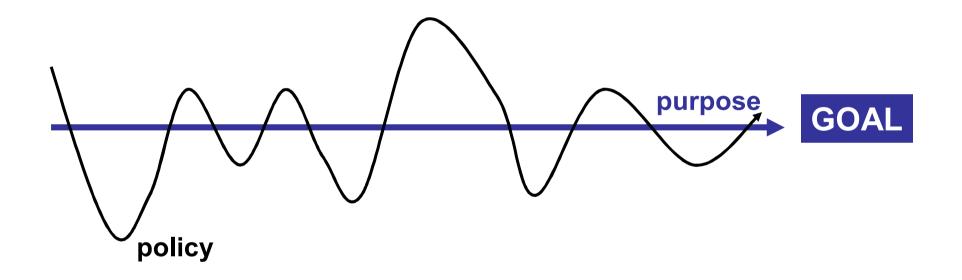
Opportunities for intercollegial and crossborder accreditation of clinical services

Roland Valori Gastroenterologist National Clinical Director for Endoscopy Clinical Director for Accreditation, RCP September 2012

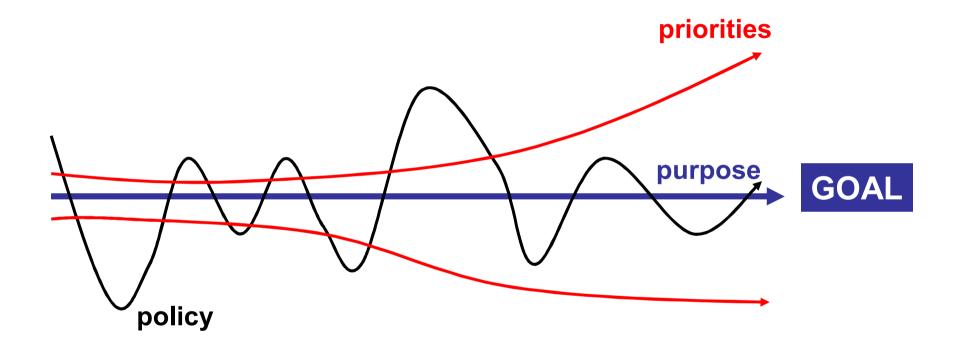
Purpose, Policy and Priorities



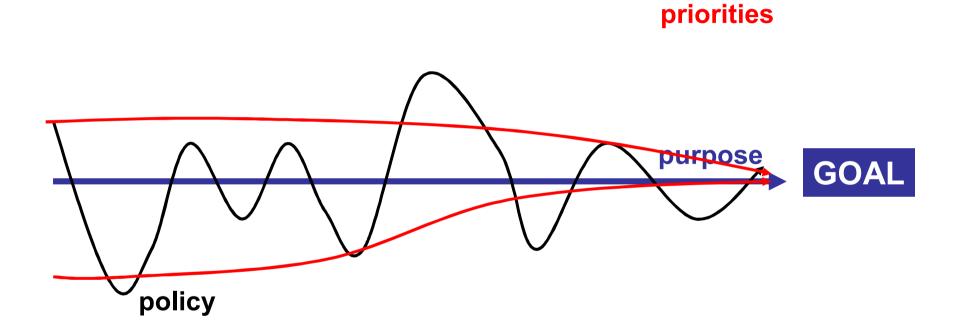
Current policy scene

- Outcome-based commissioning
- Patient centred care
- Informed choice
- Clinical leadership
- Value for money
- Subsidiarity
- Less interference from government

Purpose, Policy and Priorities



Purpose, Policy and Priorities



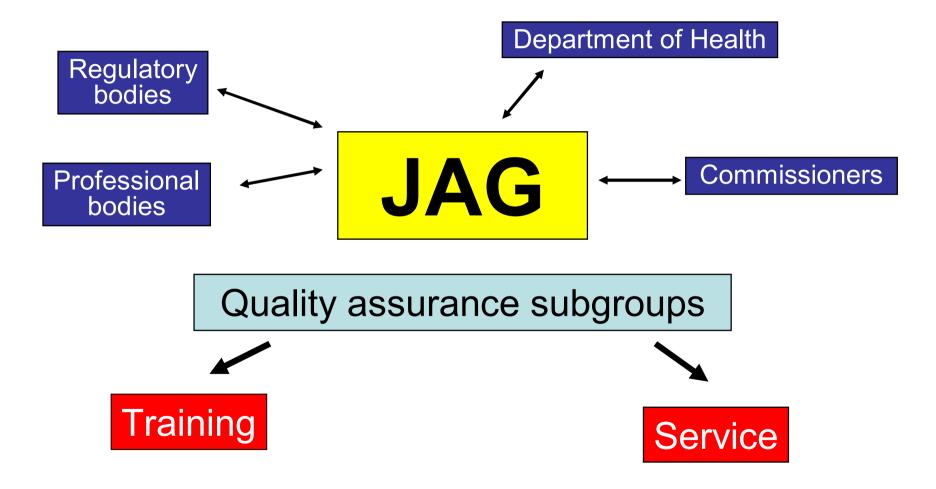
The JAG - Joint Advisory Group on Gastrointestinal Endoscopy

