

Endoscopy Services Quality Assurance Group

Record of meeting

Actions and outcomes of a meeting of the Endoscopy Services Quality Assurance Group held on 14 March 2018 from 10am to 1pm in Park room, house 11, Royal College of Physicians, London, NW1 4LE.

In attendance: John Green (chair), Billie Moores, David Ramanaden, Debbie Johnston, Eva Lynch, Helen Griffiths, Jordan Daniel, Raphael Broughton, Tim Shaw.

By Phone: William Dickey (Northern Ireland).

Apologies: Beverley Raven

Actions arising

No	Action	Owner
1.	(From meeting 08/12/16) Review and consider regional training centre documentation and the JAG accreditation of centres, and implications if not meeting accreditation.	John Green
2.	(From meeting 26/07/17) Draft a decontamination guidance to assist assessors during visits.	Helen Griffiths
3.	Share the BCSP CQC QA report with group (outcome 3).	Billie Moores
4.	Contact all non-communicative trainee assessors advising that we haven't heard from them, we will assume they no longer want to be trainee assessors.	Eva Lynch
5.	Discuss current and new training strategies.	Tim Shaw Debbie Johnston
6.	Arrange an introductory call to new Paediatric Chair. Extend invitation to an ESQAG meeting.	John Green
7.	Share BCSP Operational Management Document with group.	Billie Moores
8.	Review mitigating circumstance section included on NED document.	John Green
9.	Incorporate feedback into environment guidance and add resource section.	Helen Griffiths
10.	Speak to John Morris (Scotland) regarding JAG/Scotland status.	Tim Shaw
11.	Call with Siwan Thomas regarding IREE.	Billie Moores
12.	Review GRS, evidence guide and increased requirements for services that offer insourcing.	Debbie Johnston
13.	Contact creator of CGC Dashboard to agree on details for JAG using CGC Dashboard.	Debbie Johnston
14.	Correct evidence requirements on Decontamination Standards	Helen Griffiths
15.	All new visit bookings to be required to complete Infection Control Audit.	JAG ESQAG
16.	Agree Timescale for changes to JAG Standards.	ESQAG
17.	Contact assessors regarding forums for communication that are available.	Debbie Johnston
18.	Include lessons learnt log in documentation for next meeting on 12 July 2018	JAG
19.	Revise working of 'Roles and Duties' section of the current terms of reference for assessors.	Tim Shaw
20.	Remotely review risk register and feedback any comments to Tim Shaw.	ESQAG

Decisions/outcomes

1. Debbie Johnston declared that she was doing some private consultancy for a trust in Liverpool. There were no other declarations of interest.
2. The record of meeting for 26 July 2017 was accepted. All actions were completed apart from those carried across as above.
3. John Green highlighted to the group the importance of the CQC workstrand and communication regarding services that are deemed as being higher risk. Billie Moores agrees to share the BCSP QA report with the group. (Action 3)
4. The group noted that John Green's term as chair of ESQAG will finish in March 2019, and that his role should be advertised with enough time so that his successor can shadow John.
5. Helen Griffiths raised a concern regarding trainee assessors who aren't agreeing to shadow assessments or responding to emails. The group agrees to send a communique to all assessors who have been non-communicative with the JAG office in regards to their status as current JAG assessors, such as assessors who aren't registering interest for upcoming assessments. (Action 4)
6. Debbie Johnston suggests to the group that training strategies can be developed further, including online training, and noted that RCP has tools available which JAG may be able to use. Debbie Johnston and Tim Shaw will arrange a meeting to discuss and review the current strategies that are being used in training days. (Action 5)
7. The group agreed that ESQAG should better clarify the time and resource commitments for projects to ensure that they are prioritised effectively and that ESQAG does not overcommit itself to delivering work. Tim Shaw will take this forward.
8. Debbie Johnston informs the group that the Paediatric Working Group has written to express request Paediatrics be included within the GRS. Raphael Broughton informs the group that a new Paediatric Working Group chair has been appointed and John Green agrees to extend an invitation to them to attend an ESQAG meeting with to improve collaboration between ESQAG and paediatrics. (Action 6)
9. The group agreed the need to continue reducing burden for services where possible, including with QA assessments undertaken by the BCSP. Billie Moores agrees to share the BCSP operating model for screening, and Helen Griffiths will review this. (Action 7)
10. The group agreed that services which are not NED compliant by 30 April will be able to maintain accreditation if they have a genuine mitigating reason and expect to be NED compliant within 3 months. Services which have a genuine mitigating reason but will take longer than 3 months would move to 'accredited: improvements required. John Green agreed to review the NED implementation document to create a clear list of mitigating circumstances which would be accepted. Any reasons outside this list would be reviewed by the JAG leadership team. (Action 8)
11. The new environment guidance written by Helen Griffiths was well-received and seen as an improvement on our current guidance. Some feedback was suggested which Helen will incorporate into the guidance, including adding a resources section. Debbie Johnston suggested that Helen Griffiths speak to Jim Rainer to potentially write a case study regarding how his trust approached redesigning their environment to meet the JAG standards. (Action 9)

