

NCAPOP Outlier Guidance: Summary of changes (October 2025)

Summary of key changes	
Previous version (January 2024)	Current version (October 2025) New text is shown in bold and italics
<p>1 Introduction</p> <p>“The Healthcare Quality Improvement Partnership (HQIP) have developed this guidance for use in the NHS. It was last updated for English data in September 2021, following on from updates to the guidance in 2017 with an implementation guide in 2018. The latter is based on the original 2011 Department of Health guidance. The previous 2021 guidance can be found on the HQIP website.”</p>	<p>1 Introduction</p> <p>Wording updated to reflect the date of the new update, and to clarify the position around devolved nations and crown dependencies.</p> <p>“The Healthcare Quality Improvement Partnership (HQIP) have developed this guidance for use in the NHS. <i>The guidance was updated in October 2025; a summary of the key changes since the previous version (published January 2024) is available on the HQIP website. This guidance covers the outlier follow up process for England and Wales. Audits that are generating outliers for other devolved nations and crown dependencies should liaise with their HQIP Associate Director to agree a process.</i>”</p>
<p>8.1 Notification of alert level outliers</p>	<p>8.1 Notification of alert level outliers</p> <p>Additional paragraph added regarding the process for Wales:</p> <p><i>“For Wales:</i></p> <p><i>The process for notification of alert level outliers in Wales is also set out in Table 1. All alert level outliers should be reported to Welsh Government and HQIP.”</i></p>
<p>8.2 Notification of alarm level outliers and non-participation outliers</p>	<p>8.2 Notification of alarm level outliers and non-participation outliers</p> <p>Additional paragraph added regarding the process for Wales:</p> <p><i>“For Wales:</i></p> <p><i>Following notification to the Welsh Government and HQIP by the NCAPOP audits, the Welsh Government will follow the process stated in Table 2 and take any necessary action. The Welsh Government audit lead will send a monthly high-level summary to the</i></p>

	<p>Welsh Government Quality Delivery Board of alarm and alert level outliers.</p> <p><i>When an audit provider has problems with a poorly engaged healthcare provider, this should be escalated to the HQIP medical director who will discuss with audit provider colleagues and with relevant colleagues in the Welsh Government. The Welsh Government will then assume responsibility for the subsequent management.</i></p>
<p>8.3 Individual NCAPOP provider outlier policies</p>	<p>8.3 Individual NCAPOP provider outlier policies</p> <p>Additional paragraph added regarding the embargo of outlier information until after the report publication:</p> <p><i>“Audit providers are required to ensure that their outlier policies explicitly state that any communications regarding the outlier status of individual trusts or health boards remain under embargo until after the publication of the relevant State of the Nation report. Audit providers must also communicate this embargo directly to each trust and health board at the point when outlier notifications are issued, making clear that no public disclosure or external communication of outlier status is permitted prior to the agreed publication date. This embargo is also relevant to any data that is provided to individual trusts or health boards prior to publication.”</i></p>
<p>8.3 Individual NCAPOP provider outlier policies</p> <p>Provider checklist introduction: “Does the policy describe:”</p>	<p>8.3 Individual NCAPOP provider outlier policies</p> <p>Provider checklist introduction: “Does the policy describe, <i>or provide links to, the following information:</i>”</p>
<p>8.3 Individual NCAPOP provider outlier policies</p> <p>Provider checklist, point 7: “The timescales, notification and escalation steps for running the outlier process (which in some cases may need to deviate from those set out in the HQIP Outlier Guidance)?”</p>	<p>8.3 Individual NCAPOP provider outlier policies</p> <p>Additional text added about the embargo of information prior to report publication:</p> <p>Provider checklist, point 7: “The timescales, notification and escalation steps for running the outlier process (which in some cases may need to deviate from those set out in the HQIP Outlier Guidance)? <i>All notification stages should specify that no public disclosure or external communication of</i></p>

