

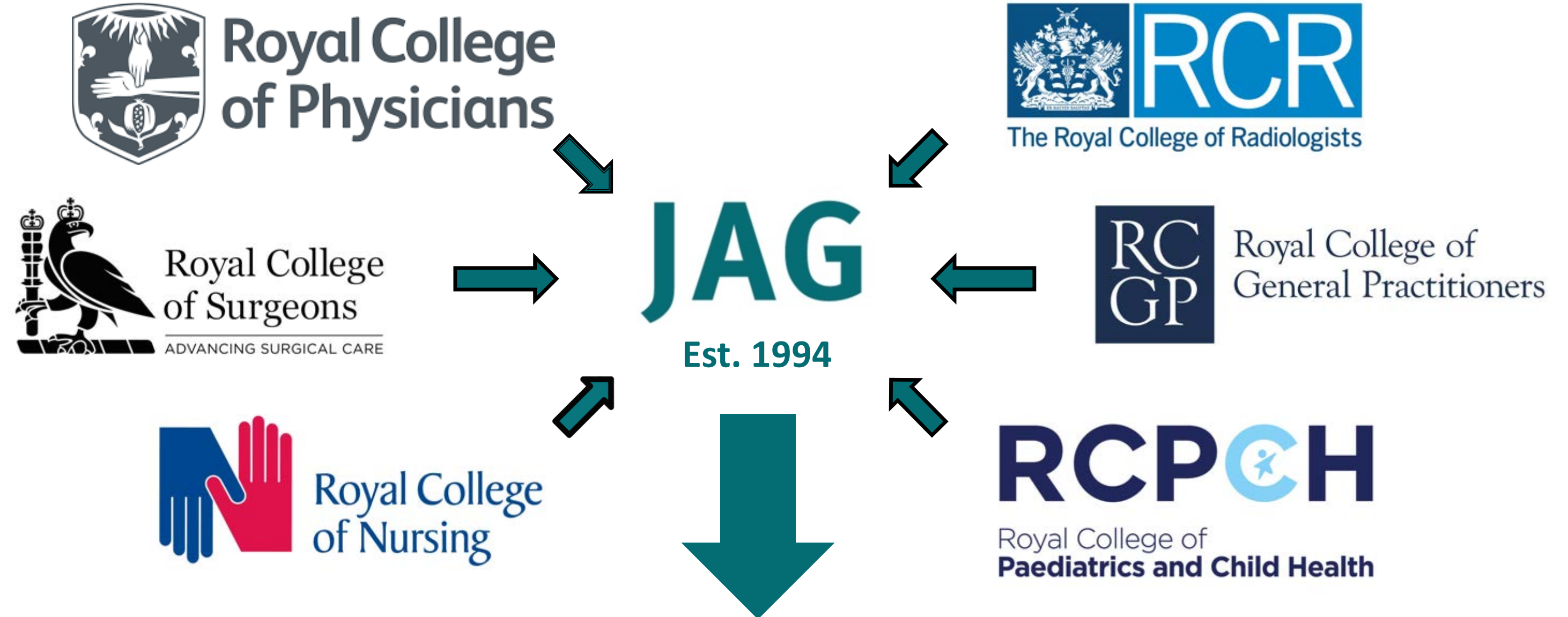


K Siau<sup>1</sup>, J Green<sup>1,2</sup>, N Hawkes<sup>1,3</sup>, R Broughton<sup>1</sup>, M Feeney<sup>1,4</sup>, P Dunckley<sup>1,5</sup>, JR Barton<sup>1,6</sup>, J Stebbing<sup>1,7</sup>, S Thomas-Gibson<sup>1,8</sup>

<sup>1</sup>JAG, RCP, London, <sup>2</sup>Cardiff and Vale University Health Board, Cardiff, <sup>3</sup>Cwm Taf University Health Board, Llantrisant, <sup>4</sup>Torbay and South Devon NHSFT, Torquay, <sup>5</sup>Gloucestershire Royal Hospital, Gloucester, <sup>6</sup>Newcastle University Medicine Malaysia, Johor, Malaysia, <sup>7</sup>Royal Surrey County Hospital NHSFT, Guildford, <sup>8</sup> St Mark's Hospital, Harrow.

