Royal College of Physicians | JAG Joint Advisory Group on GI Endoscopy

JAG accreditation programme
Stage one: quality improvement self-assessment

Stage one: quality improvement → Stage two: assessment → Stage three: annual review → Stage four: reaccreditation

Introduction

Before services can be accredited, they must self-assess their service against the GRS and work towards the JAG standards. This document summarises the stage one self-assessment pathway and the actions services must take to be eligible for an accreditation assessment.

The JAG standards

The self assessment aspect of the accreditation process includes a quality improvement stage where endoscopy services assess themselves against the JAG GRS standards and provide evidence to support this.

Each standard details what an endoscopy service must do to deliver high quality care. They are aligned to national guidelines and standards where possible. Previously, services had to demonstrate that they meet standards according to a level system; this has now been removed, and services must demonstrate that they meet the requirements of every standard.

Services can complete their self assessment on the JAG website and review their practices by going through the standards and selecting whether they are meeting each measure. No evidence is required to be submitted at this point, you can simply indicate if you are or if you are not meeting a standard. This self-assessment tool is available all year-round and can be edited as your service pleases.

Once a service is meeting all of the standards or is very close to meeting all of the standards, we encourage them to move forward with the accreditation process and start uploading evidence.

Preparing for evidence upload

Before starting the self-assessment, if the endoscopy service has more than one site, please contact JAG to find out whether a linked self-assessment should be completed.

When a service is ready to move forward with accreditation, services can upload evidence to the 'Evidence Bank' and assign documents to each standard. On the standard pages there is an option to leave comments where necessary. We recommend that a service assigns no more than five documents to each standard. **All standards must be fully evidenced as per the evidence requirements listed in the JAG standards document, before an assessment can be requested.** We cannot accept any documents which contain patient information or that are older than 12 months

A key element of evidence submission is the use of our mandatory templates. For an assessment, we require:

- ✓ Mandatory template 1 – audit report – standard 2.2
- ✓ Mandatory template 2 – clinical audit report – standard 2.2
- ✓ Mandatory template 3 – waiting times – standard 4.5
- ✓ Mandatory template 4 – environment checklist – standard 9.2
- ✓ Mandatory template 5 – IHEEM – standard 9.1

For more information and guidance when uploading evidence, please follow our evidence requirements on the GRS standards (UK) (ROI). There is no time limit for services to complete their self-assessment and request an assessment. However, please note your evidence should not be older than 12 months.

Requesting an assessment

An assessment can be requested through the JAG website by providing three potential dates for the site assessment. These dates must be at least 3 months in advance (see assessment process guidance). JAG will respond within 5 – 10 days of submitting the request with further details on how to proceed.

When requesting an assessment, the service will need to meet each of the criteria below or add a supporting comment to explain why one is not being met:

Assessment eligibility

- ✓ The service has been operational for at least 1 year
- ✓ The service is meeting national waiting time targets

- ✓ The service has paid all invoices for JAG, including the annual subscription
- ✓ The service has completed the self assessment and has uploaded all required evidence
- ✓ The service does not have current or planned building works
- ✓ The service has not uploaded any patient identifiable information to the website
- ✓ We strongly encourage all service team members to have enrolled in one of our 'Intro to JAG' online webinars

Assessment requirements

- ✓ The service must have an operational list running on the day of the assessment; for multi-site assessments, each site must have an operational list running on the date specified for the assessment
- ✓ The service leads (namely clinical, nursing and managerial leads) must be available and present on the day of the assessment

Support

JAG offers the following support for services working towards accreditation:

Training sessions

JAG holds online webinars to provide practical advice and support to endoscopy services seeking JAG accreditation. We strongly recommend medical, nurse and management leads attend our courses as a team to ensure they fully understand the requirements of JAG accreditation.

Video guides

Services can find video guides on common topics such as uploading evidence.

Guidance documents

JAG has produced a range of guidance documents to provide further information on particular areas of the standards.

Frequently asked questions

JAG has developed a knowledgebase containing frequently asked questions about all aspects of JAG accreditation as well as JETS, JETS workforce and the national endoscopy database (NED). You can access the knowledgebase by going to www.thejag.org.uk/support.

Helpdesk

If services still need help after accessing the above resources, then they can contact our helpdesk by emailing AskJAG@rcp.ac.uk.

Document control	
Version	Final, version 3.0
Effective from	July 2026
Review date	July 2028
Owner	Accreditation Unit

+44 (0)20 3075 1454
www.thejag.org.uk/support