



Royal College  
of Physicians

**JAG**

Joint Advisory Group  
on GI Endoscopy

## JAG accreditation Biennial census questions 2021

### Service profile

|   |               |
|---|---------------|
| Country                                   |               |
| Organisation/Trust                        |               |
| Number of sites in the organisation/Trust |               |
| Site name(s)                              |               |
| Catchment population served by service    |               |
| Are you a linked service?                 | - Yes<br>- No |

|  |               |
|--|---------------|
| If yes, please list names of linked sites                                |               |
| Do you run a common waiting list across all sites in the linked service? | - Yes<br>- No |


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|  |       |
|--|-------|
| Do you have the same core staff across all sites?  | - Yes |
| Are the clinical lead, nurse lead and management lead for the sites the same person?             | - No  |
| Are all policies, procedures and audits common across all sites within the GI endoscopy service? | - Yes |
|  | - No  |

### Section 1: Activity

|  |               |
|--|---------------|
| How many dedicated endoscopy rooms do you have?  |               |
| How many dedicated recovery spaces do you have?  |               |
| How many screening rooms do you have? (eg used for fluoroscopy)                                    |               |
| Do you do elective endoscopy outside the dedicated rooms?  | - Yes<br>- No |
| If yes, please tell us the nature and how many sessions are conducted outside the dedicated rooms? |               |
| Do you have any other ad-hoc room capacity? If so, please specify:                                 |               |



|   | Activity:<br>How many points per procedure do you allocate on a list for: | Total 6+ week:<br>Estimate the total number of points per procedure |
|---|---|---|
| Upper GI - Diagnostic (1 point)                 |   |   |
| Upper GI - Therapeutic (2 points)               |   |   |
| Flexible sigmoidoscopy - Diagnostic (1 point)   |   |   |
| Colonoscopy – Diagnostic (2 point)              |   |   |
| Colonoscopy - bowel cancer screening (3 points) |   |   |
| Colonoscopy - complex polypectomy (3 points)    |   |   |
| ERCP (2 points)                                 |   |   |
| Other - enteroscopy, EUS (3 points)             |   |   |
| Total   | N/A   |   |

On a typical week, how many sessions are typically booked in each room?

Note: Please provide an estimate per session. One session can be defined as half a day or one list. Please do not include any additional WLI work or insourcing sessions in this chart.

| Rooms | Weekdays | Weekend | Evening |
|-------|----------|---------|---------|
| 1     |          |         |         |
| 2     |          |         |         |
| 3     |          |         |         |
| 4     |          |         |         |
| 5     |          |         |         |
| 6     |          |         |         |
| 7     |          |         |         |
| 8     |          |         |         |
| 9     |          |         |         |
| 10    |          |         |         |
| 11    |          |         |         |
| 12    |          |         |         |
| 13    |          |         |         |

|  |  |
|--|--|
| <p>In the month of March 2021, how many endoscopy lists were delivered at your service?</p> <p>Please include ERCP, BCSP and activity undertaken outside of endoscopy e.g. transnasal endoscopy clinics/theatre endoscopy.</p> <p>Please include additional rooms opened as a result of COVID on or off site staffed by your own team.</p> <p>Please exclude insourced or outsourced activity to another provider, and any waiting list initiatives (WLI).</p>   |  |
| <p>In the month of March 2021, how many additional endoscopy lists were delivered at your service?</p> <ul style="list-style-type: none"> <li>- Insourced (weekday or weekend)</li> <li>- Standard activity during weekend by own team</li> <li>- WLI paid activity by own team</li> <li>-</li> </ul> <p>Please only include insourced activity or waiting lists initiatives (WLI)</p> <p>Definitions:</p> <p>Insourcing: commissioned full/partial service from an independent provider/group to operate contracted endoscopy lists on site</p> <p>Outsourcing: commissioned service from an independent provider or group to operate contracted endoscopy lists off or on the hospital site (. Some portable/temporary units are established on the hospital site.</p> <p>Standard activity: 7 day working, ie. Normal team at the weekend as part of the working week. This may be planned outpatient work and/or inpatient emergencies.</p> <p>WLI: waiting list initiatives are additional sessions worked in evenings and weekends in addition to existing capacity.</p> |  |