- Members represent
 - Patients
 - Gastroenterologists
 - Colorectal surgeons
 - Upper GI surgeons
 - Thoracic surgeons
 - Radiologists
 - Paediatricians
 - Nurses
 - General Practitioners

- Others
 - Royal Colleges of Physicians
 - Royal College of Surgeons
 - Royal College of Nursing
 - Various training committees

www.thejag.org.uk

Quality assurance governance structure



Patient-centred standards

- endoscopy Global Rating Scale (GRS)

1.	Clinical quality	2. (Quality of the patient experience
1.	Information/consent	1.	Equality of access
2.	Safety	2.	Timeliness
3.	Comfort	3.	Choose and book
4.	Quality	4.	Privacy and dignity
5.	Appropriateness	5.	Aftercare
6.	Results to referrer	6.	Patient feedback

CAG endoscopy consensus guidelines. Can J Gastrol; 2012;26:17-31

Four domains of the GRS

1.	Clinical quality	2.	Quality of the patient experience
1.	Information/consent	1.	Equality of access
2.	Safety	2.	Timeliness
3.	Comfort	3.	Choose and book
4.	Quality	4.	Privacy and dignity
5.	Appropriateness	5.	Aftercare
6.	Results to referrer	6.	Patient feedback
		- · ·	
	Workforce		Training
3.			Training
3. 1.	Workforce	4.	Training
3. 1.	Workforce Skill mix review and recruitment	4. 1.	Training Environment and opportunity
3. 1. 2.	Workforce Skill mix review and recruitment Orientation and training	4. 1. 2.	Training Environment and opportunity Endoscopy trainers
 3. 2. 3. 4. 	Workforce Skill mix review and recruitment Orientation and training Assessment and appraisal	4. 1. 2. 3.	Training Environment and opportunity Endoscopy trainers Assessment and appraisal

Each item has 4 levels

Inadequate	D	Minimal achievement	
Basic	С	Reactive	
Good	В	Proactive	
Excellent	А	Outward looking	

Level B is the current standard

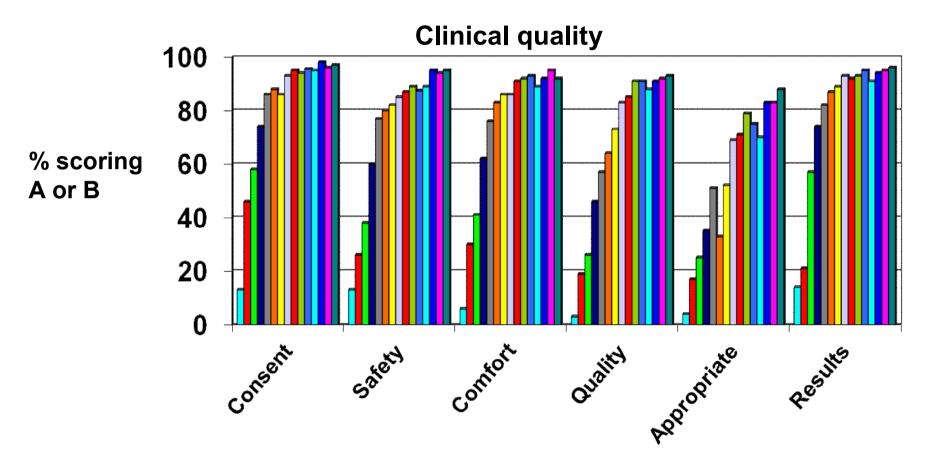
1-4 measures define each level



Service improvement tool

- GRS is an on-line check list :
 - >200 measures in 21 items in four domains
- It provides a *framework* on which to prioritise tasks

