of the documents and publications used to source the questions for the written assessment papers. Applicants should also refer to section 4. Clinical Coding Auditor Programme Assessment Day for information about content of the assessment day.

5.2 Bibliography

Delegates are expected to refer to the most current versions available for all documents and publications listed in this bibliography when studying for the CCAP Assessment Day. Links are provided to web-based products.

5.2.1 References needed for Assessment Day Practical paper – paper 1 and Theory paper – paper 2

- *World Health Organisation International Statistical Classification of Diseases and Health Related Problems (Tenth Revision) 5th Edition Volumes 1, 2 & 3.*

- *The National Clinical Coding Standards ICD-10 5thEdition reference book (2023)*

  Available for download via the Terminology and Classifications Delivery Service section on Delen.

  This can also be accessed via the Classifications Browser:

  https://classbrowser.nhs.uk/#/

- *OPCS Classification of Interventions and Procedures, Version 4.10 (April 2023) Volumes I Tabular list and Volume II - Alphabetical Index*

  Available to purchase from The Stationery Office:
  https://www.tsoshop.co.uk/bookstore.asp?FO=1160007&action=Listing&CLICKID=002289

- *National Clinical Coding Standards OPCS-4 reference book (2023)*

  Available for download from the Terminology and Classifications Delivery Service section on Delen.

  This can also be accessed via the Classifications Browser:

  https://classbrowser.nhs.uk/#/

- *National Tariff Chemotherapy Regimens List*

  Available for download from the Terminology and Classifications Delivery Service section on Delen.

5.2.3 Other useful information

- *ICD-10 and OPCS-4 Classifications Content Changes [2023]*

  Available for download from the Terminology and Classifications Delivery Service section on Delen.

- *Current versions of the ICD-10 and OPCS-4 Exercise and Answers Booklets* are available from 1 April as practice aids on request from information.standards@nhs.net.

- *Practice case studies are available in the CCAP Assessment Day Case Studies Practice Booklet*.

- *Practice questions are available in the CCAP Assessment Day Data Extraction and Communication Skills Practice Booklet*.

6 CCAP Assessment Day tips

The Classifications Training Team is aware of the potential stress associated with attending an assessment day as this is often linked to career progression, increase in pay and other such important things depending on the individual.

Hopefully, you won't feel too daunted or apprehensive about the assessment day, but we have provided some additional tips and guidance that we have found helpful both from our own experiences and anecdotally from candidates who have sat the assessment days themselves.

As soon as you are accepted onto the assessment day

- Get organised - The most significant way to avoid succumbing to assessment day stress and anxiety is to get organised. Think about how long you have before the assessment day itself, and then structure this time accordingly. There are plenty of free resources on the internet to assist with this, such as blank revision timetables, pomodoro timer (a time management method based on 25-minute stretches of focused work broken by five-minute breaks) apps. It is good practice to think about how you 'learn' as an individual, do you prefer to read, take notes, draw pictures/mind maps? There is no set way that it is appropriate to become organised, more you need an awareness of what works for you. Remember that it is permissible to refer to your reference books during the assessment day itself.

Weeks before the assessment day

   • Strategy - by this time you will be familiar with the structure of the assessment day and how the papers are structured, and the types of question included within. It can be helpful to decide how long you will spend on each section and which section you will tackle first. For example, with multiple choice questions an approach could be to rule out all the wrong answers first before deciding on the correct one.

   • List - the nature of clinical coding as a profession means that any work-related travel potentially involves a lot of luggage, even more so when it comes to an assessment day. Make yourself a list of everything you'll need to take with you and ensure this is somewhere

visible and memorable. It's easy to potentially forget things if you are in a heightened emotional state when preparing to travel to the assessment day.

• Time management - it can help some people to get as granular with their plans and pre assessment day logistics as thinking about food the night before, time to leave on the morning of the event. Given public travel disruptions in recent times, forward planning your journey to the assessment day is strongly advised. Try and get an early night beforehand so you are as fresh as possible on the day.

• PMA - Positive Mental Attitude. You've worked really hard to get to this point, some self-reflection on these efforts and confidence in your ability will work wonders on the day itself.

Assessment Day

• Stick to your plan - if nerves are starting to kick in, your plan will help you keep on track.

• Expect nerves - It is well known that physiologically, some nerves on the day can sharpen your focus and energy. Nerves are a reminder to yourself you want to do well and have prepared the very best you can.

