

National Clinical Coding Training Handbook 2016-17

Clinical Classifications Service

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1 Introduction

Information Governance Toolkit Requirement 510 confirms that an organisation must ensure that all its clinical coders are sufficiently trained to ensure that they maintain the highest standards of clinical coding. Training programmes for clinical coding staff entering coded clinical data must be comprehensive and use material that conforms to national clinical coding standards. This Requirement further describes that novice clinical coders undertake formal Clinical Coding Standards Course classroom training within 6 months of commencing employment and that they attend Clinical Coding Standards Refresher Course training every three years thereafter.

The contents of the national clinical coding training programmes provide the necessary training in the general and specialist knowledge and skills required to use the national clinical coding standards for the following classifications used in everyday clinical coding within the NHS:

- ICD-10: International statistical classification of disease and related health problems – Fifth Edition (2016)
- OPCS-4: OPCS Classification of Interventions and Procedures Version 4.7 (April 2014).

The success of the training delivered depends upon the commitment and competence of the individual and clear support from their clinical coding manager. It is therefore essential that an individual and their organisation understand the base knowledge and skills required as well as the ongoing commitment.

This Handbook provides the activities, roles and protocols which individually and collectively ensure that standards associated with national clinical coding training are met.

1.1 Purpose of document

The document provides an outline for both the mandatory national Clinical Coding Standards Course (CCSC) and the Clinical Coding Standards Refresher Course (CCSRC) so that for each course the reader has a thorough understanding of:

- Pre-requisite skills, knowledge and experience
- Content and format (pre-course, course, post-course)
- Benefits of national clinical coding training
- Delegate and line manager roles and responsibilities
- Ongoing requirements and Continued Professional Development (CPD) to maintain clinical coding skills and work towards accredited clinical coder (ACC) status.

1.1.1 Audience

Novice clinical coders recently employed in coding departments who need to develop the required skills and knowledge to apply national clinical coding standards for the ICD-10 and OPCS-4 classifications.

Experienced and accredited clinical coders needing to refresh and further develop their existing skills and knowledge to apply national clinical coding standards for the ICD-10 and OPCS-4 classifications.

Line managers to understand the level of initial and ongoing commitment required by the individual, the line manager and the organisation to embed a clinical coder in the department and support the ongoing training required to ensure robust data quality.

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 training ensures the quality of coded clinical data to satisfy NHS regulatory bodies that organisations exemplify best practice and promote a culture of continuous improvement.

The national clinical coding training courses support organisations by ensuring the availability of the necessary training to promote highly qualified and skilled staff. The CCSC and CCSRC materials are developed and maintained by the Clinical Classifications Service (CCS) – 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 content and format of the CCSC and CCSRC materials are developed in collaboration with approved clinical coding trainers through the Clinical Coding Trainer Sub-Groups.

2 Clinical Coding Standards Course

2.1 Pre-requisite skills, knowledge and experience

The Clinical Coding Standards Course (CCSC) pre-requisite criteria ensure that an applicant has the base skills and knowledge required to become a clinical coder.

The CCSC is open to all staff already employed as a novice clinical coder in an NHS Trust (including a Mental Health Trust, although there is a separate dedicated Mental Health Standards Course outside the scope of this document) or an independent sector treatment centre (ISTC) which treats and codes consultant episodes for NHS patients.

It is essential therefore, that applicants fulfil **all** of the following criteria **prior** to attending the CCSC:

1. Have been employed as a clinical coder for between 1-6 months. Ideally, the novice clinical coder will have been working within the department for a minimum of 6 weeks before attending the course
2. Have a personal commitment to continued professional development including completion of assessment based learning in a variety of formats, e.g. classroom-led learning, eLearning, self-learning
3. Have a structured training plan in place agreed with their line manager detailing the time and resources available to complete all mandatory elements before, during and after the course, as necessary
4. Have completed the following two mandatory eLearning courses prior to attendance on the classroom CCSC
 - Basic Anatomy and Physiology eLearning – all modules (*Provides certificate / screen print from End of Course Assessment*)
 - Basic Introduction to Clinical Coding – Modules 1 and 2 (*Provides certificate / screen print from End of Module Tests*).
5. Have all the necessary classification books, Chemotherapy Regimen and High Cost Drugs Lists and associated Clinical Coding Guidance documentation to bring with them to the classroom course.