GRS results: April 2005 – April 2012



Completion rates

	2005	2	006	2	2007	20	008	20	009	201	10	20	011	2012
85%	94%	100	97%	97%	98%	<mark>99%</mark>	99%	96%	97%	99%	100%	99%	98%	98%
Apr	Oct	% Apr	Oct	Apr	Oct	Apr	Oct	Apr	Oct	Apr	Oct	Apr	Oct	Apr

Doctor response to the GRS

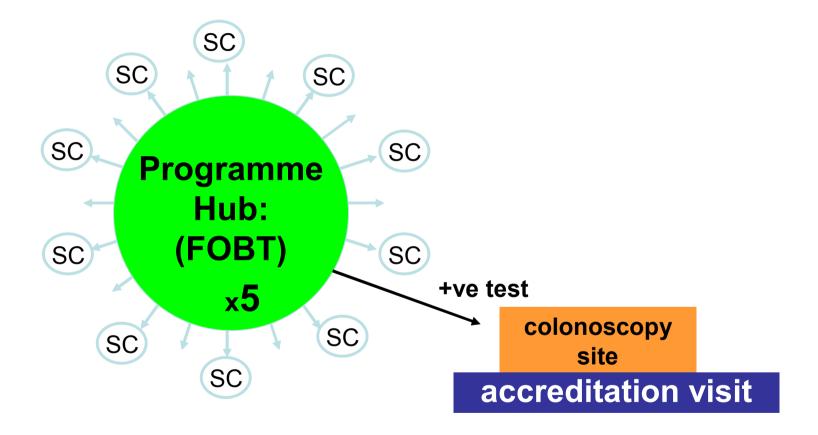
"When I first saw the GRS I have to be honest and say that I printed it, read it, ripped it up and chucked it in the bin."

I had no intentions of ever doing anything with it. Slowly I saw what was going on around me and I had another look.

I now truly believe that its been the single most important thing that has helped us to improve our service. I feel somewhat embarrassed at my initial reaction."

Endoscopy Unit Clinical Lead

Bowel cancer screening programme



Accreditation visits

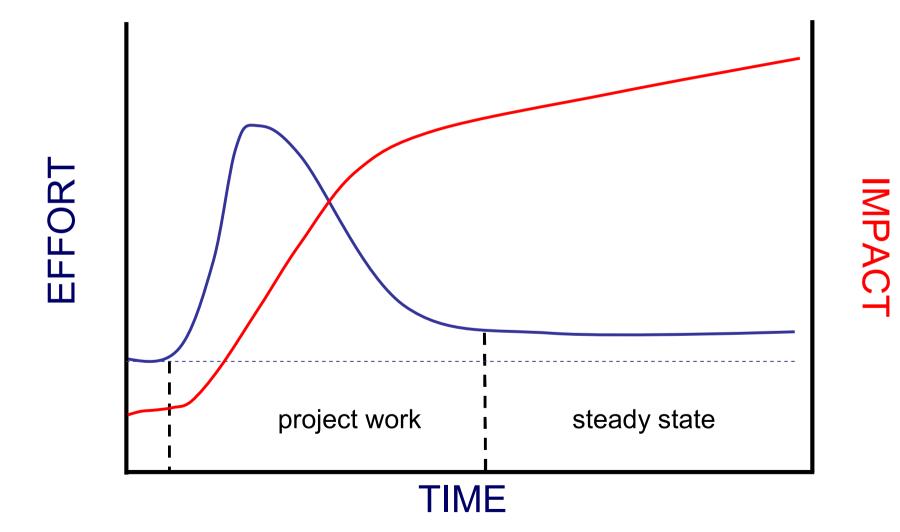
- Peer review process
 - three assessors, usually takes a day
- Assess training, workforce and service delivery
- Accreditation based on a <u>validated GRS scores</u> for all four domains:
 - A for timeliness (< 6 weeks)
 - B for all other items

Acute sector accreditation: - peer review visit

Total	Visited	Passed	Deferred	Fail
209	187 (89%)	148	37	2

The accreditation process is being extended to community and independent providers