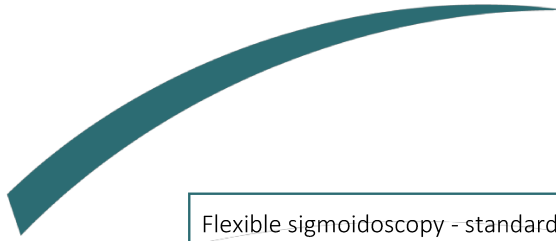
|   |  |
|---|--|
| From 1 January to 31 December 2020, did your service 'outsource' any activity to an external provider?  | - Yes<br>- No  |
| If yes, is this: <ul style="list-style-type: none"> <li>- An ongoing contract for regular activity?</li> <li>- A contract to reduce long waits?</li> <li>- An ad-hoc arrangement?</li> <li>- Other</li> </ul> | Choose one option for each category: <ul style="list-style-type: none"> <li>- Yes</li> <li>- No</li> </ul> |
| If yes, on average how many lists per month were outsourced?  |  |
| From 1 January to 31 December 2020, did your service commission an external provider to provide additional procedures in your own facility or in an independent facility on site ('insourcing')?              | - Yes<br>- No  |
| If yes, is this: <ul style="list-style-type: none"> <li>- An ongoing contract for regular activity?</li> <li>- A contract to reduce long waits?</li> <li>- An ad-hoc arrangement?</li> </ul>                  | Choose one option for each category: <ul style="list-style-type: none"> <li>- Yes</li> <li>- No</li> </ul> |
| If yes, on average how many lists per month were insourced?   |  |

Please provide numbers to record your endoscopy activity for the calendar year of 2020.

Include all activity completed including in theatres and out of hours, except outsourced procedures.

Please include any core activity completed by the team 'off site' in additional or temporary hired rooms from other hospitals to deliver activity.

|   |  |
|---|--|
| Upper GI (including therapeutic procedures) |  |
| Colonoscopy - standard                      |  |



|   |  |
|---|--|
| Flexible sigmoidoscopy - standard   |  |
| Colonoscopy - bowel cancer screening  |  |
| Trans nasal endoscopy (TNE)   |  |
| Capsule endoscopy   |  |
| Enteroscopy - including single or double balloon  |  |
| ERCP  |  |
| EUS   |  |
| Total number of GI procedures   |  |
| Number of GI endoscopies for patients <16yo   |  |
| Other non-GI procedures performed within the endoscopy service facilities - eg bronchoscopy, colposcopy or cystoscopy |  |

|   |   |
|---|---|
| Considering the use of endoscopy to support patient flow:   |   |
| <p>During 2020, was any area at any site within your service used to support flow in the emergency department?</p> <p>For example, as a temporary escalation area for patients pending discharge home or awaiting a bed</p> | <p>Choose one option:</p> <ul style="list-style-type: none"> <li>- Yes</li> <li>- No</li> <li>- We do not have an emergency department</li> </ul> |
| If yes, on approximately how many occasions has this happened?  |   |

If yes, how many of these occasions were in response to a major internal or external trust incident?

## Section 2: Workforce

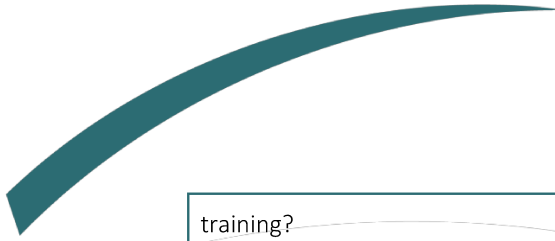
### Endoscopists

Please provide the number of endoscopists per grade. Please include medical and clinical endoscopists. Note: previously known as non-medical endoscopists (NMEs)

| Grade                                     | Total number of individuals | Total annual planned sessions in endoscopy in 2020<br><br>Definition: a session is typically one endoscopy list, half a day/four hours |
|---|-----------------------------|--|
| Consultant gastroenterologists            |                             |  |
| Consultant colorectal surgeons            |                             |  |
| Consultant upper GI or HPB surgeon        |                             |  |
| Other consultants (e.g. radiologist)      |                             |  |
| Clinical endoscopists                     |                             |  |
| Primary care endoscopists                 |                             |  |
| Non-consultant grade medical endoscopists |                             |  |