IMPORTANT INFORMATION:

Criteria 4 – Will be evidenced by provision of certificates.

Criteria 5 – The CCSC course trainer will order the National Clinical Coding Standards ICD-10 5th Edition and OPCS-4 reference books (2016) and Basic Anatomy and Physiology Instruction Manual for all their CCSC delegates.

It is important that the applicant and Line Manager work together to ensure the applicant meets all of the criteria listed above.

2.2 Booking a place on the Clinical Coding Standards Course (CCSC)

As per Information Governance Toolkit Requirement 510, coding managers must ensure that their novice clinical coder is booked on to a classroom-based CCSC within 6 months of commencing employment within their department.

CCSC training can be arranged/booked through one of the following options:

1. An in-house Clinical Classifications Service approved Apprentice or Experienced clinical coding trainer within your own department
2. A Clinical Classifications Service approved Apprentice or Experienced clinical coding trainer based within a neighbouring / other Trust
3. A Clinical Classifications Service approved Apprentice or Experienced clinical coding trainer based within a [Clinical Coding Academy](#) if you are a subscribing Trust
4. A Commercial / Independent Clinical Classifications Service approved Apprentice or Experienced clinical coding trainer via a Google search for 'Approved Clinical Coding Trainer'.

NB: Confirmation of a trainer's 'approved' status can be obtained by emailing information.standards@hscic.gov.uk

Training course costs will vary depending on the chosen option and fees are available directly from the training provider, and not the Clinical Classifications Service.

Refer to the CCSC course details (Section 2.3) for further information about pre-course, course and post-course requirements.

2.3 Clinical Coding Standards Course Details

Course delegates and their line managers need to be aware of all the following content prior to booking on to a course.

2.3.1 Course Overview

2.3.1.1 Mandatory pre-course eLearning

As referenced in Section 2.1, delegates must complete the following two mandatory eLearning courses available to download from [TRUD](#) before attending the classroom element of the CCSC:

- Basic Anatomy and Physiology eLearning – all modules
- Basic Introduction to Clinical Coding – Modules 1 and 2

There are 11 modules within the Basic Anatomy and Physiology eLearning package that the novice coder must complete, including all the end of module and overall assessments. Estimated time to complete this package is approximately 5 hours. A copy of the delegate's overall assessment results must be made available to the CCSC trainer prior to attending the classroom course. ***The delegate and their line manager must therefore factor in enough time before the classroom course for this to be done.***

There are two modules within the 'Basic Introduction to Clinical Coding' eLearning package, both of which require the delegate to complete a Workbook requiring sign-off by their line manager. Each Workbook contains a number of activities. Some activities are to be done at the delegate's desk using the internet and other resources; some they need to find out information from within their organisation. The Workbooks must be complete and taken with the delegate to the first day of their Clinical Coding Standards Course; their trainer will ask to see these. A copy of the delegate's test results from each module must be made available to the CCSC trainer prior to attending the classroom course. ***The delegate and their line***

manager must therefore factor in enough time before the classroom course for this to be done.

2.3.1.2 Course modules

This practical assessment-based course teaches recently appointed novice clinical coders how to use their classification books and follow the four step coding process to ensure correct application of ICD-10 and OPCS-4 national clinical coding standards and facilitate accurate coded clinical data.

This course is delivered across four modules in **no less than 21 days and no more than 25 days**. The exact course length must be agreed in advance between the Approved Clinical Coding Trainer and the delegate's line manager depending on the needs of the delegate / organisation.