• Eat! - Again, from a physiological perspective, high levels of stress can kick your body into fight or flight mode and adrenalin coursing through you, although beneficial in some ways, can mean you don't feel hungry. A little food is necessary, even if you don't feel like it, simply to fuel your brain!

• Get there – early - there is always somewhere to sit in the venue if you are there before the start time. Again, you know your own ways of coping best, sometimes shared experience of nerves with other delegates can support you, or likewise it may exacerbate your own nerves. Previous candidates have used headphones for music or podcasts prior to (although not during) the assessment so they can focus.

• Remind yourself you have done all the preparation you can and continue to be kind to yourself throughout the day. PMA goes a long way!

During the Assessment Day

• Listen to the event facilitators instructions and take a calming, grounding breath before you open the paper.

• Stick to your plan - progress through the paper in the way you had planned to, taking care to keep your eye on the clock. The event facilitators will also provide verbal reminders of time remaining through the assessment itself.

• Deal with panic - despite best plans, panic can still creep in. If this happens give yourself a minute to breathe, and if you feel you need to leave the room momentarily raise your hand and the event facilitator will come to you straight away. Breathing exercises for stress - NHS (www.nhs.uk) provides a simple breathing exercise that can be done for stress while you are sat at your desk.

• You are in control - If you do experience a panic attack of high levels of stress or anxiety, acknowledging your feelings as temporary (as unpleasant as they can be) will allow them to fall away. It might feel you can't control it but labelling it as a temporary inconvenience removes its power to control you!

After the Assessment Day

Reflect on the day, but don't get caught up comparing answers with your fellow delegates. Once your paper is submitted, you can no longer change any answers so don't waste time or emotional effort worrying about your submitted responses.

7 Train the Auditor Workshop

7.1 Workshop overview

The primary objective of this workshop is to develop an experienced accredited clinical coder into an approved clinical coding auditor. The workshop teaches delegates the correct application of the Terminology and Classifications Delivery Service Clinical Coding Audit Methodology to measure the quality of ICD-10 and OPCS-4 code assignment to identify areas of best practice and those requiring improvement.

This is a unique four-day course developed, updated and delivered by the Terminology and Classifications Delivery Service – the authoritative source of clinical classifications (ICD-10 and OPCS-4) and coding standards that underpin the health, public health and social care systems by providing quality information to support evidence-led care to patients and populations. The workshop covers five main areas of clinical coding audit and comprises of both online, classroom and independent learning:

1. Background and the principles of clinical coding audit
2. The pre-audit process
3. The audit process
4. Report writing and presentation skills
5. The post-audit process

7.2 Benefits to the delegate

- Provides an optimal learning environment
- Gives access to highly experienced and skilled Terminology and Classifications Delivery Service-based Approved Clinical Coding Trainers/Auditors
- Provides understanding of the correct application of the Terminology and Classifications Delivery Service Clinical Coding Audit Methodology
- Develops delegate confidence to conduct clinical coding audit back in the workplace, through practical application and assessments at different stages of a clinical coding audit
- Gives a greater understanding of the role and importance of clinical coding audit within the delegate's working environment.
- Provides the national clinical coding audit methodology and associated templates to support an ongoing programme of local clinical coding audit

'Excellent trainers. I thought the pace of the course was well judged. They encouraged a supportive network between all the candidates and even managed to make it fun! Thank you.'

- Supports an ongoing record of continued professional development through access to the Terminology and Classifications Delivery Service online Auditor eAssessment
- Provides an opportunity to network with approved clinical coding auditors from other organisations.

7.3 Benefits to the organisation

- A skilled approved clinical coding auditor who can deliver clinical coding audits that comply with the Terminology and Classifications Delivery Service Clinical Coding Audit Methodology

- A skilled approved clinical coding auditor who understands the need for accurate, high quality coded clinical data to support healthcare planning, reimbursement, management of services, statistical analysis and research

- Increased effectiveness of formal and informal clinical coding audits providing specific, measurable, achievable, realistic and timely (SMART) recommendations for improving clinical coding processes and procedures

- The opportunity to deliver a more cost-efficient in-house clinical coding audit programme to satisfy internal data quality and Data Security and Protection Toolkit requirements, Clinical Governance and other NHS regulatory body requirements.

'Excellent trainers who obviously know their stuff! Very professional teaching sessions and quick to pick up when anyone was struggling. Encouraging and patient. Thank you.'