Does your service undertake - Yes



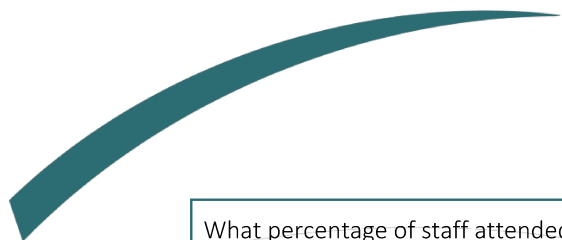


|           |      |
|-----------|------|
| training? | - No |
|-----------|------|

| If yes, Training  | Service lists (per week) | Training lists (per week)  |
|---|--------------------------|--|
|   |                          | Definition: A dedicated training list is defined as a list where a trainee in an aspect of endoscopy is accompanied in the room by a more experienced endoscopist who provides guidance and feedback. Typically the number of procedures is reduced on the list. |
| Gastroenterology SpR trainees   |                          |  |
| Surgical SpR trainees   |                          |  |
| Other medical trainees (eg. radiology, research fellows, non-consultant trainees) |                          |  |
| Trainee clinical endoscopists   |                          |  |

### Training endoscopy workforce

|  |  |
|--|--|
| <p>Did staff have access to training between 1 January to 31 December 2020?</p> <p>Note: this applies to all your workforce</p>                                    | <p>- Yes</p> <p>- No</p>   |
| <p>Has training been affected due to:</p> <ul style="list-style-type: none"> <li>- COVID</li> <li>- Funding</li> <li>- Staffing levels</li> <li>- Other</li> </ul> | <p>Choose one option for each category:</p> <p>- Yes</p> <p>- No</p> |



|   |  |
|---|--|
| What percentage of staff attended mandatory training? (sg skills updates, JETS workforce) |  |
|---|--|

**Nursing and decontamination workforce**

Please provide the whole time equivalent (WTE) for each band of nursing staff and allied health care professionals working at your service. Where individuals work a portion of their time outside of endoscopy, please only include their time that is dedicated to the endoscopy service

Each band is defined as:

- Band 8 – nurse lead over large service/ multiple sites
- Band 7 – nurse lead/senior sister/charge nurse
- Band 6 – senior nurse/odp/ nurse lead/ sister
- Band 5 – registered nurses, operating department practitioners
- Band 4 – assistant practitioners, senior health care assistants with expanded roles
- Band 2-3 – decontamination staff, health care assistants

Please do not include clinical endoscopists or clinical nurse specialists unless they have a dual role.

| Band  | Total WTE currently employed | WTE vacancies |
|-------|------------------------------|---------------|
| 8 a-d |                              |               |
| 7     |                              |               |
| 6     |                              |               |
| 5     |                              |               |
| 4     |                              |               |
| 3     |                              |               |
| 2     |                              |               |



Please provide percentages of absence through sickness for each band of nursing staff and allied health care professionals working at your service for the month from 1 to 31 March 2021. This might be based on days lost as a percentage.

Each band is defined as:

- Band 8 – nurse lead over large service/ multiple sites.
- Band 7 – nurse lead/sister
- Band 6 – senior nurse/odp/ nurse lead/ sister
- Band 5 – registered nurses, operating department practitioners.
- Band 4 – assistant practitioners, senior health care assistants with expanded roles.
- Band 2-3 – decontamination staff, health care assistants

Please do not include clinical endoscopists or clinical nurse specialists unless they have a dual role.

| Band  | Percentage absence through sickness |
|-------|-------------------------------------|
| 8 a-d |                                     |
| 7     |                                     |
| 6     |                                     |
| 5     |                                     |
| 4     |                                     |
| 3     |                                     |
| 2     |                                     |

