**Endoscopy clinical lead – template role description**

This template can be used by service as a template role description for clinical leads. It can be edited and used as needed.

**Role purpose**

The endoscopy lead provides clinical leadership to the endoscopy service to oversee governance and ensure clinical effectiveness and productivity. The clinical lead acts as a senior member of the clinical team, provides appropriate clinical guidance and is the subject matter expert in endoscopy for the operational teams and throughout the broader organisation.

This will be done in coordination with other members of the endoscopy leadership team, typically a lead nurse, a managerial lead and an administrative lead for the department, depending on the size and nature of the service. They also need to ensure that there is a prominent training agenda in the department by working with the training lead, especially in services providing endoscopy training. The endoscopy lead needs to ensure that patient safety is at the heart of the processes within the service.

**Core functions**

* **Clinical governance**
  + Chair the endoscopy users group or equivalent committee.
  + Oversee implementation and continual improvement of the service measured by the standards of the JAG Global Rating Scale (GRS). Ensure the service is prepared to gain and maintain JAG accreditation.
  + Ensure the development of clinical policies and protocols within the service
  + Set and maintain rolling audit programme for the service with timelines and responsible contributors.
  + Ensure the BSG safety and quality endoscopy KPIs as are reviewed and acted on (see JAG quality and safety guidance).
  + Provide support and expertise in managing underperformance where identified in line with JAG framework document (see JAG managing underperformance guidance)
  + Ensure the endoscopy reporting system (ERS) is uploading to National Endoscopy Database (NED) and that outputs are reviewed at least 6 monthly.
  + Oversee governance review of reported incidents and trend analysis.
  + Ensure patient safety within the service, supporting the implementation of the JAG strategy for Improving Safety and Reducing Error in Endoscopy (ISREE) working closely with the safety lead.
  + Ensure patient feedback is obtained and acted on at least annually.
  + Oversee complaints and investigations of incidents within the service.
* **Unit management and efficiency**
  + Oversee and support activities to achieve waiting times within agreed national targets.
  + Oversee a regular management activity meeting that focuses on managing waits, demand and capacity and list utilisation.
  + Ensure safe and effective surveillance waiting list and up to date clinical validation in line with latest guidelines.
  + Ensure capacity and demand is reviewed planned on an annual basis.
  + Ensure that the service has safe out of hours cover to support patients with complications post procedure and GI bleeding if appropriate to the service model.
  + Review staffing levels in line with the planned demand.
  + Ensure staff feedback is obtained and acted upon at least annually.
  + Oversee and manage service development and business planning.
  + Oversee planning and procurement of endoscopic equipment.
  + Provide support for contract review meetings or investigations.
  + Represent endoscopy in external forums as required.
* **Training environment (in co-ordination with training lead)**
  + Ensure that the environment in the endoscopy department is appropriate for training.
  + Set and monitor standards for competency assessment.
  + Oversee the competency assessment of senior staff or where otherwise appropriate.
  + Involve nursing and administrative staff in training.
  + Promote use of high-quality endoscopy equipment**.**
  + Appropriate provision of training aids (models, videos, books etc).
  + Ensure there are processes in place to prevent trainees that have not received any form of assessment from undertaking endoscopy independently.
  + Ensure that there is a visible up to date list of trainee’s competences withineach endoscopy room.
  + Ensure the service is using both JETS and JETS Workforce to support training for endoscopy nursing staff, medical and clinical endoscopists
* **Key performance indicators**
* Timely and high standard of completion of clinical and non-clinical audits
* Maintenance of in date specific endoscopy policies
* Timely submissions to JAG regarding accreditation
* Timely submission of agreed utilisation reports.
* Compliance with regulation and legislation in modality

**Key working relationships**

* Unit Leads (nursing and management)
* Safety Lead (ISREE)
* Endoscopists
* Governance Team
* Heads of Operations
* Medical Director
* Clinical System suppliers

**Additional comments**

The role of clinical lead for endoscopy is broad and requires appropriate recognition in remuneration and time. Different service models and different leadership team model mean that JAG cannot suggest a specific amount of time. Time allocated to the role must be proportional to the needs of the service and adequately cover the requirements of the role.

To support the adequate provision of time, clinical leads are encouraged to complete a diary exercise. The BMA has released an app to assist doctors in tracking their work. More information is available at https://www.bma.org.uk/advice/employment/job-planning/dr-diary