'Enjoyed the course, trainers created a relaxed atmosphere whilst ensuring learning was the focus.'

7.4 Attendance criteria

This course is only available to existing accredited clinical coders (ACC) who have demonstrated that they meet all the CCAP Pre-Requisite Criteria; have successfully met the required pass marks in all aspects of the CCAP Assessment Day and have confirmed, along with their line manager, their ongoing commitment to all aspects described on the booking form.

Delegates will be able to:

- List 6 areas where potential errors could arise at the pre-audit stage, using the given pre-audit questionnaire (Marked Assessment 1).

- Allocate at least 90% of the given error keys correctly, using the Castle Bay Hospital Trust audit worksheets (Marked Assessment 2).

- Following the course, delegates must score at least 80% in their Castle Bay Trust coding audit report (Marked Assessment 3).

Only on successful completion of all marked assessments will delegates be awarded Approved Clinical Coding Auditor status.

It is important that the delegate set aside sufficient time to write their Castle Bay Hospital Trust coding audit report, as this must be submitted to information.standards@nhs.net no later than 10 working days after the workshop ends. Actual date will be confirmed by the course trainers at the end of the classroom component of the workshop.

7.5 Dress code

The dress code for the Train the Auditor Workshop is smart casual.

7.6 What the course will cover

7.6.1 Online Classroom Preparation exercises

The following modules are all mandatory eLearning modules for delegates to complete before attending the classroom component of the Train the Auditor Workshop. Access will be granted to these modules via the DLS platform upon successful completion of the CCAP Assessment Day. Delegates will then be able to complete these eLearning modules at a time that suits them, however they **must** be completed prior to attendance in the classroom as they provide the groundwork for the classroom content.

Calculating and Analysing Basic Percentages

- Complete eLearning package on DLS

Report Writing

- Complete eLearning package on DLS

Presentation Skills

- Complete eLearning package on DLS

7.6.2 Remote and Classroom Delivery

Preparing for a clinical coding audit
- Identifying the information required prior to the audit commencing and why this information is necessary
- Using the Terminology and Classifications Delivery Service Clinical Coding Audit Methodology pre-audit templates
- Planning and preparing appropriate coding audit resources
- Communicating audit/auditor requirements

Conducting clinical coding audit
- Time management
- Correct application of all aspects of the Terminology and Classifications Delivery Service Clinical Coding Audit Methodology
- The necessary skills to audit correct application of the four step coding process, national coding standards and rules and conventions of the classifications
- What the different audit error keys are and when they should be assigned
- Analysing the audit data

Report Writing and Presentation Skills
- After completing the eLearning, this section will continue to build on both report writing and presentation skills.

- Delegates will both deliver a presentation and peer review a fellow delegates presentation during the classroom session and receive feedback from the course trainer on this.

Facilitating the post clinical coding audit process
- Using the Terminology and Classifications Delivery Service Clinical Coding Audit Methodology post-audit templates
- Generating a positive climate in feedback sessions
- How to use the audit authentication mechanism
- Required structure of the Castle Bay Audit Report – Marked Assessment 3. (The report content will be based on the information the delegates have gathered from practical activities and assessment during the four-day workshop)

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Ongoing requirements

- Maintaining approved auditor status
- Continued professional development

7.7 Course materials

Each delegate receives:

- Exercises and handouts
- Samples of a number of Terminology and Classifications Delivery Service Clinical Coding Audit Methodology templates

7.8 Reference materials

Each delegate must supply their own reference books for use during the course:

- Volumes 1 and 3 of ICD-10 5th Edition
- OPCS-4.10 Volumes I and II
- National Tariff Chemotherapy Regimens List* (current version)
- National Clinical Coding Standards ICD-10 5th Edition reference book (2023)*
  National Clinical Coding Standards OPCS-4 reference book (2023)*

NB: Delegates are welcome to bring laptops/tablets to access electronic versions of the products highlighted with an*. These products can be downloaded via Delen.

ICD-10 and OPCS-4.10 is also available using the Classifications Browser, which can be accessed via the link below:

https://classbrowser.nhs.uk/#/

7.9 Course timings

Day One (online):	10:00-16:00* (various comfort breaks will be provided at intervals throughout the day)
Day Two (classroom):	09.15-17.00*
Day Three (classroom):	09.00-17:15*
Day Four (classroom):	09.00-14.00*

*Based on previous Audit Workshops and may be subject to change. Times will be verified in the Clinical Coding Audit Workshop Joining Pack sent to all successful applicants 3 weeks before the online component of the course.

