

## JAG Training Centre Status

### Position Statement

#### SUMMARY

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This document sets out the guidelines for JAG Certified Training Centres and outlines the minimum criteria to become a Training Centre, the costs associated and other necessary requirements for a Unit to undergo the JAG Training Centre Certification process.

#### THE MINIMUM CRITERIA FOR JAG TRAINING CENTRE CERTIFICATION

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The minimum criteria for JAG Training Centre Certification are summarised below.

1. Current (or provisional) JAG Unit Certification.
2. Achievement and maintenance of a level A for the GRS Timeliness Item (Quality of Patient Care Domain).
3. Achievement and maintenance of a level A for the GRS Equipment and Educational Materials Item (Training Domain).
4. Conduct a minimum number (currently three per annum) of JAG Certified Courses including the **mandatory** Basic Upper GI or Basic Lower GI, and/or a TTT (or equivalent) (eg TTT/TCT/TGT/TET). NOTE: At least one should be a TTT equivalent course.
5. Ensure that all courses conducted meet the JAG Certification criteria, as defined by PMETB.
6. Ensure that at least one trainer per Training Centre should be faculty on an endoscopy TTT course (or equivalent) at least once per year.
7. Participation in the quality assurance of all courses via the JETS website.
8. Ensure the annual peer evaluation of all Trainers on their training skills and knowledge.
9. Payment of an annual subscription to JETS (currently proposed at £1,000 per annum where 3 or more courses are run per year or if fewer than three courses are run, then £350 per course).

Please note: Detailed explanatory notes of the above criteria are given in the **Criteria for Training Centre Status** section of this document.

#### BACKGROUND

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There have been three waves of Training Centre development in the UK:

The first wave of Training Centres was created as part of a Cancer Action Team (CAT) sponsored training commission, organised by Roger Leicester and Robin Teague, and managed through the Raven Department in the Royal College of Surgeons

The second wave followed a further grant from the CAT. Ten Training Centres (three national and seven regional) went through a competitive tendering process, lead by the North East London SHA

The third wave included centres from Wales, Scotland and Northern Ireland, and several new centres in England.

All English centres have use of the JAG course administration website (JETS). Scotland, Wales and Northern Ireland have been invited to register their centres on the JETS website ([www.jets.nhs.uk](http://www.jets.nhs.uk)). The JETS website was sponsored by the CAT as part of a package of support intended to enable Training Centres in England to achieve a sustainable solution to delivering JAG Certified Courses and was developed by the English Training Centres.

Before a service could achieve Training Centre status in the first two waves it had to demonstrate that it was able to do so. The first wave assessment process was led by Roger Leicester and Robin Teague. The criteria were not made explicit and the process was an informal visit. The competitive tendering for the second wave required prospective Training Centres to demonstrate that they met very specific criteria, but there was no peer-review process to validate claims that criteria had been met.

There followed the development of a peer-review process of JAG Certification which was first tested in the ten second wave Training Centres, and is now being applied across the country through JAG Visits. This Certification process assesses both service delivery and training. The original ten Training Centres were then required to undergo a further JAG Visit in 2009-2010.

Formal criteria for the third wave had not been defined and there has been no formal assessment process put in place. Effectively, if an endoscopy unit wished to deliver endoscopy training courses, it has been allowed to do so providing the courses met current criteria defined for JAG Certified Courses. Once JAG permission was obtained, the courses could be advertised and administered on the JETS website.

## THE CASE FOR CREATING CRITERIA FOR TRAINING CENTRE STATUS

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PMETB requires training courses to be quality assured. The JAG has responsibility for quality assurance of the training of the gastrointestinal endoscopy workforce. This includes JAG Certified Training Centres and JAG Certified Courses.

JAG Certified Courses advertised on the JETS website reassures the trainees accessing (and paying for) these courses that the:

- environment in which a course is held is conducive to a good patient experience in endoscopy
- that patient care is not compromised by the course
- courses meet PMETB quality standards
- faculty responsible for course delivery will have the relevant skills and training
- training will be carried out in an environment conducive to modern and high quality training
- training will utilise modern and good quality equipment
- quality of the training and performance of the trainers will be monitored by the JAG.

The JAG has a responsibility to both trainee and where applicable, the patient. The JAG will ensure the criteria listed above are met and that there are processes in place to monitor these. The JAG is then able to reassure PMETB (and the GMC) that, in the context of endoscopy training courses, standards are upheld and patient care is not compromised as a result of this training.

## THE JAG ENDOSCOPY TRAINING SYSTEM (JETS)

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The JETS website provides the IT platform for quality assurance of both courses and the trainers delivering these courses. In addition, there is the IT functionality to quality assure the infrastructure and running of the JAG Certified Training Centres providing the JAG Certified Courses. JETS also provides the portal for the e-Portfolio, which is an electronic method by which trainees will complete their endoscopic training logbook and application for JAG Certification in the future.

