

Appendix 1

Part 1:

Organisation	Pre populated read only	
Number of sites in the organisation	Dropdown box 1-50	
Site	Pre populated read only	
JAG Registration Number	Pre populated read only	
Name of Lead Consultant	Name	Email address
Name of Lead Nurse	Name	Email address
Name of Service Lead	Name	Email address
Name of Chief Executive	Name	Email address

Catchment population served by site	Drop-down in 50,000 increments + n/a
Catchment population served by organisation	Drop-down in 50,000 increments + n/a
Is this a linked site return?	
If yes please provide names of linked sites	

What type of endoscopy service/facility do you operate from?	Drop down box. options; <ol style="list-style-type: none"> 1. Standalone dedicated single facility 2. Part of a multisite endoscopy service 3. Integrated with a day surgery facility 4. Independent treatment centre 5. Lists done within operating theatres and recovery either in rooms or shared facilities 6. None of the above
Number of procedure rooms at your site	Drop down box 1-15
Do you lease or use any additional endoscopy rooms away from your site?	Yes/No
Number of staffed GI sessions per week for this site	Whole numbers up to 250
Number of scheduled GI sessions pw for this site	Whole numbers up to 250
Number of dedicated training lists pw for this site	Whole numbers up to 100

Which Endoscopy Reporting System is currently in use in your service?	Options to select from inc. "none", and final "Other (please specify)" to allow free text None Aquilant Ascribe (EMIS) Endoscopy Management System (EMS) by Medilogik Endosoft Inflex (CIMS) Olympus Unisoft Other (please specify)
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Safety

Is your endoscopy safety checklist completion routinely electronic or paper based *	Electronic/Paper-based/we don't use one
Do you audit the use of the endoscopy safety checklist? *	Yes/No

Use of endoscopy department to support patient flow

In the last 12 months have you had to use any area within the endoscopy department to support flow in the emergency department? For example, as a temporary escalation area for patients pending discharge home or awaiting a bed *	Yes/No/We do not have an emergency dept
If yes, on approximately how many occasions has this happened? *	Number up to 500 or n/a
If yes, how many of these occasions were in response to a major internal or external trust incident? *	Number up to 500 or n/a

Part 2: Waiting Times

<p>On a scale of 1-10, please indicate how difficult it has been during 2016 to deliver sufficient capacity to meet the demand for endoscopy.</p>	<p>1-10 scale (where 1 – no problem and 10 – very difficult)</p>
<p>During the last three months, have you failed to meet the relevant national waiting times targets for the following categories?</p> <p>Urgent cancer waits</p> <p>Non-cancer urgent waits</p> <p>Routine waits</p> <p>Surveillance waits</p>	<p>Yes – failed to meet target/no – met target/not applicable</p> <p>Yes – failed to meet target/no – met target/not applicable</p> <p>Yes – failed to meet target/no – met target/not applicable</p> <p>Yes – failed to meet target/no – met target/not applicable</p>
<p>What clinical presentations do you define in the 'urgent non-cancer' category? (For example, acute colitis.)</p>	<p>Add/delete multiple free text items</p>
<p>Where you have had constraints to meeting waiting times, which of the following have applied</p>	<p>Endoscopist capacity</p> <p>Endoscopist recruitment</p> <p>Endoscopist job planning</p> <p>Nursing capacity</p> <p>Nursing recruitment</p> <p>Nursing job planning</p> <p>Admin capacity</p> <p>Admin recruitment</p> <p>Physical capacity</p> <p>Unplanned demand</p> <p>Lack of business plan</p> <p>Business plan not approved</p> <p>Other (free text option):</p>

Waiting list initiatives

During 2016 have you performed any of the following using your own workforce to increase capacity and maintain waiting times?

Ad hoc weekend work	Yes - every week/Yes - most weeks/Yes - less frequently/No
Ad hoc evening work/ad hoc three-session days	Yes - every week/ Yes - most weeks/ Yes - less frequently/No
Backfilling of vacant lists during the working week	Yes - every week/ Yes - most weeks/ Yes - less frequently/No

Extended hours as part of the normal working week

During 2016 has your service introduced any of the following patterns of extended hours as part of the normal working week in order to increase capacity and maintain waiting times? For example a contractual requirement to work extended hours during the weekend and evenings.

