The British Hip Society, 35-43
Lincoln's Inn Fields, London WC2A 3PN

Non Arthroplasty Hip Register (NAHR)

POLICY
PROVISION OF REPORTS

NAHR General Policy

The BHS is the Data Controller of the NAHR.

The NAHR is administered by Executive members of the British Hip Society (BHS). Positions on the Executive of the BHS are elected from the general membership in open competition.

The independence of the reporting of data remains critical to the credibility of the NAHR. The BHS must protect the confidentiality of the information contained in the NAHR and maintains high-level data security procedures.

All data presented to the User group and Executive will be anonymised at surgeon level. No clinician, including those on the Executive, will be given access to identify individual surgeon data.

Surgeons will be provided with their own outcome data and will able to view and interrogate the data they have entered.
Non-identifying information relating to patient demographics and outcomes may be presented in the form of reports in the public domain.
In addition, non-identifying information will be provided on request to surgeons, hospitals and other third parties at the discretion of the Executive of the British Hip Society (see below).

The BHS will collaborate with other Orthopaedic Registries to develop i) a Policy by which surgeons, whose outcome data falls outside a defined range are contacted with a request to validate their data and ii) a Policy to protect patients from poor practice. Surgeons contacted by this process will be anonymous to the NAHR User group and BHS Executive.

All requests for ad hoc reports must be lodged with the BHS on the ***NAHR Data Release Request Form*** with each section completed in full. Any member of the Executive of the BHS who wishes to carry our research using the data must also apply on the ***NAHR Data Release Request Form*** by the conventional route. All requests for information will be logged on the BHS website.

The BHS encourages the use of NAHR to collect data in randomised prospective studies including multi-centre collaborations. The Department of Health's Research Governance Framework for Health and Social Care and the research governance frameworks for Wales, Scotland and Northern Ireland set out the requirement for registration of trials. Furthermore: Article 19 of the World Medical Association Declaration of Helsinki adopted in 2008 states that "every clinical trial must be registered on a publicly accessible database before recruitment of the first subject"; and the International Committee of Medical Journal Editors (ICMJE) will consider a clinical trial for publication only if it has been registered in an appropriate registry.
All relevant review bodies should be applied to. These may include the NHS/ HSC Research and Development offices the Social Care Research Ethics Committee, Research Ethics Committees etc.

On behalf of the BHS the NAHR Chairman is responsible for approving the release of ad hoc reports.

The NAHR Chairman or BHS President is to advise the President of the British Orthopaedic Association prior to the release of data that may attract attention in the public arena.

NAHR Policy on Use of Data

A. Surgeons/Academic Institutions

1. The individual data provided may be used for presentation at the discretion of the surgeon submitting data.
2. The NAHR must be acknowledged as the source of data in any publication (including electronic versions) in which the NAHR is quoted.
3. If comparative data provided by the NAHR is to be used in a publication, the NAHR must be actively involved in the preparation of the manuscript and must agree details of the submission including appropriate authorship, nomination of contact person and details of the review process to be followed for the manuscript.
4. At least one clinician from the NAHR or Executive of BHS or clinician advising on behalf of BHS plus the relevant statistician and epidemiologist giving advice on behalf of BHS should be included as authors, if applicable.
5. Where consensus between authors cannot be reached concerning the interpretation of NAHR data the document shall be circulated to the whole BHS Executive for discussion and resolution.
6. Undergraduates, trainees, fellows and post graduates are encouraged to use NAHR data; however an orthopedic consultant who is a member of the British Hip Society must be nominated as the Principal Requester on the

request form.
7. The NAHR will endeavour to supply ad hoc reports within a twelve week turnaround provided all necessary information has been made available in the appropriate format.
8. A fee may be levied to cover costs incurred by the BHS in facilitating analyses.

B. Government/Government Agencies

1. The BHS will consider providing non-identifying information to Government/Government Agencies if appropriate requests are made on the ***NAHR Data Release Request Form***.
2. A critical aspect of the provision of data is its interpretation. The BHS will provide a commentary concerning the relevance and significance of any data provided.

C. Other Stakeholders

1. If data is provided to other organisations or individuals the BHS will determine the relevant policy approach depending on the nature of the requesting organisation or individual.

10.12.14