	outlier status is permitted prior to the agreed publication date.”
<p>Table 1, Step 1 (Wales column)</p> <p>“NCAPOP audit providers should inform the Welsh Government (wgclinicalaudit@gov.wales) and HQIP of all outliers at the alert level. NCAPOP audit providers will need to ensure that in their regular local level Health Board performance reports, it is clear if a Health Board is an outlier at the alert level.”</p>	<p>Table 1, Step 1 (Wales column)</p> <p>“NCAPOP audit providers should inform the Welsh Government (wgclinicalaudit@gov.wales), HQIP associate director and project manager (www.hqip.org.uk/about-us/our-team/) and HQIP NCAPOP Director of Operations, Jill Stoddart (jill.stoddart@hqip.org.uk) of all outliers at the alert level. NCAPOP audit providers will need to ensure that in their regular local level Health Board performance reports, it is clear if a Health Board is an outlier at the alert level.”</p>
<p>Table 1, Step 2 (Owner column)</p> <p>“England = Healthcare provider lead clinician</p> <p>Wales = Health Board”</p>	<p>Table 1, Step 2 (Owner column)</p> <p>“England = Healthcare provider lead clinician</p> <p>Wales = Health Board Medical Directors”</p>
<p>Table 2, Step 5</p> <p>“Contact healthcare provider lead clinician by telephone, prior to sending written notification of confirmed ‘alarm’ 3SD outliers and/or non-participation outliers to healthcare provider CEO and copied to healthcare provider lead clinician and medical director. For 3SD outliers, all relevant data and statistical analyses, including previous response from the healthcare provider lead clinician should be made available to healthcare provider medical director and CEO.</p> <p>The relevant NCAPOP project specific outlier policy should also be provided to healthcare provider colleagues.”</p>	<p>Table 2, Step 5</p> <p>The requirement that the lead clinician should be contacted by telephone has been removed.</p> <p>Additional text has been added around the internal sharing of information within the healthcare provider, and to be clear about the timing of country-specific actions around notifying other organisations.</p> <p>“Contact healthcare provider lead clinician, prior to sending written notification of confirmed ‘alarm’ 3SD outliers and/or non-participation outliers to healthcare provider CEO and copied to healthcare provider lead clinician and medical director. The letter should include the following request (which can be adapted to be relevant to a project): “Please ensure this letter is circulated to the appropriate people in the trust/health board within 5 working days. This may include, but is not limited to, the trust or health board’s director of nursing, the clinical audit</p>

	<p>department manager / lead, any relevant clinical directors, and the trust chair (for England only)."</p> <p>For 3SD outliers, all relevant data and statistical analyses, including previous response from the healthcare provider lead clinician should be made available to healthcare provider medical director and CEO.</p> <p>The relevant NCAPOP project specific outlier policy should also be provided to healthcare provider colleagues.</p> <p>At the same time, the following country-specific actions should be taken:"</p>
<p>Table 2, Step 5 (Wales column)</p> <p>"For Welsh providers, notify wgclinicalaudit@gov.wales and HQIP associate director and project manager (www.hqip.org.uk/about-us/our-team/) of confirmed 'alarm' status."</p>	<p>Table 2, Step 5 (Wales column)</p> <p>"For Welsh providers, notify wgclinicalaudit@gov.wales, HQIP associate director and project manager (www.hqip.org.uk/about-us/our-team/), and HQIP NCAPOP Director of Operations, Jill Stoddart (jill.stoddart@hqip.org.uk) of confirmed 'alarm' status.</p> <p>The Welsh Government will provide a monthly report of all alarm and alert level outliers to its Quality Delivery Board."</p>
<p>Table 2, Step 6 (Within working days column)</p> <p>"England = NCAPOP audit provider report publication date</p> <p>Wales = 10"</p>	<p>Table 2, Step 6 (Within working days column)</p> <p>"England and Wales = NCAPOP audit provider report publication date"</p>
<p>Table 2, Step 7 (Owner column)</p> <p>"England = CQC</p> <p>Wales = Healthcare Inspectorate Wales"</p>	<p>Table 2, Step 7 (Owner column)</p> <p>"England = CQC</p> <p>Wales = Healthcare Inspectorate Wales in collaboration with Welsh Government"</p>

<p>Table 2, Step 7 (Within working days column)</p> <p>“Determined by the CQC and HIW”</p>	<p>Table 2, Step 7 (Within working days column)</p> <p>“Determined by the CQC or Welsh Government”</p>
<p>Appendix A Non-Participation</p> <p>Table footnote</p> <p>“*For non-participation, the Outlier process as outlined in Table 2 will start at step 5 with the healthcare provider lead clinician being notified by telephone that their non-participation is to be flagged up to the Trust CEO and Medical Director and the Outlier process followed with notification of CQC, NHS England and HQIP.”</p>	<p>Appendix A Non-Participation</p> <p>The requirement that the lead clinician should be contacted by telephone has been removed. Additionally, the text has been updated to be clear how the process differs between England and Wales.</p> <p>Table wording updated throughout for additional clarity.</p> <p>Table footnote</p> <p>“*For non-participation, the Outlier process (as outlined in Table 2) will start at step 5, with the healthcare provider lead clinician being notified that their non-participation is to be flagged up to the Trust CEO and Medical Director, and the Outlier notification process continued with either:</p> <ul style="list-style-type: none"> ▪ Notification of CQC, NHS England and HQIP (For English providers) ▪ Notification of the Welsh Government and HQIP (For Welsh providers)”.