The four modules cover:

- Module 1:** Organisation and structure of ICD-10 and OPCS-4
Four Step Coding Process for ICD-10 and OPCS-4
Essential Coding Pointers
Basic Fraud Awareness
Several ICD-10 and OPCS-4 coding standards (general, chapter and coding)
Self-Learning Workbook Exercises
Recap Exercise
Post Module written Assessment (practical and theory papers)
- Module 2:** Several ICD-10 and OPCS-4 coding standards (general, chapter and coding)
Case Studies
Self-Learning Workbook Exercises
Recap Exercise
Post Module written Assessment (practical and theory sections)
- Module 3:** Several ICD-10 and OPCS-4 coding standards (general, chapter and coding)
Case Studies
Self-Learning Workbook Exercises
Recap Exercise
Post Module written Assessment (practical and theory sections)
- Module 4:** Several ICD-10 and OPCS-4 coding standards (general, chapter and coding)
Case Studies
Self-Learning Workbook Exercises
Recap Exercise
Data Extraction
Post Module written Assessment (practical and theory sections)
End of Course Assessment

The content of Modules 2 and 3 can be delivered in any order. The timing of the modules is open for discussion between the course trainer and the coding manager, e.g. one module each month for four consecutive months, four modules delivered over 8 weeks with a week's gap inbetween modules, etc.

2.3.1.3 Benefits to the delegate

- Provides an optimal learning environment
- Gives access to highly experienced and skilled Clinical Classifications Service Approved Clinical Coding Trainers
- Provides understanding of the correct application of the national clinical coding training standards for both ICD-10 and OPCS-4
- Develops delegate confidence to accurately code when back in the workplace, through practical activities and assessments throughout the course
- Gives a greater understanding of the role and importance of clinical coding within the delegate's working environment
- Supports an ongoing record of continued professional development through regular ongoing training
- Can provide an opportunity to network with clinical coders from other organisations.

"The course was both informative and enjoyable - I really enjoyed the way it was taught through presentations and lots of interactive exercises both requiring me to work as an individual and with course mates. There were lots of opportunities to ask questions and I found the examples that we were coding to be really clear and helpful to real-life problems in case notes."

2.3.1.4 Benefits to the organisation

- Elements of self-learning to instil research skills in the novice coder from the outset
- Set of rigorous objectives that delegates are assessed against to support competence and confidence when back in the workplace
- Classroom delivery by a learner-focused Approved Clinical Coding Trainer who can deliver formal clinical coding training that complies with the Clinical Coding Trainer Framework and is engaging to all novice clinical coders
- Delivery by a skilled Approved Clinical Coding Trainer 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 training events and of learning transferred to the workplace
- The opportunity to deliver a more cost-efficient in-house clinical coding training programme to satisfy internal data quality and Information Governance, Clinical Governance and other NHS regulatory body requirements.

2.3.1.5 Attendance criteria

This course is only available to clinical coders employed within an NHS Trust (including a Mental Health Trust, although there is a separate dedicated Mental Health Standards Course outside the scope of this document) or an independent sector treatment centre (ISTC) which treats and codes consultant episodes for NHS patients.

By the end of Module 1 delegates will be able to:

- Accurately assign ICD-10 5th Edition and OPCS-4 codes to at least 80% of questions on the Post Module 1 Practical Assessment Paper
- Correctly write down the answers to at least 80% of the questions on the Post Module 1 Theory Assessment Paper.

By the end of Module 2 delegates will be able to:

- Accurately assign ICD-10 5th Edition and OPCS-4 codes to at least 85% of the questions in the Practical section of the Post Module 2 Assessment Paper
- Correctly write down the answers to at least 85% of the questions in the Theory section of the Post Module 2 Assessment Paper.

By the end of Module 3 delegates will be able to:

- Accurately assign ICD-10 5th Edition and OPCS-4 codes to at least 85% of the questions in the Practical section of the Post Module 3 Assessment Paper
- Correctly write down the answers to at least 85% of the questions in the Theory section of the Post Module 3 Assessment Paper.

By the end of Module 4 delegates will be able to:

- Accurately assign ICD-10 5th Edition and OPCS-4 codes to at least 85% of the questions in the Practical section of the Post Module 4 Assessment Paper
- Correctly write down the answers to at least 85% of the questions in the Theory section of the Post Module 4 Assessment Paper.