## WHO ARE WE?

Additional stakeholders:  
BSG,  
ACPGBI,  
AUGIS,  
SACs,  
BSPGHAN,  
BAPS,  
Lay representative



## OUR ROLE

## UK ENDOSCOPY QA & QI

## OUR SERVICES

\*Includes JAG certification, JAG training and trainer courses, and assessment tools (DOPS and DOPyS)



## OUR IMPACT\*\*

\*\*Searched EMBASE, OVID, PubMed

Any of: JAG, Global Rating Scale, JETS e-Portfolio, DOPS, DOPyS, Bowel screening

+

Any of: Endoscopy, Colonoscopy, Gastroscopy, Polypectomy, Accreditation

Criteria: July 2007 - 2017  
Abstracts and Papers

Titles and Abstracts Screened  
(N=887)

Articles Discarded  
(N=687)

Articles Reviewed in Full  
(N=200)

Articles Discarded  
Duplicates (N=80)  
Irrelevant (N=2)

Articles Included  
(N=118)

## QUALITY OF CARE

- N=37** (mainly audits against JAG standards)
- Valori<sup>1</sup>**: Composite CIR (CIR<sup>c</sup>) higher in JAG-accredited centres on multivariate analysis
  - Gavin<sup>2</sup>**: Significant improvement in KPIs in 2<sup>nd</sup> UK colonoscopy audit, which authors attributed to JAG

	Bowles (1999)	Gavin (2011)
<b>N</b>	9,223	20,085
<b>CIR</b>	76.9%	92.3%
<b>PDR</b>	22.5%	32.1%
<b>Conscious sedation</b>	94.6%	88.9%

