

Unit News

Issue 2, November 2009

A Quarterly Publication

Welcome to the dedicated Newsletter for JAG Units

This newsletter is designed with you in mind and will provide you with quarterly updates of JAG activities. If there is information not here that you feel should be or would like to know about, please [click here](#) to email me at the JAG.

Warren Lynch, JAG Manager

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RECENT ISSUES

JAG Certification for Endoscopists

The application process for JAG Certification has evolved over the past few years, ensuring that the process meets the quality assurance standards expected of the JAG. Before an applicant can apply for JAG Certification they should ensure that they have collected and completed all the

From the JAG Chair

By Prof. Roger Barton

The JAG has really been undergoing not just change but what can now only be described as wholesale upheaval, as the National Endoscopy programme comes to a close, and many of the activities pioneered by that revolutionary intervention are now being drawn into the fold of the JAG. Fortunately, we have the good offices of the tireless Debbie Johnston to help us here in the JAG Office. Debbie is working alongside Warren Lynch and his newly-strengthened team to try to ensure as seamless as possible a transition. We have also been working hard on both improving and integrating our multiple "web presences", and we hope you will notice a tangible difference in the near future.

From the QA of Units Chair

By Dr John O'Donohue

The second meeting of the JAG Units Working Group was held on 16 October 2009. You will find the minutes of this meeting on the JAG website and I am pleased to say that we can report considerable progress in developing the QA process for Units. We have succeeded in aligning the GRS with the JAG Visits checklist, modifying and improving both in the process. The evidence we require to be uploaded in advance of JAG Visits now exactly follows GRS. We have also modified the GRS slightly, to take effect for the next census due in April 2010. Some new measures have been introduced in the privacy of dignity item to reflect the recently introduced Same-sex accommodation Standards.

There is slow but steady progress in engaging the independent and community sectors in JAG and GRS. The first few inspections in both sectors have now been done and we expect continued progress next year. More independent sector Units are purchasing GRS licences in preparation for JAG Certification, which they perceive as a badge of quality and attractive to insurers and commissioners of NHS work.

JAG Visits are now extensively rolled out in the acute sector in England, with over 80% of such Units either having had, or due to have, a JAG Visit under the new system. The devolved nations are now following suit, and we are pleased to report that JAG is embarking on a programme on inspections to all Scottish units. These will be "double-badged" with QIS and will cover 28 Scottish Units by November 2010 and the remaining 24 by the August 2011. In Northern Ireland there have been five pre-JAG Visits in preparation for Bowel Cancer Screening there; Wales has had six pre-JAG Units inspected and eight more are due. In both Northern Ireland and Wales JAG is joining with local health services to make the case for much-needed additional capital investment.

necessary information before submitting it to the JAG Office.

For details of what is required for JAG Certification please **click here**.

We would encourage all trainers to please ensure that trainees expressing an interest in JAG Certification are familiar with the information required for a successful application.

GRS UPDATE

The October 2009 GRS Census has now closed. Reports on domain levels attained are currently being prepared and will be available on the GRS website shortly. In terms of Units completing the census we had:

Acute Units

206 of 213 (97%)

Community Units

20 of 42 (48%)

Independent Sector

13 of 21 (62%)

With the GRS for October complete, here is some information that you may wish to circulate to your team about the GRS for April 2010:

Why complete the GRS Census?

Remember, not only does your completion of the GRS Census assist us in reporting your current position to the Bowel Cancer Screening Leads, Regional Leads, QA Directors and JAG Committee, but the GRS is a useful internal tool for your Unit. Ultimately the GRS is a self-assessment tool, which your team can set goals, make action plans and work through any challenges together.

What does non-completion mean for your Unit?

If you are JAG Certified:

The JAG Committee will discuss your Units ability to retain JAG Certification.

Please remember that timely completion of the GRS is a large part of retaining or obtaining your JAG Certification and the JAG Committee takes non-completion very seriously.

If you aren't yet JAG Certified:

In order to sign up for a JAG Visit, your Unit must be completing the GRS biannually. Your Unit must have completed at least two recent GRS returns. Non completion of your GRS return will impact the timing of your JAG

The JAG does not stand still and must continually strive to improve its processes. The JAG itself is seeking accreditation from the UK Accreditation Service (UKAS). There is an emerging consensus that there should be a re-Certification process in between the five-yearly JAG Visits. The QA of Units Working Group and the JAG Committee both debated models of this, and we have distilled the options down to two, which we are going to put to plebiscite among JAG Assessors and JAG Committee and Working Group members. In both options JAG Visits would be maintained every five years. The choice is between a 'light touch' approach based on annual self-certification with a random audit of 10% of Units at mid-point (year two to three), and a more onerous process requiring yearly upload of key performance indicators. You will have received, or will shortly receive, an e-mail from JAG with the options spelled out in detail and a link to the plebiscite. We look forward to hearing your views!

Introduction to the e-Portfolio

The planned roll out of the JETS e-Portfolio is continuing to progress, with the pilot schemes now completed and the system soon to become available throughout the UK.

The JETS (JAG Endoscopy Training System) e-Portfolio is, at its simplest, a log book for trainees to record their endoscopic experience and demonstrate their performance and competencies and has been developed to support the JAG Trainee Certification process.

The basic format for the e-Portfolio was created for the National Nurse Endoscopist Project (NNEP) and has been further developed to create a more sophisticated, e-Portfolio that would support trainees, trainers, training leads and training programme directors. JETS is sponsored and run by the JAG, specifically the QA of Training Working Group.