**Admin/scheduling workforce**

|   |  |
|---|--|
| What is your administration and booking model for endoscopy | Choose one option:<br>- Dedicated / own admin team<br>- Shared with other service<br>- Centralised<br>- Off site/another provider<br>- other |
|---|--|

Please provide the whole time equivalent (WTE) for the management and administration of the service. Each band of who support core endoscopy work for the service ie operational management, waiting list management, booking and scheduling, backfilling and capacity planning, notes preparation etc. It is appreciated that there are different admin operation models and we are trying to establish the amount of funded time allocated for the service; Where individuals work a portion of their time outside of endoscopy, please only include their time that is dedicated to the endoscopy service.

Each band is defined as:

- Band 8
- Band 6/7 – senior administrator/manager
- Band 5 – administrator/supervisor
- Band 4 – admin team leader
- Band 3 – admin booker scheduler
- Band 2 – admin support/ receptionist

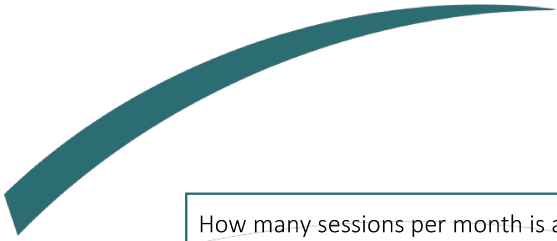
| Band  | Total WTE currently employed | WTE vacancies |
|-------|------------------------------|---------------|
| 8 a-d |                              |               |
| 7     |                              |               |
| 6     |                              |               |
| 5     |                              |               |
| 4     |                              |               |
| 3     |                              |               |
| 2     |                              |               |

### Section 3: Waiting times

|  |  |
|--|--|
| <p>From January – March 2021, has your service met the relevant national waiting times and JAG criteria targets for the following categories?</p> <ul style="list-style-type: none"> <li>- Urgent cancer waits</li> <li>- Routine waits</li> <li>- Surveillance waits</li> </ul> | <p>Choose one option each category:</p> <ul style="list-style-type: none"> <li>- Yes - have met target</li> <li>- No - have not met target</li> <li>- Not applicable</li> </ul>  |
| <p>Where your service has had problems with meeting waiting times, which of the following have been the reason:</p>  | <p>Choose multiple options:</p> <ul style="list-style-type: none"> <li>- Workforce capacity</li> <li>- Workforce shielding</li> <li>- Workforce redeployment</li> <li>- Workforce skill mix</li> <li>- Infection control</li> <li>- Patient reluctance</li> <li>- Environmental capacity</li> <li>- Infection control (incl, pathway, air changes etc..)</li> <li>- Recruitment</li> <li>- Unplanned demand</li> <li>- Lack of approved business plan or capacity plan</li> <li>- Decontamination issues</li> <li>- Availability of General Anaesthetics lists</li> </ul> <p>Other (free text option):</p> |
| <p>Does your service have an agreed business/capacity plan to meet demand?</p>   | <p>Choose one option:</p> <ul style="list-style-type: none"> <li>- No</li> <li>- Yes – plan for 1yr</li> <li>- Yes – plan for 3yrs</li> <li>- Yes – plan for 5yrs or more</li> </ul>   |
| <p>Does your service routinely collect data and reports for:</p> <ul style="list-style-type: none"> <li>- Demand and capacity</li> <li>- Utilisation of lists</li> </ul>   | <p>Choose one option for each category:</p> <ul style="list-style-type: none"> <li>- Yes – per service</li> <li>- Yes – per individual endoscopist (only applies to utilisation of lists and points)</li> </ul>  |