By the end of the Clinical Coding Standards Course, delegates will be able to:

- Select at least 18 out of 20 (90%) correct answers to the ICD-10 and OPCS-4 multiple choice questions using their reference books
- Accurately complete a minimum of 38 out of 40 (95%) ICD-10 and OPCS-4 national standard statements using the list of missing words provided
- Accurately assign ICD-10 5th Edition and OPCS-4 codes to at least 85% for the five given case studies
- Complete all the required exercises in the Self-Learning Workbook within the timeframes given by the course trainer.

Delegates and line managers need to be aware in advance of the course and module objectives so that they understand the time and effort required to meet the objectives. Delegates are required to:

- Complete a number of exercises in their Self-Learning Workbook throughout the course and in-between modules
- Successfully complete written theory and practical assessments at the end of each module and an overall course assessment
- Successfully complete any Interim Attendance Action Development Plans when a delegate is unable to attend any part (i.e. session, day or module) of the course for whatever reason(s)
- Successfully complete any Action Development Plan Agreements within agreed timescales where an individual does not meet any of the module and/or course objectives.

Where Action Development Plan Agreements are required, the trainer, the delegate and the delegate's line manager must agree on the appropriate course of action, timeframes, how the Action Plan will be checked and by whom.

The delegate will only receive a Certificate of Successful Completion when they fully evidence they have met all the module and course objectives for the Clinical Coding Standards Course. Certificates will therefore only be issued on successful completion of Action Development Plans where these are required.

2.3.1.6 What will the course cover?

Using classification books and reference products

- Learning about the organisation and structure of ICD-10 Volumes 1, 2 and 3
- Learning about the organisation and structure of OPCS-4 Volumes I and II
- Using each step of the Four Step Coding Process to correctly assign ICD-10 and OPCS-4 codes
- Navigating the National Clinical Coding Standards ICD-10 5th Edition and OPCS-4 reference books to locate national clinical coding standards
- Using the Coding Clinic
- Understanding the structure and content of the OPCS-4 Chemotherapy Regimens and High Cost Drugs Lists
- Learning how to use the Chemotherapy Regimens Clinical Coding Standards and Guidance OPCS-4 document
- Learning how to use the High Cost Drugs Clinical Coding Standards OPCS-4 document.

Applying national clinical coding standards

- Completing quick-fire scenarios and more detailed case studies to correctly assign ICD-10 and OPCS-4 codes for all ICD-10 and OPCS-4 chapters
- Completing recap exercises and other activities to reinforce the practical and theoretical aspects of national clinical coding standards for ICD-10 and OPCS-4
- Using all available reference products to support accurate code assignment.

Data extraction, research and fraud awareness

- Undertaking basic internet searches to research various illnesses and interventions
- Selecting all relevant conditions, circumstances and interventions to be coded by following basic data extraction guidance and reviewing sample source documentation
- Learning how to report suspected fraud.

Monitoring and assessment

- Completing regular practical and theoretical assessments to monitor personal progress
- Identifying areas for further development where necessary.

Time management

- Completing self-learning, individual exercises, assessments, action plans (where required), and group activities to required deadlines.

Ongoing requirements

- Mandatory Clinical Coding Standards Refresher Course training
- Specialty workshops
- Working towards accredited clinical coder (ACC) status.

2.3.1.7 Course Materials

Each delegate receives:

- Delegate course folder
- Written Exercises and Answer sheets
- Reference Handouts
- ICD-10 and OPCS-4 Exercise and Answer Booklets
- Self-Learning Workbook Template
- Individual Course Record of Assessment / performance report
- Certificate of Successful Completion.

2.3.1.8 Reference Materials

The delegate's line manager must supply their delegate with a copy of the following for use during the course:

- Volumes 1 and 3 of ICD-10 5th Edition (fully updated to reflect the errata published in the *Coding Clinic* Ref 112)*
- OPCS-4.7 Volumes I and II*
- Supplementary Information Booklet OPCS-4
- National Tariff Chemotherapy Regimens List**
- National Tariff High Cost Drug List**
- Chemotherapy Regimens Clinical Coding Standards and Guidance OPCS-4**
- High Cost Drugs Clinical Coding Standards OPCS-4**

NB: All classification books highlighted with an * should preferably be new and not passed down from previous users as this can cause confusion for novice coders.