7.10 Registration

All aspects of the original CCAP booking form (with Terms and Conditions) must be completed for each delegate. **NB:** The CCAP booking form covers both CCAP Assessment Day and Train the Auditor workshop attendance.

The price includes all tuition, materials, and refreshments (where relevant) on the four-day course *(unless otherwise indicated in the Course Joining Pack)*.

Delegates requiring overnight accommodation during the course will need to arrange this individually. If booking hotel accommodation as an NHS delegate, always ask for Government rate where this is available.

7.11 Next steps

Following successful completion of the workshop, each delegate receives:

- Terminology and Classifications Delivery Service Approved Clinical Coding Auditor certificate
- Clinical Coding Audit Methodology and all associated templates
- Access to the Shared Auditor Workspace and their Individual Auditor Workspace on kahootz, also including their Approved Auditor ePortfolio.
- Access to the Auditor eAssessment tool housed on the Digital Learning Solutions (DLS) platform

8 Maintaining approved clinical coding auditor status and continued professional development

To maintain approved clinical coding auditor status, auditors must evidence continued professional development (CPD). This is done by:

- maintaining an online Approved Clinical Coding Auditor ePortfolio
- conducting a minimum 20 days of clinical coding audit per year
- writing at least one audit report/presentation each year
- attending a bi-annual Approved Clinical Coding Auditor Forum
- successful completion of all three modules of the Auditor eAssessment Tool each year
- attending a three-yearly Clinical Coding Standards Refresher Course (or dedicated Trainer Refresher Course if also an approved clinical coding trainer)
- complying with the Approved Auditor Code of Conduct.

Failure to comply with all ongoing requirements will result in approved status being revoked.

Auditors are recommended to attend Introduction to Classifications training which can be delivered by any approved clinical coding trainer who has been given permission to use these materials. This training will further enhance their knowledge of classification structure, conventions and uses.

8.1 Approved Clinical Coding Auditor Forum

8.1.1 Overview

These are free interactive events, held either face-to-face or online, designed to inform and update approved clinical coding auditors and provide the opportunity for input into the ongoing development of the Clinical Coding Quality (Audit) Framework.

The forum is part of the CCAP, is held every two years and attendance is mandatory for all approved clinical coding auditors (existing and newly qualified).

The content will vary but the general format will include presentations / interactive sessions facilitated by the Terminology and Classifications Delivery Service and guest speakers, where possible. The forum will:

- Inform of classification updates and changes to national coding standards
- Advise on planned updates to the Clinical Coding Quality (Audit) Framework
- Promote group discussion and input into future updates
- Encourage sharing best practice
- Provide the opportunity to network with other approved clinical coding auditors
- Provide access to guest speakers from secondary use organisations.

8.1.2 Benefits to the delegate

- Share audit experiences and best practice
- Opportunity to network with approved clinical coding auditors from other organisations
- Provides a tool to support Trusts in developing and maintaining their internal data quality programme
- Access to highly experienced and skilled Terminology and Classifications Delivery Service-based Approved Clinical Coding Trainers/Auditors
- Promotes continual professional development (CPD)
- Is one of the criteria for maintaining approved clinical coding auditor status.

8.1.3 Benefits to the organisation

- A skilled approved clinical coding auditor who is up-to-date on the latest classification updates and changes to national clinical coding reference products and who has a commitment to their ongoing CPD.
- The continued opportunity to deliver a more cost-efficient in-house clinical coding audit programme to satisfy internal clinical data quality and Data Security and Protection Toolkit, Standard 1, Clinical Governance and other NHS body requirements, in accordance with the Terminology and Classifications Delivery Service' Clinical Coding Audit Methodology.
- Sharing best practice processes with other NHS organisations.

8.1.4 Attendance criteria

This forum is open to existing approved clinical coding auditors, including those newly qualified, and must be attended once every two years.

Failure to comply with all ongoing requirements will result in approved status being revoked.

8.1.5 Forum materials

Each delegate receives:

- Access to copies of all slide handouts
- A Terminology and Classifications Delivery Service Approved Clinical Coding Auditor Forum certificate of attendance.

8.1.6 Reference materials

It is generally not necessary for delegates to bring any reference materials with them on the day; just thoughts and ideas they can share with fellow delegates.

