



Joint Advisory Group
on GI Endoscopy

GLOBAL RATING SCALE (GRS)

Census report for NHS Acute Trust Endoscopy Units in England

Derived from the 15th GRS Census: April 2012

(Amended report-18 July 2012)

Section One - Introduction

This report provides the national Global Rating Scale (GRS) results for England. This report does not include results from other nations at this time; these will be provided at a later date as appendices to this report. The results presented are for the acute and community sector only.

The GRS is an important web-based self-assessment tool that underpins the accreditation process. The JAG requires endoscopy services to submit six monthly self-assessment online returns. This is a key requirement for services planning to apply for accreditation as well as those accredited.

The GRS enables services to benchmark their progress, produce reports and support the JAG to provide a national view of progress against the standards.

Completion rates

The census continues to achieve high service completion rates in the acute sector. The completion rates for all other sectors are low. JAG is working on improving engagement and completion rates in these sectors.

Table 1-GRS completion rates

Sector	% completion	No's completed	Total registered
Acute sector	98%	213	217
Community sector	46%	22	48
Independent sector	63%	59	93

The next sections summarises the key results and areas for improvement for all sectors. The following legend is used to support all tables.

Legend	Red =deterioration	Green =improvement	Yellow =constant
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Section Two – Acute Sector

There are 217 acute trust endoscopy units in England. 213 endoscopy units submitted a complete census return (98%) for the April 2012 census. Four endoscopy units failed to submit a return:

1. Leigh Hospital
2. Ormskirk & District General Hospital
3. Southport & Formby District General Hospital
4. Princess Royal Farnborough

Clinical Quality Domain

Graph 1 represents the national % A and B scores achieved over five census points for the Clinical Quality Domain.