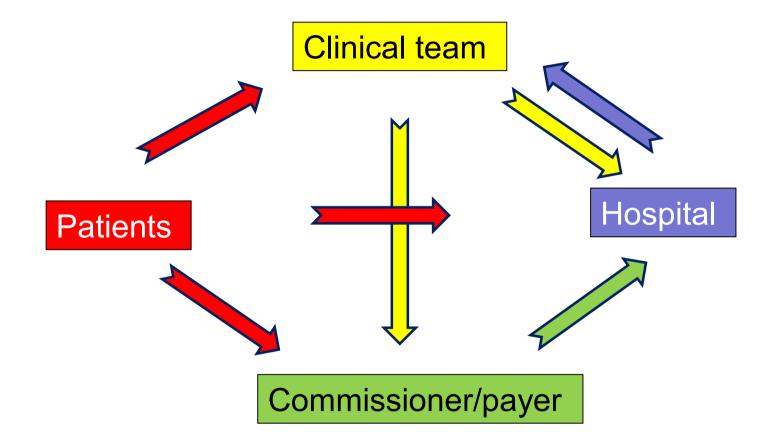
Improving quality - effort and impact



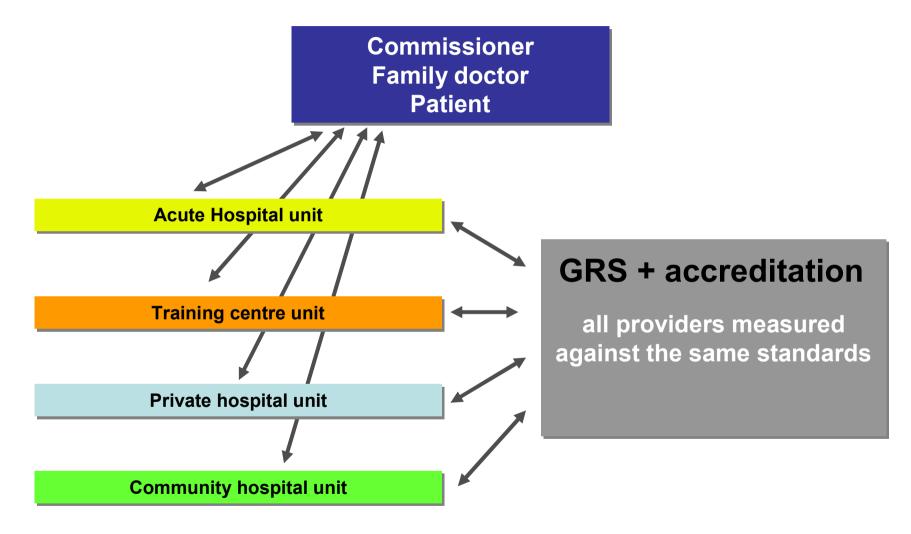
Levers to support accreditation

- Accreditation required for entry into screening programme but difficult to withdraw screening when accreditation lapses
- Other levers:
 - Recognition of training
 - Patient choice
 - CQC
 - Local levers
 - Licensing non-NHS providers
 - Tariff price
 - Other countries adopting the process

Local levers



Using the market to sustain and improve quality



International adoption and interest

GRS + Acc

- Ireland
- NZ
- Wales
- NI
- Scotland

Adapting GRS

- Canada
- Australia
- Holland

Interest in GRS

- Italy
- India
- (States)

Royal College of Physicians (RCP)

- Current schemes
- Future role
- Exploring methodology



Current schemes

- Endoscopy
- Occupational health (SEQOHS)
- Physiological diagnostics (with UKAS)
- Quality Mark for elder friendly wards (with RCPsych)
- (Allergy)

Future role of RCP in accreditation

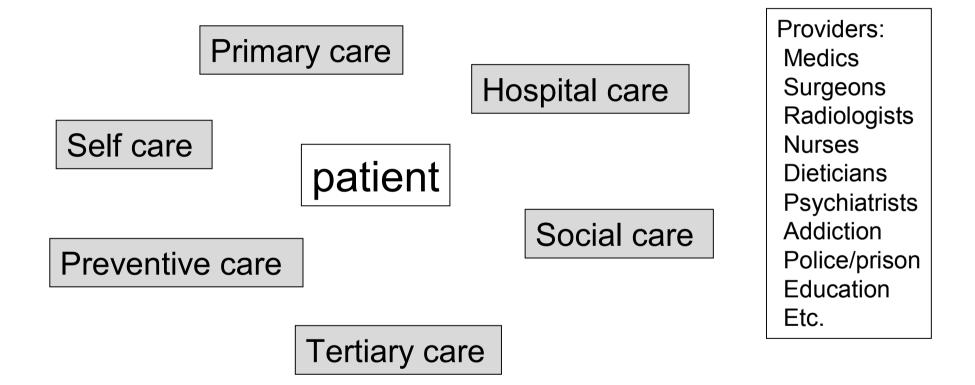
- Leading
 - the medical specialities
- Linking
 - with other colleges
- Lobbying
 - commissioners

Exploring methodology

- What should be accredited?
 - pathway, speciality, service, ward, hospital, etc.
- What are the boundaries
 - quality, safety and patient experience are 'givens'
 - what about training, the workforce, uptake of innovation, research, prevention, productivity, etc.
- Should it inform revalidation?