8.1.7 Forum timings

09.30-16.00 *

* Based on previous Auditor Forums and may be subject to change. Times will be verified in the delegate Auditor Forum Joining Pack issued three weeks before the forum.

8.1.8 Registration

All aspects of the booking form (with Terms and Conditions) / online booking form must be completed for each delegate.

All materials and refreshments on the Forum are included *(unless otherwise indicated in the Joining Pack)*.

Delegates requiring overnight accommodation will need to arrange this on an individual basis. If booking hotel accommodation as an NHS delegate, always ask for Government rate where this is available.

8.2 Auditor eAssessment tool

The Auditor eAssessment tool has been designed to refresh the practical skills and theoretical knowledge of all approved clinical coding auditors and is available on the Digital Learning Solutions (DLS) platform. This module is only available to approved clinical coding auditors.

It must be completed on an annual basis by every approved clinical coding auditor at a time that is convenient to them. Therefore the modules can be undertaken any time from 1 April and be successfully completed by 31 March. We would however advise against waiting to the very end of the financial year to take the eAssessment in the event of not meeting the objective and needing to repeat your attempt.

It comprises three modules:

Module 1	
Purpose	assigning audit error keys to randomised audit worksheets

Pass mark	95%*
Time to complete	1.5 – 2 hours
Worksheets to complete	30
Attempts per sheet	Two
Attempts per module	Four

*This is equivalent to completing 29 out of 30 audit worksheets correctly.

Module 2	
Purpose	Testing understanding of the audit methodology, auditor requirements framework, Data Security Protection Toolkit Standard 1, GDPR and Data Protection.
Pass mark	90%
Time to complete	1 – 1.5 hours
Questions to complete	30
Attempts per question	Two (unless otherwise stated)
Attempts per module	Four

Module 3	
Purpose	To make sure the auditors understanding of Findings, Conclusions and Recommendations, and how they relate to each other, are strong.
Pass mark	90%
Time to complete	20-30 minutes
Questions to complete	10
Attempts per question	Two (unless otherwise stated)
Attempts per module	Four

If you are unsuccessful in completing one or more of the above modules in the number of attempts provided, the classifications training team will work with you and plan and discuss a development plan.

New versions of all three modules are uploaded to DLS platform at the start of each financial year and are confirmed with a notification post to all approved auditors via the approved auditor kahootz workspace.

In the event, that an auditor does not meet the criteria after four attempts at a module, the Terminology and Classifications Delivery service will work with that auditor and/or their line manager on an individual basis to complete a development plan so that they can meet the required criteria.

The main purpose of the Auditor eAssessment is to support an auditor's ongoing CPD by providing a formal process for ensuring that the clinical coding audit methodology is applied correctly and consistently across the service supporting high quality audits of coded clinical data.

8.3 Consultations

From time to time, the Terminology and Classifications Delivery Service runs consultations on a variety of topics relating to the development and delivery of our products and services. The consultations provide useful information to help us make better decisions and help us understand the priorities of our stakeholders.

Consultations will be added to the searchable database found by accessing the link below, making it easy for you to see what's going on and to participate. Links to the results of consultations, including reports and information about any follow-on activities will also be visible here.

Approved clinical coding auditors are expected to contribute comments/feedback to at least one standard and/or audit consultation a year, where applicable. These standards/consultations are published on the Delen Consultations page.

Occasionally, the Classifications training team publish audit-specific consultations / polls directly on the Clinical Coding Approved Auditors workspace. All auditors are encouraged to take part in these when posted.

9 Extended leave and your approved auditor status

The advice below is to be adopted by all approved auditors' line management as good practice to ensure 'approved' status is retained in these circumstances.

After a period of extended leave[1] line managers are asked to ensure that an approved auditor has a work schedule in place which includes completion of 5 audit days. The audit should be completed with line manager's support *within 3 months of returning to work* after the period of extended leave.

Upon completion of the 5 days audit, approved auditors must notify the Terminology and Classifications Delivery Service who will, if satisfied the criteria has been met, issue a certificate confirming retention of the individual's approved auditor status until the end of the financial year after the date of the return to work.

Further audit day requirements can be worked out on a prorated basis depending on how long is left of a financial year, upon an individual's return to work after a period of extended leave. After completing the mandatory requirement of 5 audit days within 3 months of return

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[1] Defined as a period between 6 months and 12 months by the Terminology and Classifications Delivery Service.

to work, the auditor would be expected to complete a further 5 days per quarter remaining of the financial year.