Graph 1 – Acute Sector, Clinical Quality Domain, April 2010 – April 2012

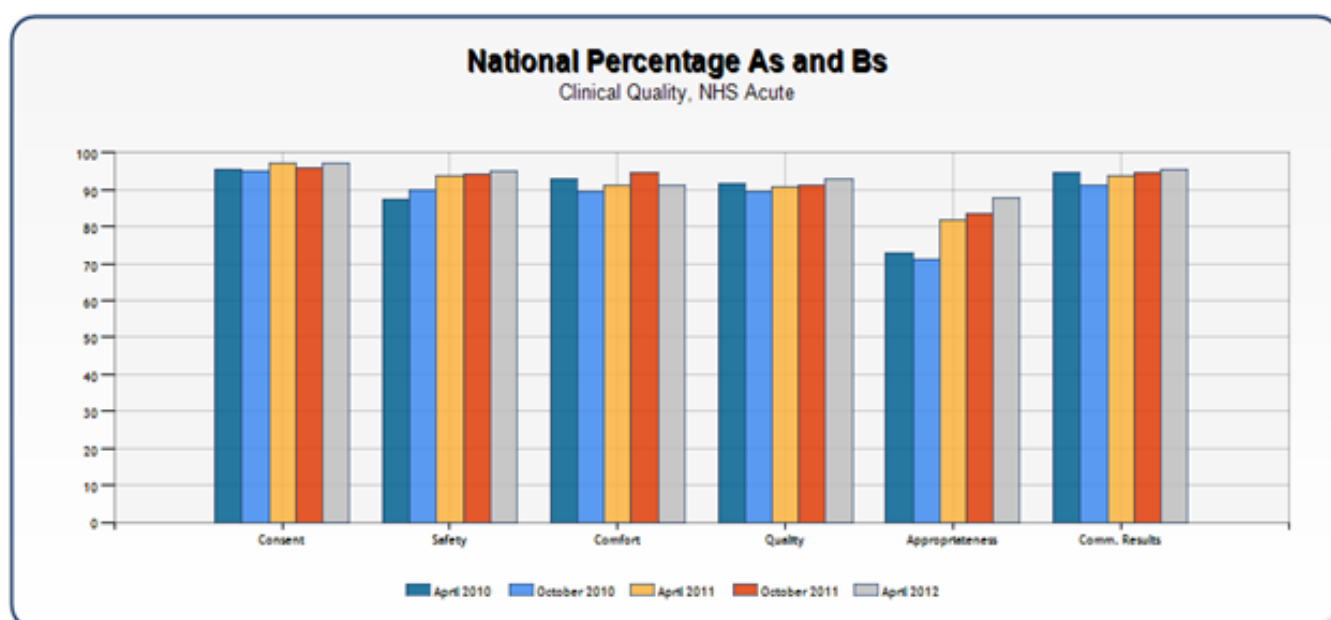


Table 2 summarises the total percentages of A and B's reported over the two most recent census points.

Table 2 – Acute Sector, Clinical Quality % A and B's achieved

Item	October 2011	April 2012
Consent	96%	97%
Safety	94%	95%
Comfort	95%	91%
Quality	92%	93%
Appropriateness	84%	88%
Communicating Results	95%	96%

Key findings:

- Overall improvements are seen across the majority of items with the exception of the Comfort item where 4% deterioration is seen.

Table 3 illustrates the lowest ranking measures in the Comfort item and the % of units that did not achieve the measure.

Table 3 – Lowest ranking Comfort measures

Measure	Description	% units
3.7	Anonymised data on patient comfort levels is fed back to individual endoscopists and to the team at least twice per year	7%
3.9	Action on patient comfort is reviewed within six months to ensure it has been effective (If no action was needed, this measure should be a yes).	4%
3.10	If patient comfort levels do not reach acceptable levels after a period of three months following review of an individual’s safe sedation practice and technique, that individual’s practice is reviewed by the unit’s clinical lead endoscopist and/or chair of governance (as appropriate)	5%

Quality of the Patient Experience Domain

Graph 2 represents the national % A and B scores achieved over five census points for the Quality of the Patient Experience Domain.

Graph 2 – Acute Sector, Quality of the Patient Experience Domain, April 2010 – April 2012