Long term conditions (LTCs) highlight the issues

Patient focused standard setting - LTC



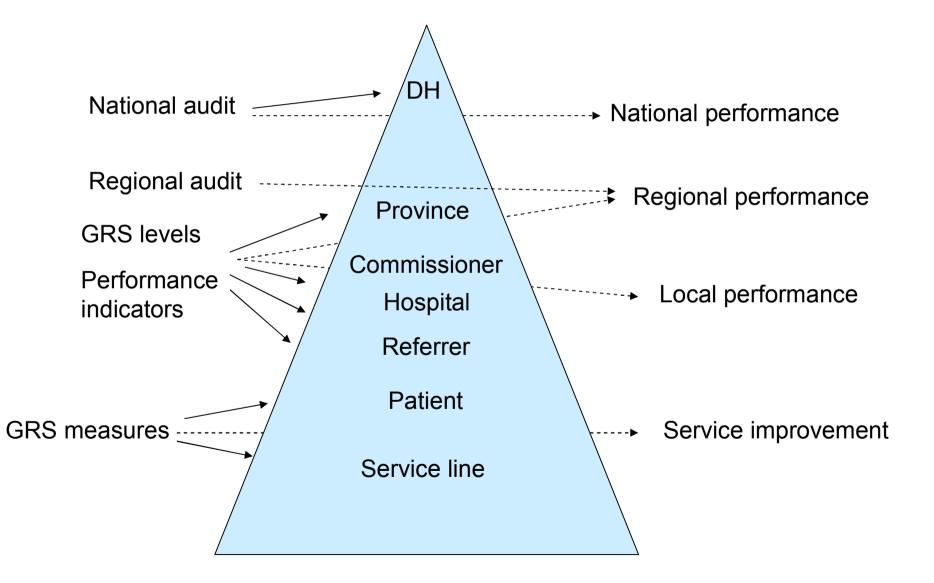
Four domains of the LTC (liver) GRS

1. Clinical quality	2. Quality of the patient experience
1. Safety	1. Equity and equality
2. Quality	2. Access and choice
3. Research and innovation	3. Dignity and respect
4. Prevention	4. Education and information
3. Boundaries of care	4. leadership, workforce and training
3. Boundaries of care1. Self care	4. leadership, workforce and training1. Leadership and organisation
1. Self care	1. Leadership and organisation
 Self care Interface care 	 Leadership and organisation Skill mix and recruitment