JAG formally inspects all endoscopy Units, including those designated as Training Centres. Criteria have already been established for the designation of JAG Certified Training Centres. These criteria were reviewed and discussed together with the proposals laid out in a previous paper, **JAG Endoscopy Training Centres: Definition, Status and Requirements**, a draft proposal.' by Roland Valori, Siwan Thomas-Gibson and John Anderson.

Key stakeholders including members of the JAG Committee, JAG QA of Training Working Group and the National Training Leads group agreed these criteria during 2009-10.

## CRITERIA FOR TRAINING CENTRE STATUS

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- 1. Current (or provisional) JAG Unit Certification.**
- 2. Achievement and maintenance of a level A for the GRS Timeliness measure (Quality of Patient Care Domain)**

**Note 1:** There were some concerns expressed amongst the training leads group about the mandatory requirement for a level A in the GRS Timeliness measure. These concerns were noted, however, the role of the JAG is to recommend a QA process for training that delivers high quality of care for all patients. The standard for a level A in the GRS Timeliness measure is a nationally reportable criterion for Trusts. It is central to the belief of the JAG that training should not negatively impact on timeliness (or vice versa).

**Note 2:** It is recognised that Wales, Scotland and Ireland have may have a different timeliness criterion recommended for Units by their respective governing bodies. In addition, the time frame within which units are likely to be able to achieve level A in the GRS Timeliness measure is likely to be longer than the Units delivering training in England, due to the later implementation and uptake of the GRS and relatively reduced supporting funding streams. Therefore, for a period of time the Celtic Nations may qualify for JAG Training Centre Certification outside of the above criteria. In such cases locally agreed policies for timeliness need to be implemented and maintained. During this period, and until alignment of all criteria, development of JETS-Wales, JETS-Scotland and JETS-Ireland within the main JETS may be a solution to support training in these regions without developing a two tier system. Importantly, models for delivering training in Wales, Scotland and Ireland may differ from the existing English model. An example of this is the existing "hub and spoke" model currently in place in Wales. Innovative training structures such as this are being used in a few sites in England. This model may have advantages over the existing framework in England. Networks of training activity centred around a central "hub" Training Centre would allow flexibility in course delivery, helping reduce the impact on service whilst increasing the diversity of the Training Centre portfolio (also relevant to sub-speciality training courses e.g. ERCP, EUS, etc.). All Units involved in this Training Centre model should be JAG Certified in their own right, and meet all the JAG Training Centre criteria for the duration of the course, including the JETS based QA process, with the exception of Item 4 – which still must apply across the Training Centre network

**Note 3:** The QA of Training Working Group recognises there may be other, innovative training structures delivered across the UK which should be subject to quality assurance.

- 3. Achievement and maintenance of a level A for the GRS Equipment and Educational Materials Item (Training Domain).**
- 4. Conduct a minimum number (currently three per annum) of JAG Certified Courses including the mandatory Basic Upper GI or Basic Lower GI, and/or a TTT (or equivalent) (eg TTT/TCT/TGT/TET). NOTE: At least one should be a TTT equivalent course.**

**Note 4:** The JAG will be involved in determining the structure, training standards and sub-speciality accreditation of specialist Units involved in training for EUS, ERCP, small bowel endoscopy and the developing technologies. Specialist Units delivering training in these areas may choose to be linked with a JAG Certified Training Centre (as in the hub and spoke model described in Note 2), rather than applying for independent Training Centre status. The proposed courses to be delivered would be submitted to JAG for approval against the same criteria for existing JAG Certified Courses.

**Note 5:** Mandatory JAG Certified Courses may only be delivered by JAG Certified Training Centres, those associated with a Training Centre as in Note 2 above or those seeking Training Centre status as in Note 7 below.

- 5. Ensure that all courses conducted should meet the JAG Certification criteria, as defined by PMETB**

**Note 6:** When a Unit not recognised as JAG Certified Training Centre wishes to run courses it should, as now, gain JAG Certification for the educational content, objectives and delegate feedback as prescribed by PMETB, but the Unit should have JAG Certification as a minimum. The faculty need also to have an educational training as well as be expert in the course subject matter. The QA of Training Working Group recommends at least endoscopic TTT, generic TTT, TGT, TCT or TET experience; or an educationally approved qualification.

- 6. Ensure that at least one trainer per Training Centre should be faculty on an endoscopy TTT (or equivalent) course at least once per year**
- 7. Participation in the quality assurance of all courses via the JETS website.**

This will include trainee feedback on whether course objectives have been achieved, on whether the environment and organisation was satisfactory and direct feedback from trainees on the quality of the trainers. The JETS website functions allow giving and receiving feedback from both delegates/trainees and fellow trainers.