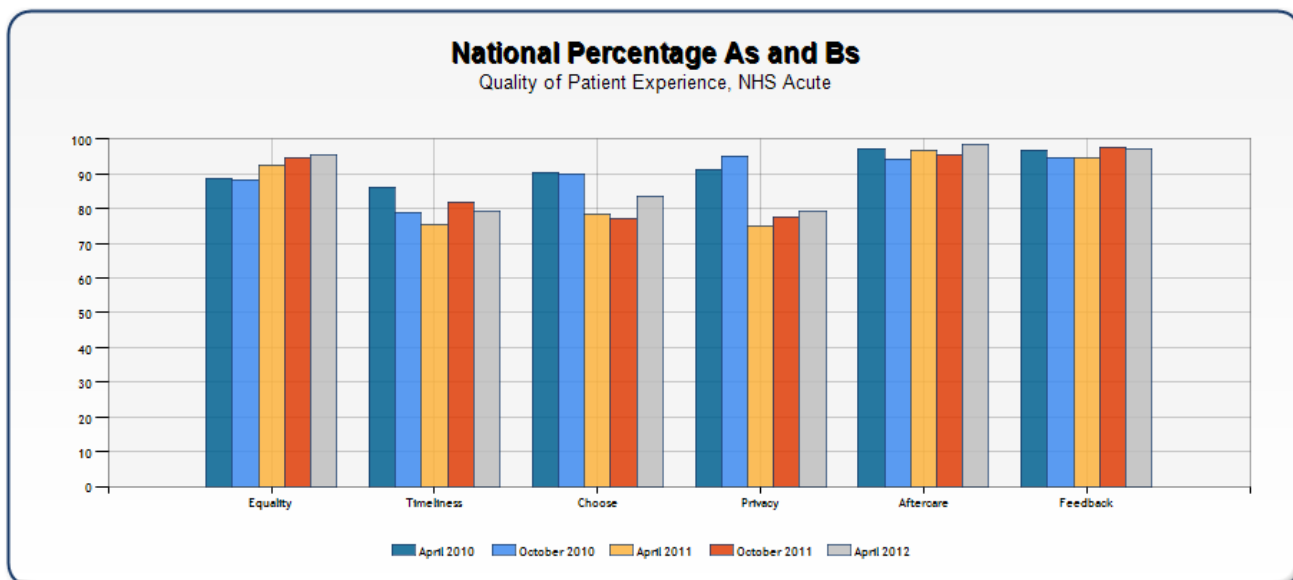


Table 4 summarises the total percentages of A and B's reported over the two most recent census points.

Table 4 – Acute Sector, Quality of the patient experience % A and B's achieved

Item	October 2011	April 2012
Equality	95%	96%
Timeliness (Level A)	64%	57%
Choose and Book	77%	84%
Privacy and Dignity	78%	79%
Aftercare	96%	99%
Feedback	97%	98%

Key findings:

- Overall improvements are seen across the majority of items with the exception of the Timeliness item where 7% deterioration is seen.
- 32% of endoscopy units did not achieve the <2 weeks for urgent and <6 weeks for routines measure compared to 22% in October 2011.
- 36% of units reported that recall (surveillance) procedures are >6 weeks beyond the planned date compared to 29% in October 2011.
- A full separate Timeliness report analysing this deterioration further by region is available through the JAG office.

Table 5 illustrates the lowest ranking measures in the Timeliness item and the % of units that did not achieve the measure.

Table 5 -Lowest ranking Timeliness measures

Measure	Description	%
8.11	Waits are <2 weeks for urgent endoscopy procedures and <13 weeks for routines	14%
8.12	Waits for recall (surveillance) procedures are <13 weeks beyond the planned date	10%
8.14	Waits are <2 weeks for urgent procedures and <6 weeks for routines	32%
8.15	Waits for recall (surveillance) procedures are <6 weeks beyond the planned date	36%
8.16	Capacity can be flexed according to demand to ensure waits are within the above limits	21%

Training Domain

Graph 3 represents the national % A and B scores achieved over five census points for the Training Domain.

