

Standardised Acknowledgement of the use of data granted by National Joint Registry (NJR)

Context:

Due to the uniquely valuable nature of the NJR data, requests for its use in research projects are regularly received to ask for permission to use the data beyond the purpose for which it was originally intended. The patient consent form signed in hospitals states that the data collected may be used for research purposes and in accordance with this only non-identifiable data is released by the NJR and is used in requested environments outside of the NJR in reports. These environments may include: abstracts, suppliers' post-marketing surveillance reviews, regulatory reviews, white papers and research publications.

There are three categories into which all uses of NJR data can fit:

Category 1: Use of data published in the NJR annual reports and/or NJR website

Category 2: Use of non-identifiable unpublished data released in a secure environment for the purposes of NJR-approved research and for activities outlined in the NJR strategic plan / NJR Annual Plan.

Category 3: Use of unpublished anonymised data in industry generated white papers

For each category, there is either a standardised disclaimer, acknowledgment or liability clause that should be added to the paper/abstract or a combination thereof.

Category 1: Use of data published in the NJR annual reports and/or NJR website

NJR data routinely available through the NJR website and published annual reports can be used by others external to the NJR for their own purposes without permission being required.

Please be advised the NJR approves use of published statistics, charts and tables in its Annual Reports for presentations, dissertations and related work. We request that you reference the National Joint Registry and state the specific year of the Annual Report. Where possible, include a link/hyperlink to www.njrcentre.org.uk so that the audience are able to seek out further context and information for themselves.

Standard disclaimer to accompany this usage of Category 1 data:

We thank the patients and staff of all the hospitals who have contributed data to the National Joint Registry. We are grateful to the Healthcare Quality Improvement Partnership (HQIP), the NJR Steering Committee and the NJR management team for their roles in facilitating this work. {Additional Contributors to be added where relevant}. The views expressed represent those of the authors and do not necessarily reflect those of the National Joint Registry, who do not vouch for how the information is presented.

Category 2: Use of unpublished data released for the purposes of research and the strategic plan

The use of NJR data for the purposes of research is managed through the [Research Request process](#). Any request for data is made on a standardised Research Application Form (the Data Access Request Form), which also includes a liability clause regarding the data released from this process. Once the application form is completed, it is then assessed by the Research Committee (RC). All recipients of NJR data must agree to disclose all manuscripts to the RC for review prior to journal submission and for a link to be placed on the NJR website to the relevant site when the paper is accepted for publication. The standard acknowledgement must be included. If advised to do so, the standard liability clause must also be included. This will be monitored by the NJR. If the recipient has been granted access to NHS Digital data (HES/PROMs/CivReg) by HQIP under the sublicensing agreement with NHS Digital, the copyright notice must be used.

Study Title:

Research projects using NJR data are required to use standard wording to make reference to the NJR in the study title.

The study title should be followed by the suffix: *'An analysis from the National Joint Registry'*.

For example: If the title of your study is *'NHS Reform and Private Healthcare Activity'*, the properly acknowledged study title should then read:

'NHS Reform and Private Healthcare Activity: An analysis from the National Joint Registry'.

Authorship:

We would expect all named applicants on the approved research application to be cited in the manuscript authorship, unless explained otherwise. If the study is internal; please ensure that co-corresponding authorship [of NJR author] is included.

Standard acknowledgement:

We thank the patients and staff of all the hospitals who have contributed data to the National Joint Registry. We are grateful to the Healthcare Quality Improvement Partnership (HQIP), the NJR Research Committee and staff at the NJR for facilitating this work. {Additional Contributors to be added where necessary}. The authors have conformed to the NJR's standard protocol for data access and publication. The views expressed represent those of the authors and do not necessarily reflect those of the National Joint Registry Steering Committee, Research Sub-committee or the Healthcare Quality Improvement Partnership (HQIP) who do not vouch for how the information is presented.

Sponsorship:(add in 1 of the 4 options if appropriate)

1. This work was undertaken as part of the National Joint Registry strategic plan. e.g. Development of supplier feedback and management feedback systems
2. This work was funded by a fellowship from the National Joint Registry. e.g. Any papers from the current NJR fellows
3. This work was funded by the National Joint Registry. e.g. DNA Biobank, an identified specialist piece of work using NJR data
4. This work was commissioned by the National Joint Registry Research Committee. e.g. analysis for the annual report.

Standard liability clause:

The Healthcare Quality Improvement Partnership ("HQIP") and/or the National Joint Registry ("NJR") take no responsibility for the accuracy, currency, reliability and correctness of any data used or referred to in this report, nor for the accuracy, currency, reliability and correctness of links or references to other information sources and disclaims all warranties in relation to such data, links and references to the maximum extent permitted by legislation.

HQIP and NJR shall have no liability (including but not limited to liability by reason of negligence) for any loss, damage, cost or expense incurred or arising by reason of any person using or relying on the data within this report and whether caused by reason of any error, omission or misrepresentation in the report or otherwise. This report is not to be taken as advice. Third parties using or relying on the data in this report do so at their own risk and will be responsible for making their own assessment and should verify all relevant representations, statements and information with their own professional advisers.

Copyright notice:

In any display of the Data, wherever possible, the Data Recipient must cite the copyright of NHS Digital and/or HQIP/NJR as licensor of NHS Digital data as follows:

"Copyright © (year), the Health and Social Care Information Centre. Re-used with the permission of the Health and Social Care Information Centre and/or the Healthcare Quality Improvement Partnership/National Joint Registry. All rights reserved."

Category 3: Use of unpublished data in industry generated white papers

The use of NJR data in industry generated white papers is less common. These are internal reviews/analyses carried out by companies, and often come in the form of a marketing document. Analysis and reporting undertaken by industry using unpublished supplier feedback data, in industry generated white papers, product clinical data summaries, product brochures etc. will not be sourced through the research request process (unless some class-specific data has been incorporated which will have been obtained using a data request or research request). NJR Supplier Feedback Terms of Use will be provided which includes instruction to use the standard disclaimer below:

Standard disclaimer:

The data used for this analysis was obtained from the National Joint Registry ("NJR"), part of the Healthcare Quality Improvement Partnership ("HQIP"). HQIP, the NJR and/or its contractor, NEC Software Solutions (UK) Limited ("NEC") take no responsibility (except as prohibited by law) for the accuracy, currency, reliability and correctness of any data used or referred to in this report, nor for the accuracy, currency, reliability and correctness of links or references to other information sources and disclaims all warranties in relation to such data, links and references to the maximum extent permitted by legislation including any duty of care to third party readers of the data analysis.