



Joint Advisory Group on GI Endoscopy

Welcome to accreditation

Getting started on your JAG accreditation journey

What is accreditation?

Welcome to the JAG accreditation programme!

The accreditation process is designed to support services to implement improvements and gain assurance that the standards have been met. By participating, your team are making a commitment to improving the quality of care in your service.

JAG accreditation helps your service to:

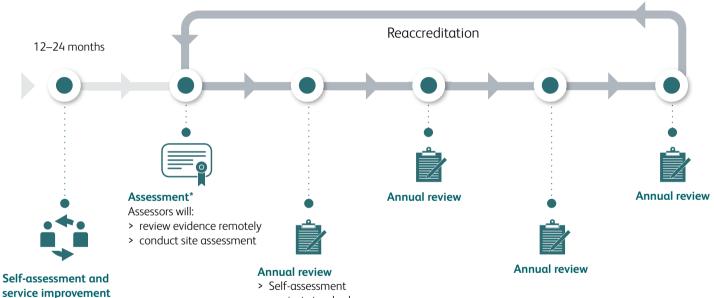
- independently measure themselves against national standards and reduce variation
- demonstrate dedication to improvement, patient safety and reducing risk
- raise your profile, which can often be used to leverage support in the organisation
- highlight good practice and get targeted advice on where to focus improvement efforts.

Brilliant recommendations and tips throughout the assessment. Prompt responses to any queries in the lead up to the assessment. Very supportive throughout the duration of the assessment.



We now have support from the medical director and consultants who really value the service. We have also started to obtain small amounts of funding to enhance the service.

JAG pathway



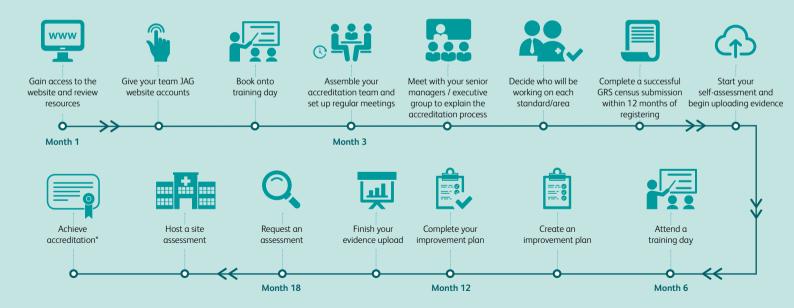
- > Access website. standards and resources
- > Ongoing quality improvement
- > Prepare evidence against standards
- > Attend training day and webinars
- > Complete self-assessment

- against standards
- > Upload key evidence
- > Assessors review remotely

* Services which don't meet or maintain accreditation standards may be granted a period of deferral to resolve some matters.

Your accreditation journey

Accreditation is a journey in improvement. We typically expect services to take between 12–24 months from registration to requesting an accreditation assessment. Here's what you can expect on your journey to accreditation... **Remember!** There is not a set time frame for becoming accredited and different factors will influence how long it takes individual services to complete the process.



Tips and tricks for success

- Don't underestimate the amount of time the accreditation process will take. Involve as many of your team as possible and share the work.
- Make sure your senior management teams are on board from the start of the process; they can be a valuable source of information and support. We recommend holding a presentation meeting early on, to help explain the benefits of accreditation and how this will impact the service and patients positively. We have a set of slides you can use – check out the resource library on the website.
- Create protected time to work on accreditation and have clear goals and timelines. Have regular meetings with your team to update on outstanding tasks – why not schedule a catch-up meeting once a month?
- > Allocate work many services have assigned leads for specific standards and areas, eg one person can be responsible for patient involvement and another for audits.
- Most importantly view the accreditation process as a positive exercise.



It has helped provide me with structure in terms of the service development aspect of running a service and we have already started putting quality improvements plans in place as a result.



We have put in accreditation away days once a month to maintain focus and are in discussion with the trust's quality departments to see if there is support available.

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Quick wins and things to keep in mind...

- If resources and time are limited, prioritise work to get quick wins. This usually means making simple changes in processes to achieve the standards.
- Our resource library has lots of helpful documents and includes documents from other services who are participating in the accreditation process – these can help provide a template to support you and ease your workload.
- Start work on your audits and surveys early these take time to complete, report and analyse. It's never too early to complete the GRS census as this will give you a better idea on what standards you need to work on to achieve the grades required for a site assessment.

- Don't leave your evidence upload to the last minute. It's fine to gather evidence offline but make sure you know how to use the website in advance.
- It's teamwork don't leave the evidence upload responsibility to just one person.

Example documents you can find in the resource library

Role descriptions – clinical, training and management lead

Endoscopy user group terms of reference, agenda and minutes

Patient survey and action plans

Example standard operating procedures (SOP)

Resources and additional services

- > JAG's research group leads and supports research into endoscopy practice. The National Endoscopy Database (NED) uses data from endoscopy reporting systems to provide insights into endoscopists' performance.
- The JAG endoscopy training system (JETS) allows trainee endoscopists to: record their performance on an ePortfolio; gain certification to undertake endoscopic procedures; and attend high-quality endoscopy training.
- > JETS Workforce offers training, assessment and appraisal of nurses or equivalent.
- > The Bowel Cancer Screener Accreditation programme (BCSA) accredits endoscopists to undertake bowel cancer screening in England and Wales.

Each month JAG publishes a case of the month highlighting a real-life clinical scenario which has impacted patient safety. Case studies are designed to promote discussion and share learning.



For all queries please email **AskJag@rcplondon.ac.uk** or call our JAG office on **+44 (0)20 3075 1620**

@JAG_Endoscopy #JAGendoscopy

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