- 8. Ensuring the annual peer evaluation of all Trainers on their training skills and knowledge.**
- 9. Payment of an annual subscription to JETS (currently proposed at £1,000 per annum where three or more courses are run per year or if fewer than three courses are run, then the fee would be £350 per course). The justification for this will be largely to fund the JETS website and the administrative costs of the Quality Assurance process for all.**

**Note 7:** New Training Centres should be established in close cooperation with an existing, ideally long standing, Training Centre experienced in the delivery and QA of the JAG Certified Courses, with external expert faculty from that and other centres. In the first 12 months a new Training Centre will not have delivered the requisite minimum three JAG Certified Courses, so they can only really be viewed as provisional. Once 12 months has elapsed, if all criteria are fulfilled, including engagement with the JETS QA process, their full Training Centre status can be confirmed. Where QA data is poor or the JAG Training Centre Certification criteria were not achieved in the first 12 months it would be important to defer any further application for 12 months to embed improvements.

## RECOMMENDATIONS FOR THE ROLE OF TRAINING CENTRE LEAD

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A Training Centre Lead requires both professional and training credibility as well as time and Trust support for their role. It is an internal matter for the Training Centre themselves but mentoring and review will be available for the role. The working group suggest Training Centre leads should:

1. Be an endoscopist
2. Be an active endoscopic trainer
3. Have recognised competencies for these criteria
4. Have the support of fellow trainers and trainees
5. Usually be of consultant status in their profession
6. Have a job plan accommodating their role and responsibilities
7. Communicate with fellow Training Centre leads in regional /national meetings.

## OPERATING POLICY FOR TRAINING CENTRES IN THE UK

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1. Training centres will support and help promote all aspects of endoscopic related training within their region.
2. Training Centres will act in a coordinated and cooperative fashion to ensure sufficient capacity is available to deliver JAG Certified Courses.
3. Training Centres will actively promote the training structure, standards and quality assurance approved by JAG, through both course activity and encouragement to engage and utilise the supporting IT systems (JAG, JETS, e-Portfolio and e-Endoscopy).
4. Training Centres will support JAG in new initiatives relating to endoscopic training activity
5. Each Training Centre should have a training lead, deputy lead, nurse lead and administrator.
6. Each Training Centre must ensure a representative is present at the national meetings held twice per year.
7. National meetings will be convened and chaired by the Lead of the UK Training Centres
8. Training Centres should have local meetings (with minutes) a minimum of twice per annum which includes a review of course activity and feedback.

## ADVANTAGES OF TRAINING CENTRE CERTIFICATION

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The advantages of Training Centre Certification are:

- The Training Centre will have their homepage on JETS to advertise courses, centre and faculty.
- The achievement of satisfactory QA will provide a 'badge' to reassure trainees that the Training Centre courses are of the required standards.
- There will be kudos associated with recognition as a JAG Certified Training Centre.

## MONITORING AND SANCTIONS

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1. JAG Quality Assurance of Training Centres will necessitate real time GRS scores
2. The JETS database will collate delegates' course feedback
3. JAG Training Centre Certification will be reviewed annually by the JAG QA of Training Working Group

4. The process for monitoring Training Centre compliance will be regulated by the JAG QA of Training Working Group.

Monitoring Training Centre compliance will be based on GRS scores, numbers of course delegates and JETS feedback, particularly whether course objectives have been achieved. The JETS administration team will monitor these outputs and raise any concerns with the JAG QA of Training Working Group. If there are problems, an early remedial action plan should, ideally, be put in place before sanctions are made. The JAG QA of Training Working Group may approach external reviewers for advice. In exceptional circumstances the JAG Chair will become involved and he/she may approach the Chief Executive of the Training Centre's trust if problems remain unresolved.

The QA of Training Working Group recognises Training Centres may have particular difficulties with timeliness due to factors outside their control. It is expected that an action plan, with medium term (three to six month timescale) objectives, be agreed. However, if the plan is unlikely to correct the problem, or if an agreed plan is not successful, then the Training Centre should suspend courses until timeliness has been restored. Where there is a persistent problem JAG Training Centre Certification should be withdrawn and reapplied for when problems have been resolved.

### **Process for Training Centres not reaching standards for JAG Training Centre Certification:**

- Six month rule for rectifying problems related to equipment and training GRS
- Adequate Timeliness action plan with medium term timescale
- Cessation of Training Courses if in spite of plan Timeliness needs correction
- Withdrawal from JETS and suspension from running JAG Certified Courses if the JAG Training Centre Certification has not been regained

### **ELECTION OF 'LEAD OF UK TRAINING CENTRES'**

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- The election process will include interview by a committee determined by the JAG
- JAG approved job specification and competencies
- Applicants must be training lead or training lead deputy
- Post tenure – three years