|  |  |
|--|--|
| <ul style="list-style-type: none"> <li>- Utilisation of inlist points</li> </ul>   | <ul style="list-style-type: none"> <li>- No</li> </ul>   |
| <p>In March 2021 what was your DNA rate for GI endoscopy procedures?</p> <ul style="list-style-type: none"> <li>- Standard lists</li> <li>- Bowel cancer screening lists</li> </ul> <p>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>                | <p>You can determine your DNA rate by looking at the number of DNAs over the month as a percentage of total appointments for that month.</p> |
| <p>In March 2021 what number of GI endoscopy procedures were cancelled?</p> <ul style="list-style-type: none"> <li>- Standard lists</li> <li>- Bowel cancer screening lists</li> </ul> <p>In the UK NHS data dictionary, cancellations are defined as the procedure or operation being cancelled at short notice for non-clinical reasons.</p> |  |
| <p>How many, on average, are the following typically booked on an upper GI list:</p> <ul style="list-style-type: none"> <li>- OGD</li> <li>- Colonoscopies</li> </ul>  |  |
| <p>How many, on average, are the following typically booked on a training list:</p> <ul style="list-style-type: none"> <li>- OGD</li> <li>- Colonoscopies</li> </ul>   |  |



|  |               |
|--|---------------|
| How many sessions per month is assigned to non-GI procedures performed within the endoscopy service? (eg bronchoscopy, colposcopy or cystoscopy) |               |
| Does your service perform ERCP scope?  | - Yes<br>- No |
| If yes,<br>Do you perform in X-Ray or endoscopy service?   |               |


#### Section 4: Safety

Questions are designed to gather a broad range of information which will allow us to gauge the current status of safety in endoscopy and help generate further improvements in patient care.

**None of the information provided in this census will have any effect on a service's accreditation status.**

DATIX is the incident/adverse event reporting system used in the UK. Some organisations, particularly Independent Sector organisations may use an alternative system to DATIX.

|  |  |
|--|--|
| Number of incidents reported in March 2021   |  |
| <p>Please tick the categories that these incidents fell under:</p> <p>Definitions:</p> <p>Drug incident - Any incident in drug prescription or administration, including oxygen delivery</p> <p>Sedation, IV access and monitoring incident - Any incident in relation to sedation e.g. checking, administration, monitoring methods</p> <p>Technical skills incident - any technical incident including endoscopist error</p> | <p>Choose multiple options:</p> <ul style="list-style-type: none"> <li>- Infection control (COVID related)</li> <li>- Drug incident</li> <li>- Sedation, IV access and monitoring incident</li> <li>- Technical skills</li> <li>- Equipment incident</li> <li>- Workforce/skill mix</li> <li>- Training incident</li> <li>- Documentation or reporting incident</li> <li>- Consent incident</li> <li>- Histology and sampling incident</li> <li>- Other</li> </ul> |



|  |               |
|--|---------------|
| Equipment incident - any equipment incidents including failure of equipment  |               |
| Training incident - Any incidents involving training or trainees, including supervision  |               |
| Documentation or reporting incident - Any incidents in documentation of procedures or correct patient details  |               |
| Consent incident - Any incident during consent process e.g. incorrect patient or procedure   |               |
| Histology and sampling incident - Any incident regarding histology samples e.g. incorrect specimen site, specimen pot labelling, number of specimens |               |
| Number of serious incidents between October 2020 - March 2021?   |               |
| Is there a nominated patient safety lead in your service?  | - Yes<br>- No |

### Section 5: COVID-19

|  |   |
|--|---|
| From the period of October 2020 – March 2021, was endoscopy activity outsourced to the private sector using the service's own staff? | - Yes<br>- No   |
| Were staff redeployed?   | - Yes<br>- No   |
| If yes, what percentage of staff were redeployed?  | Choose one option:<br>- 0-10%<br>- 10-20%<br>- 30-40%<br>- 40-50%<br>- 50-60%<br>- 60-70% |