NB: Delegates are welcome to bring laptops/tablets to access electronic versions of the products highlighted with an **. Delegates may also use the OPCS-4.7 e-Version and ICD-10 5th Edition e-Version (when available)*. These products can be downloaded via TRUD:

<https://isd.hscic.gov.uk/trud3/user/guest/group/0/home>

Coding Clinic Ref 88: Coding of Co-morbidities

NB: Delegates can download the latest version of the *Coding Clinic* onto their laptops/tablets if desired.

NB: The course trainer will order the following products for their delegates and issue these on Day 1 of the CCSC:

- National Clinical Coding Standards ICD-10 5th Edition reference book (2016)
- National Clinical Coding Standards OPCS-4 reference book (2016)
- Basic Anatomy and Physiology Instruction Manual

Important information

Clinical coding managers are asked not to order the above reference products for new recruits as trainers must ask their delegates to complete a Clinical Coding Reference Book Register Form to send to information.standards@hscic.gov.uk to ensure the delegate is then registered with the Clinical Classifications Service (CCS) to receive future updates.

Clinical coding managers must note that the three reference products quoted above are currently provided free of charge to NHS-based clinical coders and as such these are the property of the individual clinical coder and not the employing organisation. The CCS can only provide one copy of the Basic Anatomy and Physiology Instruction Manual to a clinical

coder during their career – should this be lost or damaged, it is up to the individual or their organisation to purchase a replacement via information.standards@hscic.gov.uk.

2.3.1.9 Course Timings

The course timings will be provided by the course trainer.

2.3.1.10 Delegate Responsibilities – Summary

The delegate is responsible for:

- Ensuring punctuality at all time
- Respecting the course trainer and fellow delegates
- Attending all modules of the Clinical Coding Standards Course
- Completing and evidencing all mandatory pre-course eLearning prior to the classroom training
- Completing all Self-Learning Workbook exercises during the course to the timeframes instructed by the course trainer
- Completing all assessments to the required criteria
- Completing all necessary Action Development Plans to the required criteria and timeframes supplied by the course trainer.

2.3.1.11 Line Manager Responsibilities – Summary

The line manager is responsible for:

- Ensuring their novice coder completes a CCSC within 6 months of employment
- Providing clean copies of **all** reference products described in Section 2.3.1.8 above (with the exception of the two National Clinical Coding Standards reference books and Basic Anatomy and Physiology Instruction Manual)
- Providing ongoing support to the delegate to ensure sufficient time and resources are available for completion of the two mandatory eLearning packages before the classroom course, all modules of the course including time to complete Self-Learning exercises in-between modules
- Discussing with the course trainer appropriate Action Development Plan Agreements and timeframes during the course and/or after the course where necessary, and providing ongoing support for the delegate to complete these.

2.3.1.12 Next Steps

Successful completion will result in compliance with Level 1 of Information Governance Toolkit Requirement 510.

3 Clinical Coding Standards Refresher Course

3.1 Pre-requisite skills, knowledge and experience

The Clinical Coding Standards Refresher Course pre-requisite criteria ensure that an applicant has the ongoing skills and knowledge required by a clinical coder.

The CCSRC is open to all staff already employed as a clinical coder in an NHS Trust (including a Mental Health Trust, although there is a separate dedicated Mental Health Standards Refresher Course outside the scope of this document) or an independent sector treatment centre (ISTC) which treats and codes consultant episodes for NHS patients.

Clinical coders must attend a Clinical Coding Standards Refresher Course once every 3 years from their successful completion of a Clinical Coding Standards Course.