## QUALITY OF SERVICE

**N=31** (22 on service implementation, 9 on quality of service):

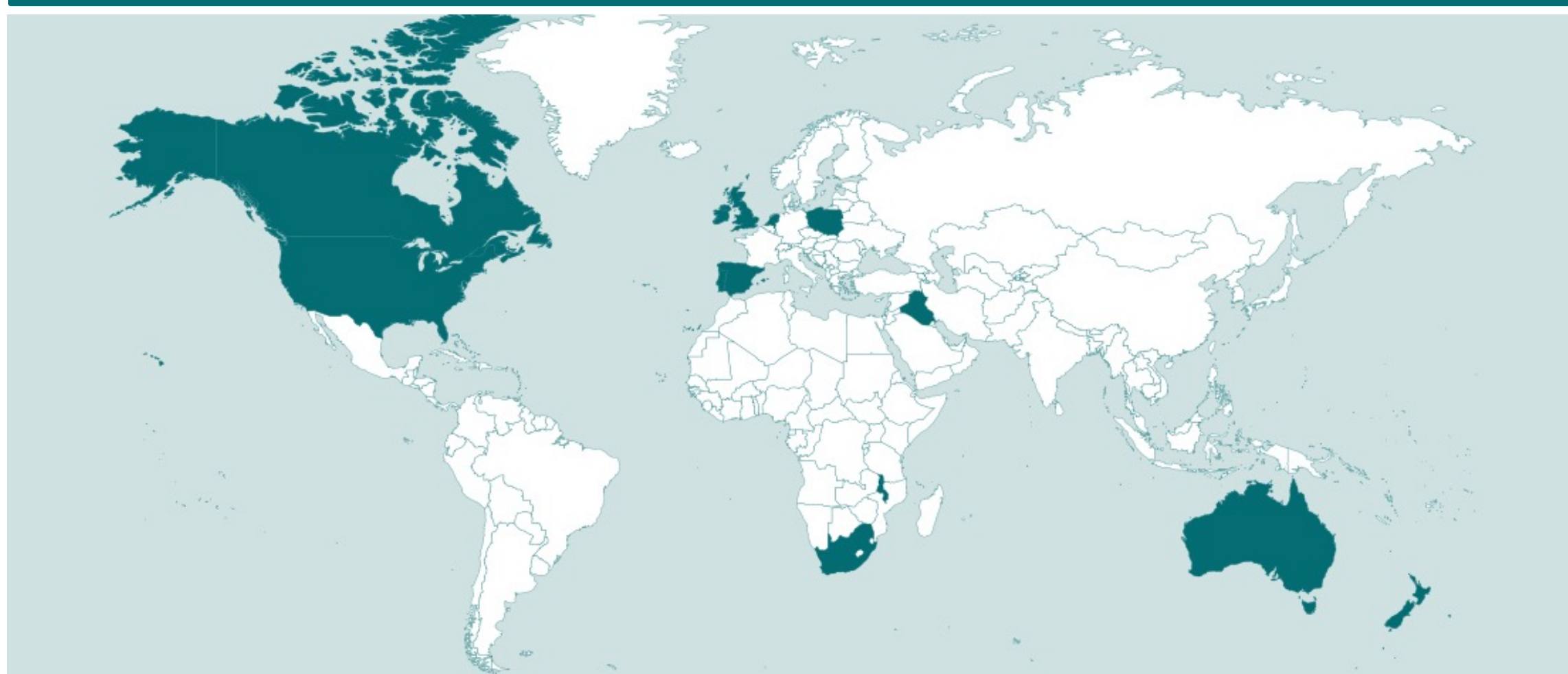
- Stebbing<sup>3</sup>**: Increasing uptake of GRS in UK, with evidence of QI in GRS domains across participating units
- Valori<sup>4</sup>**: Reduction in waiting times for endoscopy (>6wks) from >250,000 in 2004 to <2000 in 2008.
- GRS uptake: 485 UK units, 47% achieving full JAG accreditation (JAG internal data).
- Uptake of service accreditation in private centres
- Dube<sup>5</sup>**: GRS modified for use in Canada (GRS-C) with evidence of QI in care and reduction in waiting times.
- International impact (see map): 17 countries

## QUALITY OF TRAINING

**N=50** (28 on quality of training, 22 on training-related implementation):

- Haycock<sup>6</sup>**: Improved standards of teaching between 2002 and 2007, with reduction in trainee complications and improved trainee satisfaction.
- Certified trainees perform competently and can contribute to service volume.
- JAG DOPS/DOPyS are valid and reliable assessment tools, which were upgraded in 2016.<sup>7</sup>
- Learning curve data (OGD and colonoscopy) published based on trainee JETS inputs.
- Biswas<sup>8</sup>**: 2016 UK survey - issues with access to training lists; future strategies from JAG quality assurance of training committee presented.

## INFLUENCE OF JAG INTERNATIONAL SUB-COMMITTEE



## TWITTER ANALYTICS



## CONCLUSIONS

- Our review highlights the unique role of JAG and the positive impact of its initiatives on quality of care, services and training in the UK and beyond.
- NED, scheduled for April 2018, aims to revolutionise endoscopy QA by exporting KPIs from endoscopy reporting systems to autopopulate JETS and GRS audits.
- This is likely to further extend JAG's influence as an international model for facilitating endoscopy QA.

## REFERENCES

1. Valori, Endoscopy 2017
2. Gavin, Gut 2013
3. Stebbing, Best Pract Res Clin Gastro 2011
4. Valori, GIE 2009
5. Dube, Can J Gastro 2013
6. Haycock, Eur J Gastro Hep 2010
7. Siau, Endoscopy 2018 (in press)
8. Biswas, Frontline Gastro 2017