Further information and documentation relating to the e-Portfolio can be accessed from the JAG website by **clicking here**

JAG Visits Update

The following JAG Visits have taken place recently:

August

25 August 2009 - Rotherham General Hospital

September

17 September 2009 - Southmead

18 September 2009 - Frenchay

October

13 October 2009 - Torbay

20 October 2009 - Leigh Infirmary

20 October 2009 - Scarborough

21 October 2009 - Bridlington

22 October 2009 - Princess Royal

The table below indicates the current situation in regards to JAG Visits.

Sector	Visited	Passed	Deferred	To visit
Acute	154	103	50	66
Independent	10	3	0	142

Visit.

If you need assistance with the GRS website, whether it be passwords, new accounts or technical completion, please do not hesitate to contact the JAG Office and speak to Amber Westbury, who will be happy to assist.

LEARNING RESOURCES FOR ENDOSCOPY

St Marks

St Marks Multimedia provide media teaching materials for students, doctors, nurses, research scientists and surgeons in a number of aspects of endoscopy.

For further information and how to purchase these resources please click below to visit the following websites:

St Mark's Online Shop

St Mark's Multimedia

JETS

For information on how to view the location and availability of JAG Certified courses please **click here** to visit the JETS website.

Once the required course has been located, please then contact the Unit directly to book your place.

GRAHAM BALL PRIZE IN CLINICAL SCIENCE 2010

The Royal College of Physicians is pleased to announce that the Graham Bull Prize in Clinical Science 2010 is now open for applications.

This award was established in 1988 in honour of the late Sir Graham Bull was set up to provide funding for young research workers under the age of 45 who feel that they have made a major contribution to clinical science. The work can cover a wide range of expertise, such as molecular and cellular biology, imaging technology, psychiatry, or health sciences. The award is open to both clinical and basic scientists who must apply for their own work to be considered. The sum of £1000 will be awarded to the prize winner.

The closing date for applications is 31 March 2010. For more information on the prize please **click here**.

Community	3	2	1	40
Total	166	109	50	248

All Units that have not yet had a JAG Visit (including all of the Training Centres, who were part of the original JAG pilot visits) are currently being contacted to confirm their JAG Visit dates.

Top Five Reasons for Unit Deferrals

The top five issues currently preventing Units from achieving JAG Certification are:

1. Decontamination
2. Quality of Procedure (audit)
3. Endoscopy Trainers
4. Unit design and layout
5. Environment and Training

Of the top three issues, the main problems identified are:

Decontamination

AERs that are not HTM-20-30 compliant, inadequate tracking

Quality of Procedure

Incomplete audits to Level B (often only raw data is presented)

Endoscopy Trainers

No/unsatisfactory evidence of nurse input into endoscopist's training and evidence of annual evaluation of both trainer's expertise and staff input into endoscopist's training.

e-Learning for health

By Dr John Anderson

e-Endoscopy is an interactive, dynamic and evolving e-learning resource which will provide the core knowledge and educational support necessary for all aspects of modern endoscopic practice. The project is the result of an active and productive working partnership between the JAG and e-Learning for Healthcare (e-LfH). e-LfH is a Department of Health Programme working in partnership with the NHS and professional bodies to provide high quality content for the training of the UK's healthcare workforce.

e-Endoscopy is highly interactive, uses video clips, case studies and reference materials. The e-learning is designed to enable a structured approach to the acquisition of endoscopic skills and competencies used in clinical practice, from novice to sub-speciality expert. For more information **click here**.

JETS (JAG endoscopy training system) will be the portal for future endoscopic trainees to commence and progress their training. The JETS site will contain information about relevant and mandatory endoscopic courses and much more. The new e-portfolio will also sit on JETS, enabling trainees to monitor their skills acquisition progression through DOPS and feedback. The e-portfolio will contain the real time status of completion of the various e-Endoscopy modules. This will provide trainers, for the first time, with an integrated high level IT summary of trainee progress in relation to skills (courses and DOPS) and knowledge (e-Endoscopy) acquisition.

Decontamination Update

UPCOMING DATES

By Ms Libby Thomson

How to pass your JAG Visit Seminar

Dates:

10 March 2010

21 May 2010

27 August 2010

26 November 2010

Venue:

Royal College of Physicians,
11 St Andrews Place, London NW1 4LB

To book a place on one the seminars please contact Amber Westbury in the JAG Office.

NEWSLETTER FEEDBACK

The JAG Units newsletter is aimed at all Endoscopy Units and their staff. We publish this newsletter quarterly and would welcome any feedback on the content of the newsletter.

If you have any comments or would like to suggest a topic for the next training newsletter please contact the JAG Office by **clicking here**.

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The BSG Decontamination committee met on 6 November 2009 to agree on the changes to the decontamination guidelines. These support the draft HTM-01-06 guidelines and include the following:

- Water bottles remain at low risk. All bottles either reusable or disposable should be changed after each session.
- 'Octopus' and other channel irrigation devices used for manual cleaning should be kept with the scope as a unique set.
- Drying cabinets can be used for longer than 72 hours if validated evidence is provided to demonstrate the efficacy of this by the manufacturers.
- Although the channels of scope should remain moist before reprocessing, it is acceptable to expel excess fluid from the scopes to prevent possible spillage onto the floor and minimise H&S risks to staff.
- Specific detergents will not be mentioned in the guidelines for manual cleaning, however all detergents should be used using the correct ration of water and detergent and correct temperature if required.
- Off-campus reprocessing is not recommended at the current time.

The HTM-01-06 is not likely to be published before early 2010.

Same-sex Accommodation Update

The GRS has been updated to reflect the Same-sex accommodation Standard. Some new measures have been introduced in the Privacy and Dignity item and these will be in full effect from April 2010. Thank you for your cooperation in completing the recent JAG Same-sex accommodation Survey. To access the results [click here](#).

The JAG has developed a set of FAQ's in response to the survey, these have been approved by the Department of Health, to access these [click here](#).