

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

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

1. Encouraging female and consultants from ethnic minority backgrounds to enter for an NCIA



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:

2023 success rates

48.0% male consultants

41.1% female consultants

35.0% consultants from ethnic minority groups



NCIA reforms:

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



The NCIA reforms build on ACCIA's **commitment to improving diversity** and recognises 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:

2023 regional sub-committee membership:

36% female

40% 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



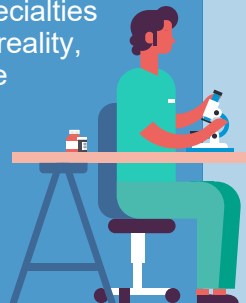
Contact accia@dhsc.gov.uk to apply to join a regional sub-committee.

3. New reforms will 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