<p>Six-day working (eg Saturday)</p> <p>Seven-day working</p> <p>Evening work/three-session days</p> <p>Additional sessions during the working week, if you were not already doing two sessions each day on five days</p> <p>If you have been unable to introduce any of these, please indicate what your constraints have been:</p>	<p>Yes – every week/Yes – most weeks/Yes – less frequently/No</p> <p>Yes – every week/Yes – most weeks/Yes – less frequently/No</p> <p>Yes – every week/Yes – most weeks/Yes – less frequently/No</p> <p>Yes – every week/Yes – most weeks/Yes – less frequently/No</p> <p>Extended working hours not required to meet waiting times targets</p> <p>Endoscopist capacity</p> <p>Endoscopist recruitment</p> <p>Endoscopist job planning</p> <p>Nursing capacity</p> <p>Nursing recruitment</p> <p>Nursing job planning</p> <p>Admin capacity</p> <p>Admin recruitment</p> <p>Physical capacity</p> <p>Unplanned demand</p> <p>Lack of business plan</p> <p>Business plan not approved</p> <p>Other (free text option):</p>
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Outsourcing

<p>During 2016, have you 'outsourced' any activity to an external provider?</p> <p><u>If Yes</u>, is this – A service level agreement for regular activity? A contract to reduce long waits? An ad-hoc arrangement?</p> <p><u>If yes</u>, approximately what percentage of your activity in 2016 was outsourced + option for 'unsure' +2015</p>	<p>Yes/No</p> <p>Yes/No Yes/No Yes/No</p> <p><1% to 100%</p>
<p>Please provide the name(s) of the external service(s) used: Function to add names of any external services used – main provider based on numbers of procedures, followed by option for multiple 'others'</p>	

Insourcing

<p>During 2016, have you commissioned a complete external provider team to provide additional procedures in your own facilities ('insourcing')?</p> <p><u>If Yes</u>, is this – A service level agreement for regular activity? A contract to reduce long waits? An ad-hoc arrangement?</p> <p><u>If yes</u>, approximately what percentage of your activity by procedure numbers in 2016 was performed by an insourced provider + option for 'unsure'</p>	<p>Yes/No</p> <p>Yes/No Yes/No Yes/No</p> <p><1% to 100%</p>
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<p>Please provide the name(s) of the external service(s) used:</p> <p>Function to add names of any external services used – main provider based on numbers of procedures, followed by option for multiple ‘others’</p>	
<p>During 2016, have you commissioned external endoscopists only to provide additional procedures in your own facilities supported by your own nursing team?</p>	<p>Yes/No</p>

<p>Does the service have an agreed capacity plan to meet demand?</p>	<p>No/Yes – plan for 1yr/ Yes – plan for 3yrs/ Yes – plan for 5yrs/ Yes – plan for 10yrs</p>
<p>Do you have systems in place for the routine collection of data for:</p> <p>Demand & Capacity</p> <p>Utilisation of lists</p> <p>Utilisation of points</p>	<p>Yes – per service/Yes – per individual endoscopist/No</p> <p>Yes – per service/Yes – per individual endoscopist /No</p> <p>Yes – per service/Yes – per individual endoscopist /No</p>
<p>I feel optimistic about my service’s ability to fulfill timeliness requirements over the next 12 months</p>	<p>1-10 scale (where 1 – very pessimistic and 10 very optimistic)</p>
<p>Please explain why you are feeling optimistic or pessimistic about your service’s ability to fulfil the timeliness requirements.</p>	<p>Free text</p>

DNA rates

In the UK, DNA is an abbreviation for a patient who "did not attend" on the day of their appointment and did not notify the service.