|  |  |
|--|--|
|  | <ul style="list-style-type: none"> <li>- 70-80%</li> <li>- 80-90%</li> <li>- 90-100%</li> </ul>  |
| <p>What staff member types were redeployed? Tick all that applies:</p>                               | <p>Choose one options:</p> <ul style="list-style-type: none"> <li>- Band 1</li> <li>- Band 2</li> <li>- Band 3</li> <li>- Band 4</li> <li>- Band 5</li> <li>- Band 6</li> <li>- Band 7</li> <li>- Band 8</li> </ul>                  |
| <p>What was the sickness rate during COVID (October 2020 - March 2021) for retained staff?</p>       |  |
| <p>What level of activity would you estimate the service is currently at compared to March 2019?</p> | <p>Choose one option:</p> <ul style="list-style-type: none"> <li>- 0-10%</li> <li>- 10-20%</li> <li>- 30-40%</li> <li>- 40-50%</li> <li>- 50-60%</li> <li>- 60-70%</li> <li>- 70-80%</li> <li>- 80-90%</li> <li>- 90-100%</li> </ul> |

### Section 6: Other

|  |   |
|--|---|
| <p>Considering your services out of hours service...</p> |   |
| <p>Is there a 24/7 GI bleed service?</p>                 | <p>Choose one option:</p> <ul style="list-style-type: none"> <li>- Yes – in theatre</li> <li>- Yes – within the unit</li> <li>- Yes – at another site within the service (hot site)</li> <li>- Yes – at another site outside of the organisation (regional service or other)</li> <li>- No</li> </ul> |



|  |   |
|--|---|
| Is it consultant-only, clinical endoscopist or consultant and trainee? | Choose one option: <ul style="list-style-type: none"> <li>- Consultant only</li> <li>- Consultant and clinical endoscopist</li> <li>- Consultant and trainee</li> </ul> |
| Is it staffed by endoscopy nurses?                                     | - Yes<br>- No   |

|  |  |
|--|--|
| Regarding planned anaesthetics supported lists...                                |  |
| Does your service have access to regular or ad-hoc anaesthetics supported lists? | Choose one option: <ul style="list-style-type: none"> <li>- Regular</li> <li>- Ad hoc</li> <li>- No</li> </ul> |
| If yes, how many lists are supported by anaesthetics per month?                  | Choose one option: <ul style="list-style-type: none"> <li>- 1-3</li> <li>- 4-10</li> <li>- 11+</li> </ul>      |
| Ideally how many planned lists would your service utilise per month?             | Choose one option: <ul style="list-style-type: none"> <li>- 1-3</li> <li>- 4-10</li> <li>- 11+</li> </ul>      |




## Equipment

| Scope                          | Total number of scopes | Does equipment shortage ever interfere with operation or service delivery?<br>(Yes/No) | Percentage of scopes greater than 10 years old? | Equipment purchase date | Is there a service & maintenance contract? | Is there a lease agreement? |
|--------------------------------|------------------------|--|---|-------------------------|--|-----------------------------|
| OGD                            |                        |  |   |                         |  |                             |
| Flexible sigmoidoscopy         |                        |  |   |                         |  |                             |
| Colonoscopy                    |                        |  |   |                         |  |                             |
| ERCP                           |                        |  |   |                         |  |                             |
| EUS                            |                        |  |   |                         |  |                             |
| Endoscopy stack system         |                        |  |   |                         |  |                             |
| 3D imaging systems/scope guide |                        |  |   |                         |  |                             |
| Other                          |                        |  |   |                         |  |                             |

## Decontamination

|  |  |
|--|--|
| Where is decontamination provided in your service? | Choose one option: <ul style="list-style-type: none"> <li>- In endoscopy unit</li> <li>- Managed by sterile services</li> <li>- Off site (outsourced)</li> </ul> |
|--|--|



|   |   |
|---|---|
|   | <ul style="list-style-type: none"><li>- Regional model</li><li>- Mixed (offsite and in house)</li></ul> |
| Is there capacity to decontaminate more scopes?                                       | <ul style="list-style-type: none"><li>- Yes</li><li>- No</li></ul>                                      |
| Would additional building works be required to increase decontamination capacity?     | <ul style="list-style-type: none"><li>- Yes</li><li>- No</li></ul>                                      |
| Would additional reprocessors/drying cabinets/other be required to increase capacity? | <ul style="list-style-type: none"><li>- Yes</li><li>- No</li><li>Other: (Please specify)</li></ul>      |