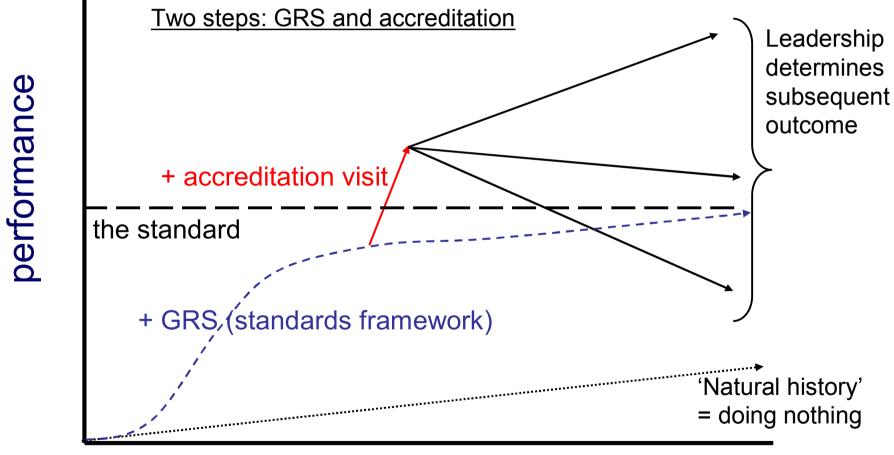
Standards – using guidance

Local		
Reg	gional	
	National International	

Inputs, outputs and outcomes

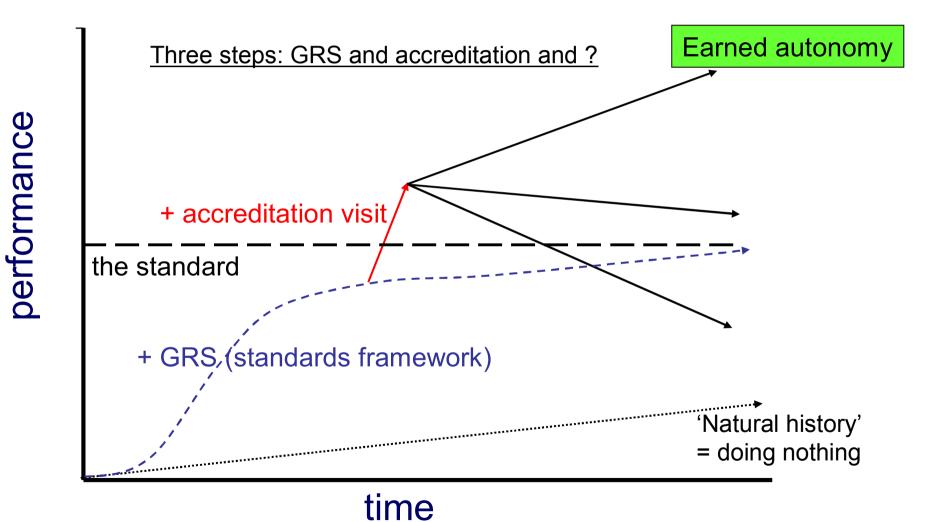


Transformation of a service



time

Transformation of a service



NHS choic	Ces Your health, your c	hoices	Q Enter a search	n term Sea	Search	
Health A-Z	Live Well Care	ers Direct	Health news	Health services near you	i.	
Hospital serv	vices near DH1	3rw for	Endoscopy			
We found 23 hospital serv	vices within 50 miles	of DH1 3rw	for Endoscopy			
(Distances given are in a straig	ht line but travel routes may be long	er. Please check before	e starting your journey.)			
NHS or Independent hospital (s	select at least one)					
VHS Hospitals				Update resu	lts >	
Independent hospitals with	free NHS services			or <u>start a new</u>		
closest shown first 🔹	Simple list Detailed comparison	Map		Previous 1 2 3 4 5	<u>i Next</u>	
Add to shortlist	Add to shortlist	Add to shortlis	st 🗌 Add to short	tlist 🗌 Add to shortlist		
University Hospital Of North Durham	Spire Washington Hospital	Bishop Auck Hospital	kland Sunderland Hospital	d Royal Queen Elizabet Hospital	th	
		1				
North Road	Picktree Lane	Cockton Hill Road		Sheriff Hill		
Durham DH1 5TW	Washington NE38 9JZ	Bishop Auckland DL14 6AD	Sunderland SR4 7TP	Gateshead NE9 6SX		
0191 333 2333 1.16 miles away View map	0191 418 8669 7.23 miles away View map	01388 455000 9.23 miles away	0191 565 6256 View map 11.01 miles aw	0191 482 0000 ay <u>∨iew</u> 11.31 miles away <u>∨i</u> e	ew	
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Of North Durham	Hospital	Hospital	Hospital	Hospital				
North Road Durham DH1 5TW 0191 333 2333 1.16 miles away <u>View map</u>	Ficktree Lane Washington NE38 9JZ 0191 418 8669 7.23 miles away View map	Cockton Hill Road Bishop Auckland DL14 6AD 01388 455000 9.23 miles away <u>View map</u>	Kayll Road Sunderland SR4 7TP 0191 565 6256 11.01 miles away View map	Sheriff Hill Gateshead NE9 6SX 0191 482 0000 11.31 miles away <u>View</u> map				
A&E onsite	Data not available	🕜 Data not available	A&E onsite	Data not available				
▶ Key facts		5	3. 	• • • • • • • • • • • • • • • • • • •				
More on Endoscopy relation	ated data			🕒 Show content				
 Endoscopy unit assess 	ment and accreditation			⊡ Hide content				
University Hospital Of North Durham	Spire washington Hospital	Bishop Auckland Hospital	Sunderland Royal Hospital	Queen Elizabeth Hospital				
Endoscopy unit assessment and JAG accreditation Joint Advisory Group (JAG) accreditation confirms that units have met predetermined standards of patient care, patient safety and procedure outcomes. Read more								
Assessed: Criteria met	Not Assessed	Assessed: Criteria met	Assessed: Criteria met	Assessed: Criteria met				
				- 1				

