

# Delivering greater diversity into the national Clinical Impact Awards (NCIAs)

The NCIAs recognise the role of NHS consultant doctors, dentists and academic GPs and the impact of their work at a national level.

## 1. Encouraging women and consultants from ethnic minority backgrounds to apply for an NCIAs



### Myth:

"The scheme is biased towards a sub-set of the male consultant population. There's no point in women or ethnic minority consultants applying."



### Facts:

2024 success rates

48.8% male consultants

49.0% female consultants

38.0% consultants from ethnic minority groups



### NCIA reforms:

- evidence can account for a career break
- single-form application process
- removal of pro-rated award payments for LTFT
- better diversity monitoring and reporting mechanisms



The NCIAs reforms build on ACCIA's commitment to improving diversity and recognise that progress is ongoing.

## 2. Diversity on the sub-committees is improving



### Myth:

"There is not enough diversity on the regional sub-committees, this means the process is biased and unrepresentative."



### Facts:

2024 regional sub-committee membership:

34% female

45% from ethnic minority groups



### NCIA reforms:

- review of chairs and medical vice chair tenures
- monitoring diversity of sub-committee members
- annual adjustments to ensure balance of the scoring panels
- don't need to have an award to be a sub-committee member



Contact [accia@dhsc.gov.uk](mailto:accia@dhsc.gov.uk) to apply to join a regional sub-committee.

## 3. Reforms since 2022 support consultants from all specialties



### Myth:

"Only certain specialties get an award in reality, mine wouldn't be considered."



### Fact:

All eligible consultants regardless of their specialty can apply for the awards.



### NCIA reforms:

- improved inclusivity for previously under-represented groups
- a broader range of evidence can be submitted
- evidence of additional national impact for work accepted
- more training and guidance for the assessors

