



Screening Colonoscopist Assessment and Approval

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Date: February 2020

Version: 5

Purpose and Summary of Document:

This document describes the entry criteria and assessment model for potential Screening Colonoscopists in Wales. The document details the eligibility criteria agreed by the Lead Screening Colonoscopists Group on the 11th of November 2013 and ratified by the Screening Division Senior Management Team on the 9th September 2014. It describes the procedure required to apply to JAG for formal assessment and the stages that must be followed and satisfied before any individual can be accredited as a Screening Colonoscopist in Wales. The document also details of the criteria for ongoing accreditation of approved Screening Colonoscopists and the procedure that must be followed following a period of extended absence.

Background

All colonoscopists undertaking screening procedures in Wales are assessed and approved by Bowel Screening Wales. Quality assurance data are analysed by the Quality Assurance Advisor for Endoscopy to provide feedback on individual performance.

Prior to application the potential Screening Colonoscopist (the Candidate) should attend a screening list within their Health Board and discuss their application with the Lead Screening Colonoscopist.

Entry Criteria

Before any Candidate is put forward for assessment, the local Lead Screening Colonoscopist must ensure that the individual concerned has satisfied the following criteria and confirm this via email to the Bowel Screening Wales Programme Manager:

- Minimum 150 colonoscopies performed or directly supervised in the previous 12 months
- Lifetime undertaking of more than 750 colonoscopies
- Lifetime perforation rate for diagnostic colonoscopy < 1:1,000
- Lifetime perforation rate for therapeutic colonoscopy <1:500
- Lifetime perforation rate for flexible sigmoidoscopy <1:5,000
- Unadjusted caecal intubation rate greater than 90%
- Polyp detection rate >20%
- Polyp retrieval rate greater than 90%
- Adenoma detection rate >20%
- Adenoma retrieval rate greater than 90%
- Experience of safe and effective removal of polyps 2 cms or greater with snare polypectomy and EMR
- Familiarity of use of contrast dye or digital contrast

- Post polypectomy bleeding requiring transfusion <1:100 (for polyps >1cm)
- Comfort scores must be recorded for all procedures using recognised comfort score descriptors with the presence of peri-procedure severe discomfort being exceptionally low in frequency
- Use of sedation in line with BSG guidance

Bowel Screening Wales Verification

Prior to completing the online JAG application form, Bowel Screening Wales will request that the following supporting documentation be submitted to the Bowel Screening Wales Quality Assurance Advisor for Endoscopy for evaluation:

- At least 12 colonoscopy reports demonstrating use of contrast dye or digital dye within the last 6 months demonstrating pit patterns and vascular patterns
- Colonoscopy reports, sequential good quality before and after images and pathology reports of at least 10 polypectomy procedures on lesions 2 cms or greater in the last 2 years

The Bowel Screening Wales Quality Assurance Advisor for Endoscopy will review this information within 4 weeks and communicate directly with the Candidate (and copy in the Bowel Screening Wales Programme Manager) to inform them if the documentation provided above demonstrates a suitable level of experience to proceed to the application phase (and suggest further action if deemed unsuitable).

Application

Once the Bowel Screening Wales Quality Assurance Advisor for Endoscopy has approved the individual to proceed to assessment, the applicant must complete the Bowel Screening Wales online JAG application form (*add*

hyperlink to the application form) and also submit key performance indicator (KPI) data that has to be signed off by local Lead Screening Colonoscopist:

- KPI data required - Previous 12 months colonoscopy data and key performance indicator (KPI) reports and comfort scores in tabular form for benchmarking against the BSG KPIs (see BSW KPI form – *insert hyperlink to form here*)

JAG will assess this information provided on the application form and the KPI data for suitability for assessment. JAG will communicate directly with the Candidate if deemed suitable to move to the formal assessment phase or not (and suggest further action if deemed unsuitable). JAG will also inform the Bowel Screening Wales Programme Manager of the outcome.

Assessment

The Bowel Screening Wales assessment process will comprise of pre-assessment, training and formal assessment phases.