It is essential therefore, that applicants fulfil **all** of the following criteria **prior** to attending the CCSRC:

1. Have been employed as a clinical coder for 2-3 years before attending their first CCSRC
2. Have attended a CCSRC three years ago (where applicable) (*Provides previous course certificate*)
3. Have a personal commitment to continued professional development including completion of assessment based learning in a variety of formats, e.g. classroom-led learning, eLearning, self-learning
4. Have a structured training plan in place agreed with their line manager detailing the time and resources available to complete all mandatory elements before, during and after the course, as necessary
5. Have completed the following mandatory eLearning course prior to attendance on the classroom CCSRC:
 - o Four Step Coding Process ICD-10 eLearning – all modules (*Provides line manager email confirmation / screen print from End of Course Assessment*)
6. Have completed and returned the pre-course questionnaire within the timeframe set by the trainer prior to the course start date to allow for adequate trainer preparation
7. Have all the necessary classification books, Chemotherapy Regimen and High Cost Drugs Lists and associated Clinical Coding Guidance documentation to bring with them to the classroom course.

IMPORTANT INFORMATION:

Criteria 2 and 5 – Will be evidenced by provision of confirmation email / screen print / certificate.

Criteria 6 – Will be evidenced by completion of the pre-course questionnaire.

It is important that the applicant and Line Manager work together to ensure the applicant meets all of the criteria listed above.

3.2 Booking a place on the Clinical Coding Standards Refresher Course (CCSRC)

As per Information Governance Toolkit Requirement 510, coding managers must ensure that their clinical coder attends CCSRC training every 3 years.

CCSRC training can be arranged/booked through one of the following options:

1. An in-house Clinical Classifications Service approved Experienced clinical coding trainer within your own department
2. A Clinical Classifications Service approved Experienced clinical coding trainer based within a neighbouring / other Trust
3. A Clinical Classifications Service approved Experienced clinical coding trainer based within a [Clinical Coding Academy](#) if you are a subscribing Trust
4. A Commercial / Independent Clinical Classifications Service approved Experienced clinical coding trainer via a Google search for 'Approved Clinical Coding Trainer'.

NB: Confirmation of a trainer's 'approved' status can be obtained by emailing information.standards@hscic.gov.uk

Training course costs will vary depending on the chosen option and fees are available directly from the training provider, and not the Clinical Classifications Service.

- Refer to the CCSRC course details (Section 3.3) for further information about pre-course, course and post-course requirements.

3.3 Clinical Coding Standards Refresher Course Details

Course delegates and their line managers need to be aware of all the following content prior to booking on to a course.

3.3.1 Course Overview

This practical assessment-based course is fundamental to the continued professional development of all experienced clinical coders by assessing that they are keeping their practical coding skills and theoretical knowledge up-to-date for the ICD-10 and OPCS-4 clinical classifications and associated updates. The course also provides experienced clinical coders with the opportunity to reinforce the four step coding process to ensure correct application of ICD-10 and OPCS-4 national clinical coding standards to facilitate accurate coded clinical data.

This course is delivered across four days in a classroom environment.

3.3.1.1 Mandatory pre-course eLearning and questionnaire

As referenced in Section 3.1, delegates must complete the following mandatory eLearning course available to download from [TRUD](#) before attending the classroom element of the CCSRC:

- Four Step Coding Process ICD-10 eLearning – all 7 modules

Estimated time to complete this package is approximately 1.5 hours. ***The delegate and their line manager must therefore factor in enough time before the classroom course for this to be done.***

Prior to the course starting, the course trainer will email the CCSRC pre-course questionnaire which must be completed by the delegate and returned to the course trainer within the given timeframe to allow for adequate trainer preparation. This will help ensure the course meets both the needs of the delegates and the organisation. The Trainer will aim to cover any areas of concern/problems time permitting; however this is not the correct forum for discussing individual clinical coding queries. These must be submitted using the National Clinical Coding Query Mechanism.

3.3.1.2 Benefits to the delegate

- Provides an optimal learning environment
- Gives access to highly experienced and skilled Clinical Classifications Service Approved Clinical Coding Trainers
- Provides reinforcement of the correct application of the national clinical coding training standards for both ICD-10 and OPCS-4
- Opportunity to refresh and consolidate existing practical coding skills for ICD-10 and OPCS-4
- Opportunity to refresh and consolidate existing theoretical coding knowledge for ICD-10 and OPCS-4
- Opportunity to apply this knowledge to consistently and accurately identify the correct ICD-10 and OPCS-4 codes for a range of typical case note and more complex scenarios
- Opportunity to share clinical coding experiences and best practice with fellow delegates
- Opportunity to refresh and consolidate existing medical terminology and anatomy and physiology knowledge
- Identifies any areas for further development
- Increases delegate confidence to accurately code when back in the workplace, through practical activities, group discussions and assessments throughout the course
- Supports an ongoing record of continued professional development through regular ongoing training
- Can provide an opportunity to network with experienced clinical coders from other organisations.