Graph 3 – Acute Sector, Training Domain, April 2010 – April 2012

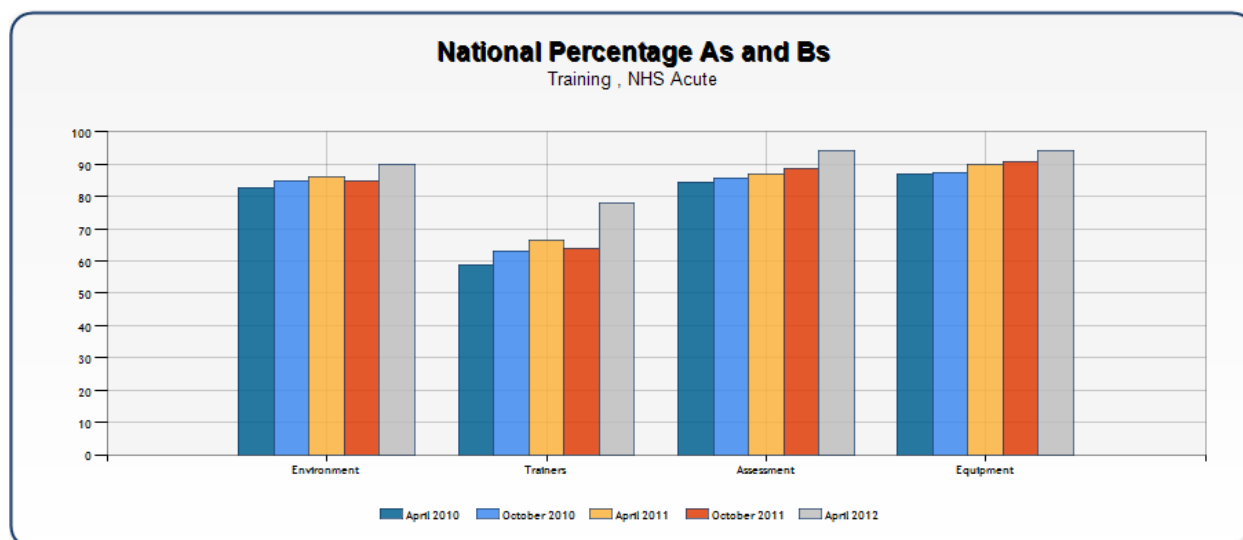


Table 6 summarises the total percentages of A and B's reported over the two most recent census points.

Table 6 - Acute Sector, Training % A and B's achieved

Item	October 2011	April 2012
Environment & Training Opportunity	85%	90%
Endoscopy Trainers	64%	79%
Assessment / Appraisal	89%	94%
Equipment & Educational Opportunity	91%	94%

Key findings:

- An overall 5% improvement is seen across all items of the Training Domain

Workforce Domain

Graph 4 represents the national % A and B scores achieved over five census points for the Workforce Domain.

Graph 4 –Acute Sector, Workforce domain, April 2010 – April 2012

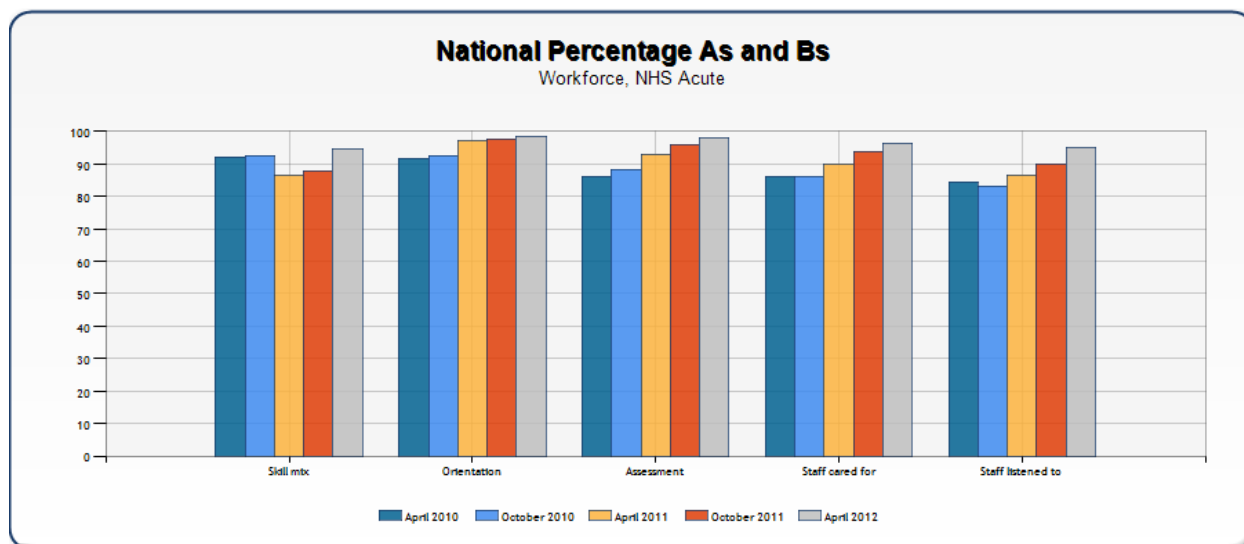


Table 7 summarises the total percentages of A and B's reported over the two most recent census points.