<p>During 2016 what was your DNA rate for GI endoscopy procedures?</p>	<p><i>Standard lists</i></p>	<p>Percentage up to 2 decimal places, capped at 20% maximum</p>
	<p><i>BCSP</i></p>	<p>Percentage up to 2 decimal places, capped at 20% maximum</p>

List Length

What number of points are typically performed on a service list?	Numerical only 1-50
What number of points are typically performed on a training list?	Numerical only 1-50 or n/a

Part 3: Activity performed at your endoscopy site

Please note that these numbers should relate to the numbers of procedures conducted at your endoscopy site, and not the whole Trust/Organisation. If your data represent a linked multi-site service, please make sure that you give us details of the sites covered in the final comments field at the end of this survey.

Please provide numbers to record your endoscopy activity for the calendar year of 2016.	2015		2016	
Upper GI (including therapeutic procedures)	All numerical values 2015 values carried forward from last year's submission		All numerical values	
	<i>Standard</i>	<i>BCSP</i>	<i>Standard</i>	<i>BCSP</i>
Colonoscopy	All numerical values	All numerical values	All numerical values	All numerical values
Flexible sigmoidoscopy	All numerical values	All numerical values	All numerical values	All numerical values
Balloon enteroscopy (single or capsule endoscopy)	All numerical values		All numerical values	
Enteroscopy	All numerical values		All numerical values	
ERCP	All numerical values		All numerical values	
EUS (total numbers)	All numerical values		All numerical values	
EUS – rectal (if known)	All numerical values		All numerical values	
EUS – Upper GI (if known)	All numerical values		All numerical values	
EUS – HPB (if known)	All numerical values		All numerical values	
Total number of GI procedures	All numerical values		All numerical values	
Number of GI endoscopies for patient <16 yo	All numerical values		All numerical values	

Other non-GI procedures performed within the endoscopy unit:	All numerical values	All numerical values
Bronchoscopy	All numerical values	All numerical values
Colposcopy	All numerical values	All numerical values
Cystoscopy	All numerical values	All numerical values
Hysteroscopy	All numerical values	All numerical values

Part 4: Workforce delivering the endoscopy service at your site

Number of Endoscopists by Grade

Grade	Total number	Planned sessions per week in endoscopy
Consultant Gastroenterologists	Number employed at this grade	Number of sessions per week in endoscopy
Consultant Colorectal Surgeons		
Consultant Upper GI or HPB Surgeon		
Other Consultants (e.g. radiologist)		
Nurse endoscopists		
Other non-medical endoscopists		
Primary care endoscopists		
Non-consultant grade medical endoscopists		
	<i>Service lists (per week)</i>	<i>Training lists (per week)</i>
Gastroenterology SpR trainees		
Surgical SpR trainees		
Other medical trainees (eg. radiology)		
Non-medical trainees inc. trainee nurse endoscopists		
On a scale of 1-10, please indicate how easy or difficult you find it to recruit additional endoscopists	1-10 scale (where 1 – no problem and 10 – very difficult) + n/a option	

Is your nursing establishment shared with a daycase facility?	Yes / No
Do you have decontamination staff as part of the endoscopy unit establishment?	Yes / No
Do you have a team of dedicated bank nurses who support endoscopy when required	Yes / No

Please provide Whole Time Equivalent (WTE) figures for the dedicated endoscopy establishment

Band	Total WTE currently employed	WTE vacancies
8 a-d	Numbers allowing decimals – maximum 100	
7		
6		
5		
4		
3		
2		

On a scale of 1-10, please indicate how easy or difficult you find it to recruit endoscopy nursing support (registered nurses and HCAs or equivalent):	1-10 scale (where 1 – no problem and 10 – very difficult) + n/a option
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Number of Admin and Clerical Endoscopy Staff by Band		
Band	Total WTE currently employed	WTE vacancies
6+7+8a-d	Numbers allowing decimals – maximum 100	
5		
4		
3		
2		
Is your endoscopy admissions team part of the endoscopy establishment?	Yes/No	

On a scale of 1-10, please indicate how easy or difficult you find it to recruit admin and clerical staff:

1-10 scale (where 1 – no problem and 10 – very difficult) + n/a option