12. The group agreed that there is enough demand for a training day to be arranged in Scotland. John Green highlights Scottish services falling behind in accreditation, especially compared to Northern Ireland and Wales. John agrees to arrange a call with John Morris who represents Scotland to discuss this further and encourage more involvement. (Action 10)
13. The group discusses a need for cross group sharing of information on screening in devolved nations with groups such as Improving Safety Reporting Errors in Endoscopy (ISREE). Billie Moores agrees to arrange a call with Siwan Gibson-Thomas to discuss BCSP screening. (Action 11)
14. The group discussed at length a proposal to develop accreditation for endoscopy insourcers, noting concerns around capacity to deliver such a project and the viability of a scheme with such a small number of services partaking. It was agreed that rather than developing accreditation for insourcers, the GRS, standards and evidence guide would be reviewed and increased requirements for services which insource would be implemented. This would ensure that the JAG standards were met by insourcing providers and that the work required for insourcers, services and the JAG team were minimised. (Action 12)
15. Debbie Johnston discusses the CCG spreadsheet (paper X) included in the documents sent to the group members prior to the meeting. The group agree that it would be a useful tool for assessors in regards to reviewing information about services. Debbie Johnston agrees to speak to her contact in NHS England regarding its use, for JAG to potentially publish it on the website. (Action 13)
16. Helen Griffiths highlights the need for the decontamination standards to be updated, specifically the environmental requirements.. The group agreed that Helen would undertake this work in conjunction with other updates to the GRS. (Action 14)
17. John Green highlights confusion felt by some services in regards to completing an infection control audit as an evidence requirement for an upcoming assessment. The group agrees that all services should be doing so. The evidence guide will be updated to clarify this. (Action 15)
18. The group discuss the various changes to the GRS, standards and evidence guide. It was agreed that the evidence guide could be easily updated and the GRS have minor amends made. It was noted that the standards should not be changed at this time, and that any major changes to any of the documents should be made at one point in conjunction with the move to the PAS 1616:2016. It was noted that there are a lot of developments being discuss at the moment, and it is important to ensure that all documents and their various versions (such as the Irish GRS) are developed in parallel with each other. (Action 16)
19. The group discussed a request from the assessors for a forum where they can discuss assessments etc. The group was concerned that the forum wouldn't be well utilised, and that it is difficult to manage. It is agreed that an email will be sent to all assessors detailing tools and resources available to them, and in what capacity of a forum they are able to be a part of. (Action 17)
20. The group discussed the updated terms of reference. It was noted that much of the terms of reference is the standard wording for all groups working on behalf of the Accreditation Unit, but that the wording in the 'Roles and duties' section would be revised. The group also agreed that quoracy should be changed from 50% to 'a majority'. The terms of reference were otherwise accepted in principle subject to these changes. (Action 19)
21. The risk register was discussed briefly. The group agreed to review remotely and feed back any comments to Tim Shaw. (Action 20)

22. The lessons learnt log, risk register and complaints log is to be included on the ESQAG agenda as a standing item. (Action 18)