Table 7 - workforce % A and B's achieved

Item	October 2011	April 2012
Skill Mix and Recruitment	88%	95%
Orientation and Training	98%	99%
Assessment and Appraisal	96%	98%
Staff are cared for	94%	96%
Staff are listened to	90%	95%

Key findings:

- Overall improvements are seen across all items of the Workforce Domain
- Skill Mix has seen the highest improvement with a 7% rise in units achieving A & B's.

Section Three – Community Sector

The community sector in England has 48 registered sites on the GRS. 22 sites completed the April 2012 census (46%). The next sections summarises the key results and areas for improvement for all domains.

Clinical Quality Domain

Graph 5 represents the national % A and B scores achieved over five census points for the Clinical Quality Domain.

Graph 5 –Community Sector, Clinical Quality domain, April 2010 – April 2012

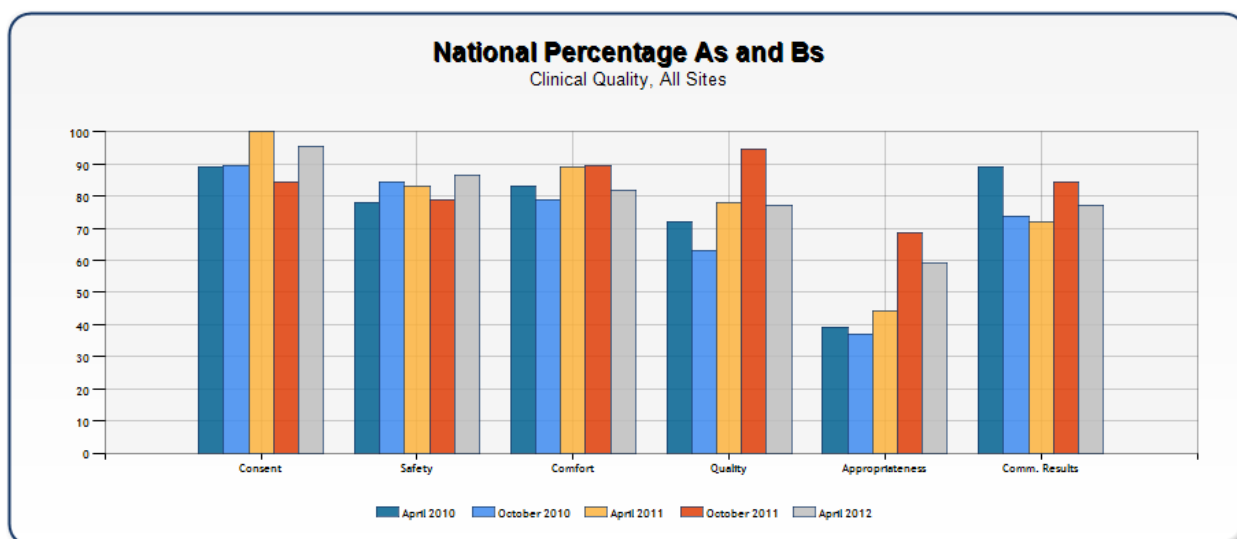


Table 8 summarises the total percentages of A and B's reported over the two most recent census points.

Table 8 – Community Sector, Clinical Quality % A and B's achieved

Item	October 2011	April 2012
Consent	84%	96%
Safety	79%	86%
Comfort	90%	82%
Quality	95%	77%
Appropriateness	68%	59%
Communicating results	84%	77%

Key findings:

- A small improvement is seen in the Consent and Safety items however most items have deteriorated since the last census point.
- Of particular concern are the Quality and Appropriateness items. The Quality item has deteriorated by 18% since the last census report. The Appropriateness item remains the lowest performing item with only 59% achieving level A and B's .
- The low ranking measures in appropriateness and Quality are shown in the tables below.

Table 9 illustrates the lowest ranking measures in the Quality item and the % of units that did not achieve the measure.