> *Example:*
> *Auditor returns to work in September 2023 after 7 months leave. The auditor would then complete 5 days of audit before the end of December 2023 in line with the information above. Following the pro-rata guidance, the auditor would then complete a further 5 days of audit for the remaining quarter of that financial year.*

Any uncertainty or queries regarding requirements after a period of extended leave should be directed to the classifications training team via information.standards@nhs.net.

The approved auditor will then need to continue to evidence 20 days audit for each subsequent financial year in line with Section 8 Maintaining approved clinical coding auditor status and continued professional development.

Leave extending beyond one year would require the person to undertake the full Clinical Coding Auditor Programme again, regardless of experience. The exceptions to this are secondment opportunities and statutory shared parental, maternity and adoption leave (where the accrual of annual leave would extend the leave beyond 12 months) – the approved clinical coding auditor should discuss any of the above scenarios with a member of the Classifications training team via information.standards@nhs.net for guidance and advice. The Classifications training team will also review any other extenuating circumstances based on the individual case.

10 Other useful information

10.1 SNOMED CT Foundation course

This is an eLearning course developed by SNOMED International. The course is available to anyone seeking to acquire or demonstrate a broad foundational knowledge of SNOMED CT.

Study itself is expected to require a total of 30-35 hours. The course must be completed within a maximum of four months, but it is possible to complete it within as little as a week. Registration is required.

https://www.snomed.org/snomed-ct/learn-more/snomed-ct-elearning-courses

10.1.1 SNOMED CT Awareness for clinical coders

Alternatively, approved clinical coding auditors can go through the content of the SNOMED CT Awareness for Clinical Coders presentation available on Delen.

10.2 NHS Data Model and Dictionary eLearning

There are demonstrations available which cover a wide range of topics within the NHS Data Dictionary, which can be accessed on a modular basis depending on the information required.

Knowledge can be tested by the completion of quizzes.

The content of these demonstrations is for training purposes only and therefore may not match the current content of the NHS Data Model and Dictionary.

https://datadictionary.nhs.uk/help/demonstrations.html

10.3 ICD-11

Information on the progress of ICD-11, the replacement for ICD-10, can be found on Delen.

ICD-11 information and tools are available on the WHO ICD-11 Home Page.

10.4 NIB Strategy

The NIB (National Information Board) role is to put data and technology safely to work for patients, service users, citizens and the professionals that serve them. It brings together national health and care organisations from the NHS, public health, clinical science, social care and local government, along with appointed independent representatives to develop the strategic priorities for data and technology.

https://www.gov.uk/government/organisations/national-information-board/about

Personalised health and care 2020: a framework for action was published in November 2014 in partnership with the Department of Health (now the Department of Health and Social Care).

It can:

- give patients and citizens more control over their health and wellbeing
- empower carers
- reduce the administrative burden for care professionals
- support the development of new medicines and treatments

This framework has been developed based on evidence from many sources, including civil society and patient organisations, as well as directly from service users.

This is not a strategy in the conventional sense. It is not a national plan, but a framework for action that will support frontline staff, patients and citizens to take better advantage of the digital opportunity.

The National Information Board will report annually on progress made against the priorities detailed in this framework and review them each year to reflect changing technology and accommodate new requirements from the public and staff. The proposals in this framework are not comprehensive but they represent the core and immediate priorities for delivery of modern digital health and care services

https://www.gov.uk/government/publications/personalised-health-and-care-2020

10.5 NHS Long Term Plan

The NHS Long Term Plan was published on Monday 7 January 2019, and sets out ambitions for improving the NHS over the next decade.

The plan describes how the NHS will improve care for patients and make the NHS a better place to work for staff, while overcoming key challenges. A summary of the objectives and areas of focus of the plan is also available.

Technology is recognised as a key enabler in making our NHS work better for both patients and staff, and the plan sets out ambitious plans for digitally enabled care to go mainstream across the NHS. In ten years' time, we expect the existing model of care to look markedly different.

Plans to make better use of data and digital technology include providing more convenient access to services and health information for patients, with the new NHS App as a digital 'front door', better access to digital tools and patient records for staff, and improvements to the planning and delivery of services based on the analysis of patient and population data.

https://www.longtermplan.nhs.uk/publication/nhs-long-term-plan/