“Given the frequency of clinical coding standard amendments I found this course to be a fantastic reinforcement of my previous knowledge and it also filled in a few gaps where guidance had been updated. I would certainly recommend this course to my colleagues not only because of it being compulsory but also as it helps to keep your work up to date with the latest standards.”

“The course was fantastic, it covered all areas that I felt I needed to work on. I strongly recommend it to other coders.”

3.3.1.3 Benefits to the organisation

- Set of rigorous objectives that delegates are assessed against to support ongoing competence and confidence when back in the workplace
- A blended learning approach to reinforcing national clinical coding standards

- Classroom delivery by a learner-focused Approved Clinical Coding Trainer who can deliver formal clinical coding training that complies with the Clinical Coding Trainer Framework and is engaging to all experienced clinical coders
- Delivery by a skilled Approved Clinical Coding Trainer 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 training events and of learning transferred to the workplace
- The opportunity to deliver a more cost-efficient in-house clinical coding training programme to satisfy internal data quality and **Information Governance**, **Clinical Governance** and other NHS regulatory body requirements.

3.3.1.4 Attendance criteria

This course is only available to experienced clinical coders employed within an NHS Trust (including a Mental Health Trust, although there is a separate dedicated Mental Health Standards Refresher Course outside the scope of this document) or an independent sector treatment centre (ISTC) which treats and codes consultant episodes for NHS patients.

By the end of the course delegates will be able to:

- Accurately assign ICD-10 and OPCS-4 codes to the given case studies using the Four Step Coding Process.
- List a minimum of 10 bullet points for the given Essential Coding Pointers topics.
- Correctly assign the ICD-10 codes to the Osteotomy activity using the osteotomy table provided.
- Correctly assign the ICD-10 codes to the metastatic malignant neoplasm activity using the table provided.
- Select the correct option for at least 17 of the 20 given multiple choice questions, using their reference books.
- Correctly assign ICD-10 and OPCS-4 codes to at least 85% accuracy for 8 of the 10 given case studies.

Delegates and line managers need to be aware in advance of the course objectives so that they understand the time and effort required to meet the objectives. Delegates are required to:

- Complete a number of exercises throughout the course
- Successfully complete written theory and practical assessments at the end of the course. **NB:** The practical assessment involves completion of 6 mandatory case studies and then two further case studies from a choice of four
- Successfully complete any Interim Attendance Action Development Plans when a delegate is unable to attend any part (i.e. session or day) of the course for whatever reason(s)
- Successfully complete any Action Development Plan Agreements within agreed timescales where an individual does not meet any of the course objectives.

Where Action Development Plan Agreements are required, the trainer, the delegate and the delegate's line manager must agree on the appropriate course of action, timeframes, how the Action Plan will be checked and by whom.

The delegate will only receive a Certificate of Successful Completion when they fully evidence they have met all the course objectives for the Clinical Coding Standards Refresher Course. Certificates will therefore only be issued on successful completion of Action Development Plans where these are required.

3.3.1.5 What will the course cover?

Reinforcement of the four step coding process

- Using each step of the Four Step Coding Process to correctly assign ICD-10 and OPCS-4 codes

Applying national clinical coding standards

- Completing quick-fire scenarios and more detailed case studies to correctly assign ICD-10 and OPCS-4 codes
- Completing other individual and group activities to reinforce the practical and theoretical aspects of national clinical coding standards for ICD-10 and OPCS-4
- Using all available reference products to support accurate code assignment

Maintaining data extraction skills

- Selecting all relevant conditions, circumstances and interventions to be coded in realistic case studies by following general coding standards

Monitoring and assessment

- Completing practical and theoretical end of course assessments to monitor personal progress
- Identifying areas for further development where necessary

Time management

- Completing individual exercises, assessments, action plans (where required), and group activities to required deadlines

Ongoing requirements

- Mandatory three-yearly Clinical Coding Standards Refresher Course training
- Specialty workshops
- Accredited clinical coder status (where still required)

3.3.1.6 Course Materials

Each delegate receives:

- Delegate course folder
- Participant's Workbook and Answer Book
- Reference Handouts
- Individual Course Record of Assessment / performance report
- Certificate of Successful Completion.