Table 9 – Lowest ranking Quality measures

Measure	Description	% units
4.9	Systems are in place for monitoring level 'A' BSG auditable outcomes and quality standards	27%
4.1	Actions taken in response to poor performance are reviewed within agreed timescale	18%
4.8	Systems are in place for monitoring level 'B' BSG auditable outcomes and quality standards	14%

Table 10 illustrates the lowest ranking measures in the Appropriateness item and the % of units that did not achieve the measure.

Table 10 – Lowest ranking Appropriateness measures

Measure	Description	% units
5.10	There is annual review of all guidelines and the policy for vetting referrals	57%

Quality of the Patient Domain

Graph 6 represents the national % A and B scores achieved over five census points for the Quality of the Patient Domain.

Graph 6 –Community Sector, Quality of the patient experience domain, April 2010 – April 2012

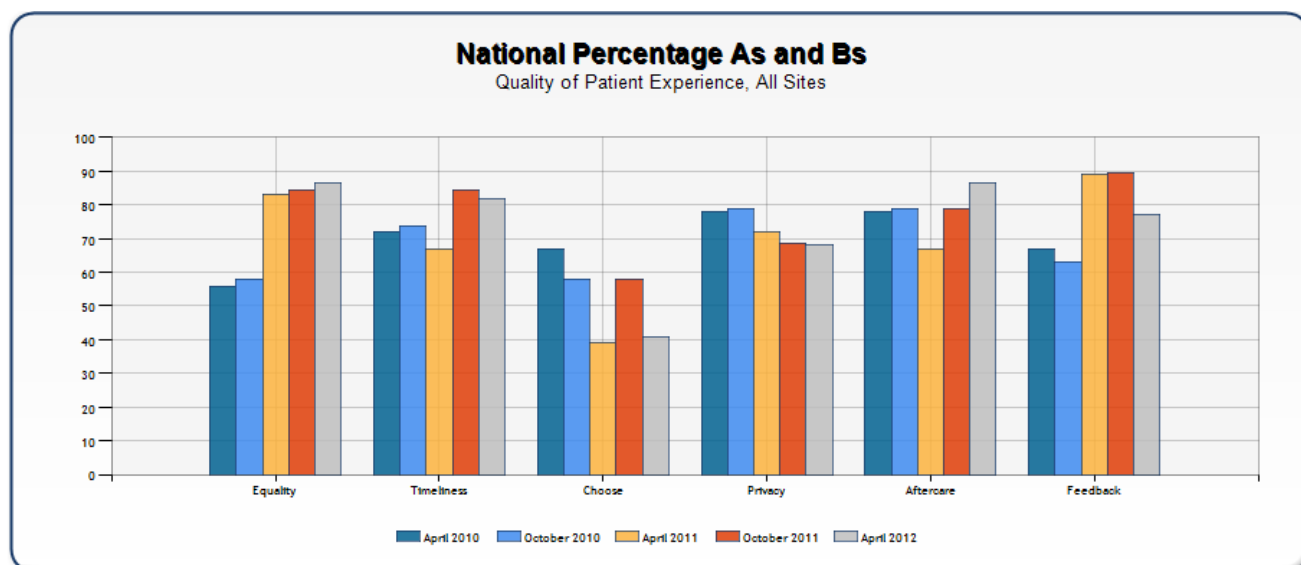


Table 11 summarises the total percentages of A and B's reported over the two most recent census points.

Table 11 – Community Sector, Quality of the Patient domain, % A and B's achieved

Item	October 2011	April 2012
Equality	84%	86%
Timeliness	74%	68%
Choose	58%	41%
Privacy	68%	68%
Aftercare	79%	86%
Feedback	90%	77%

Key findings:

- Mixed results are seen in this domain, two of the items Equality and Aftercare have improved slightly.
- Privacy has remained constant with 68% achieving level A's and B's.
- Timeliness, Choose & book and Feedback have all shown a deterioration with feedback showing the highest deterioration of 23% from the October census.

Table 12 illustrates the lowest ranking measures in the feedback item and the % of units that did not achieve the measure.