Pre-Assessment

Bowel Screening Wales will arrange for a Wales-based assessor to conduct a pre-assessment evaluation of the Candidate. The purpose of this stage is to assess the suitability of the Candidate to move to the formal assessment stage. This pre-assessment will be performed at a centre that has been mutually agreed by the Candidate and the assigned assessor and will comprise of:

- A theory session
- Direct observation of procedural skill including polypectomy
- Development of individual training plan

If deemed suitable to proceed to formal assessment, the assigned assessor will communicate directly with the Candidate and inform the Bowel Screening Wales Programme Manager of the decision. If the

Candidate requires additional support and mentorship, the assessor will discuss this with the Candidate (and inform the Bowel Screening Wales Programme Manager) and the Candidate will move to the mentorship stage of the process detailed immediately below.

Mentorship (note: this phase will only take place if the pre-assessment phase indicates that additional support is required).

This will be undertaken when necessary at a centre convenient to both candidate and assessor. It will comprise of:

- Progress review with direct observation of procedural skill including polypectomy
- Feedback from assessors
- Further development of a training plan to include:
 - Videoing therapeutic work
 - Appointing a mentor within the Health Board if possible
 - Supervision of polypectomy

Training procedures will be videoed and if no therapy has been undertaken symptomatic cases will need to be videoed in order for therapeutic skills to be observed prior to the assessment phase. The assigned assessor will notify the Bowel Screening Wales Programme when the Candidate is deemed suitable for formal assessment.

Formal Assessment

The Bowel Screening Wales programme Manager will inform JAG that the Pre-Assessment and Training (if applicable) phases have been successfully completed. JAG will then arrange for a formal assessment to take place in an assessment centre by two independent assessors.

It will comprise of:

- Formal summative assessment
- Three directly observed procedures
- Multiple choice questions

Following completion of the formal assessment process, the assessors will immediately feedback the outcome directly with the Candidate. The assessors will submit their completed reports to JAG with recommendations for approval or otherwise.

JAG will directly inform successful Candidate and issue a certificate of accreditation. In the event of a candidate failing to satisfy the assessment criteria, JAG will liaise with the Bowel Screening Wales Quality Assurance Advisor for Endoscopy, who will in turn contact the Candidate and devise a training plan.

Bowel Screening Wales will conduct a programme induction prior to the successful candidate performing screening colonoscopy procedures. This will inform the Candidate about Bowel Screening Wales and in particular, about the requirements of the benign complex polyp referral process, the network MDT and the National Referral Centre.

Ongoing Approval and Quality Assurance

If approved, Screening Colonoscopists are expected to satisfy the following criteria for ongoing approval and quality assurance:

- Undertake a total of 150 colonoscopies per year, of which, at least 80 must be screening colonoscopies
- Attend one training event every two years that is specifically related to screening
- Comply with the BSW performance management framework

Return to Work following a Period of Absence

The local Lead Screening Colonoscopist must inform the Bowel Screening Wales Programme Manager once they know that a Screening Colonoscopist is likely to be absent from work for an extended period (i.e. a period of more than one month).

Following a period of extended absence, all Screening Colonoscopists must follow the return to work process detailed below. This process is designed to act as both a quality assurance stage and also to support the individual returning to practice.

- If a Screening Colonoscopist is absent from work for a period of less than 6 months then they can return to screening procedures without any additional observations or assessment.
- If the period of absence is between 6-12 months, the local Lead Screening Colonoscopist must observe a screening list and be satisfied that the quality is suitable before the returning Screening Colonoscopist can resume bowel screening colonoscopy procedures.

Once this stage has been satisfactorily completed, the local Lead Screening Colonoscopist must notify the Bowel Screening Wales Programme Manager, who will record that the process has been completed. If this stage is not satisfactorily completed, the local Lead must discuss the return to work process with the individual concerned and the Bowel Screening Wales Quality Assurance Advisor for Endoscopy. The local Lead must then email the Bowel Screening Wales Programme Manager to inform them of the agreed plan for this individual.

- If the period of absence is greater than 12 months, the returning Screening Colonoscopist must have their practice assessed by a Welsh Assessor from another endoscopy unit. This will be organised

by the Bowel Screening Wales Programme Manager and will involve the Welsh Assessor formally assessing a screening list at the returning Colonoscopist's usual place of work.

Once this stage has been satisfactorily completed, the assigned assessor must notify the Bowel Screening Wales Programme Manager, who will record that the process has been completed. If this stage is not satisfactorily completed, the assigned assessor must discuss the return to work process with the returning Colonoscopist, the local Lead Screening Colonoscopist and the Bowel Screening Wales Quality Assurance Advisor for Endoscopy. The assigned assessor must then email the Bowel Screening Wales Programme Manager to inform them of the agreed plan for this individual.