3.3.1.7 Reference Materials

The delegate's line manager must ensure their delegate has a copy of the following for use during the course:

- Volumes 1 and 3 of ICD-10 5th Edition (fully updated to reflect the errata published in the *Coding Clinic* Ref 112)
- OPCS-4.7 Volumes I and II
- National Clinical Coding Standards ICD-10 5th Edition reference book (2016)

- National Clinical Coding Standards OPCS-4 reference book (2016)
- National Tariff Chemotherapy Regimens List*
- National Tariff High Cost Drug List*
- Chemotherapy Regimens Clinical Coding Standards and Guidance OPCS-4*
- High Cost Drugs Clinical Coding Standards OPCS-4*

NB: Delegates are welcome to bring laptops/tablets to access electronic versions of the products highlighted with an *. Delegates may also use the OPCS-4.7 e-Version*. These products can be downloaded via TRUD:

<https://isd.hscic.gov.uk/trud3/user/guest/group/0/home>

Coding Clinic Ref 88: Coding of Co-morbidities

NB: Delegates can download the latest version of the *Coding Clinic* onto their laptops/tablets if desired.

3.3.1.8 Course Timings

The course timings are:

Day 1: 09.00 – 16.45

Day 2: 09.00 – 16.45

Day 3: 09.00 – 16.45

Day 4: 09.00 – 15.45

3.3.1.9 Delegate Responsibilities – Summary

The delegate is responsible for:

- Ensuring punctuality at all time
- Respecting the course trainer and fellow delegates
- Attending all days of the Clinical Coding Standards Refresher Course
- Completing and evidencing all mandatory pre-course eLearning prior to the classroom training
- Completing all assessments to the required criteria
- Completing all necessary Action Development Plans to the required criteria and timeframes supplied by the course trainer.

3.3.1.10 Line Manager Responsibilities – Summary

The line manager is responsible for:

- Ensuring their clinical coder completes a CCSRC every 3 years
- Ensuring availability of **all** reference products described in Section 3.3.1.7 above
- Providing ongoing support to the delegate to ensure sufficient time and resources are available for completion of the mandatory eLearning package before the classroom course
- Discussing with the course trainer appropriate Action Development Plan Agreements and timeframes during the course and/or after the course where necessary, and providing ongoing support for the delegate to complete these.

3.3.1.11 Next Steps

Successful completion will result in compliance with Level 2 of Information Governance Toolkit Requirement 510.

4 Other Useful Information

The information below provides links to other optional courses and eLearning available to coders as part of their ongoing continued professional development.

4.1 The Health Informatics Career Framework (HICF)

The HICF provides a structure for careers within Health Informatics
<https://www.hicf.org.uk/Index.aspx>

4.2 Informed: An introduction to the use of informatics in healthcare

This is an e-learning course developed by the Department of Health. The course is available for NHS employees who want to expand their knowledge of health informatics: <http://www.e-lfh.org.uk/programmes/health-informatics/>

4.3 SNOMED CT Foundation Course

This is an eLearning course developed by IHTSDO (International Health Terminology Standards Development Organisation). 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.

<http://www.ihtsdo.org/snomed-ct/learn-more/elearning-overview>

4.4 NHS Data Dictionary eLearning

There are demonstrations available developed by the Health and Social Care Information Centre (HSCIC) which cover a wide range of topics within the Data Dictionary. These 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.

http://www.datadictionary.nhs.uk/web_site_content/pages/help_pages/demonstrations.asp?s_hownav=0