Table 12 – Lowest ranking Feedback measures

Measure	Description	% units
12.8	Patients participate in planning and evaluating services	64%
12.9	Details of changes made in response to patient feedback are offered to patients who have participated in feedback surveys	59%
12.3	Patient satisfaction is measured on an ad hoc basis	23%

Workforce Domain

Graph 7 represents the national % A and B scores achieved over five census points for the Workforce Domain.

Graph 7 –Community Sector, Workforce domain, April 2010 – April 2012

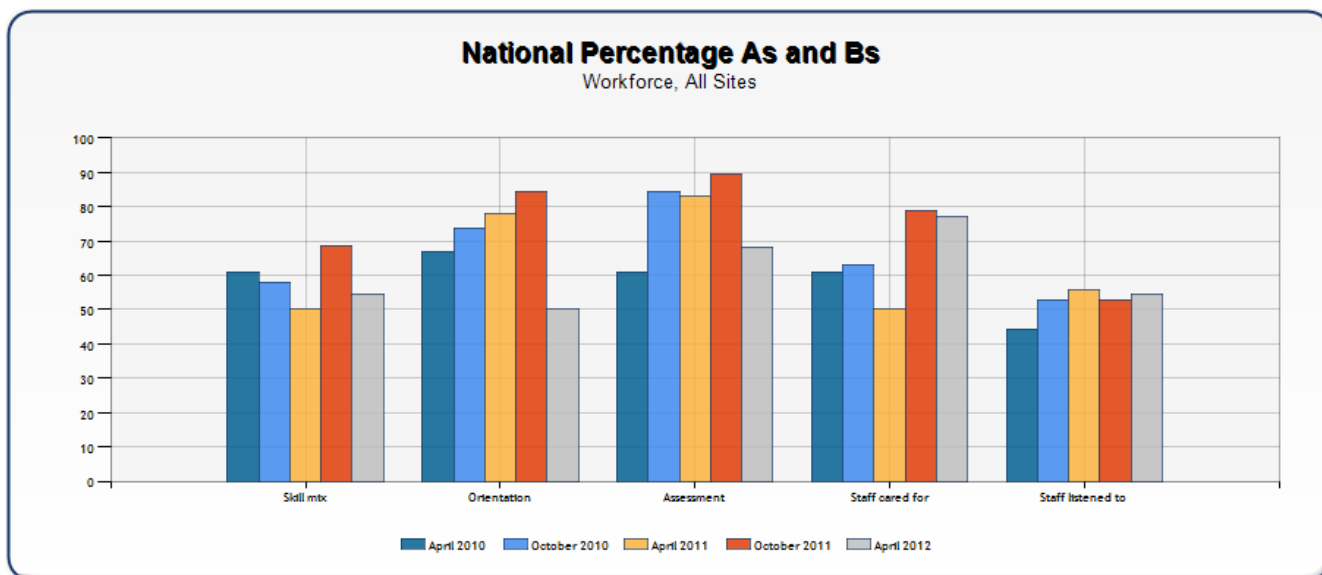


Table 13 – Community Sector, Quality of the Patient domain, % A and B's achieved

Item	October 2011	April 2012
Skill Mix	68%	55%
Orientation	84%	50%
Assessment	90%	68%
Staff cared for	79%	53%
Staff listened to	79%	55%

Key findings:

- Considerable deterioration is seen in all the items for the workforce domain.
- A 34% deterioration is seen in the Orientation and Training item from the last census.

Table 14 illustrates the lowest ranking measures in the Orientation item and the % of units that did not achieve the measure.

Table 14– Lowest ranking Orientation measures

Measure	Description	% units
14.13	Recommendations from staff feedback on training provision are acted upon within six months	50%
14.9	Patient feedback is used in training to develop awareness of the patient experience	27%
14.7	There is a specialty specific formal induction and orientation programme	29%
14.12	Induction programmes are modified in response to staff feedback	29%