



IMPROVEMENT OF QUALITY OF THE NATIONAL CANCER SCREENING PROGRAMMES IMPLEMENTATION (CRO SCREENING)



MINISTRY OF HEALTH
OF THE REPUBLIC
OF LITHUANIA



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Nacionalni inštitut
za javno zdravje



Ministry
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Together



HZJZ
INŠTITUT ZA
JAVNO ZDRAVJE



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**Quality assurance in planning,
establishing and running an
endoscopic screening unit, including
accreditation and certification
system**

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Aims of endoscopy unit

- To provide an effective and high quality endoscopy service in timely manner
- To provide a safe, comfortable environment for patients that maintains both privacy and dignity
- To provide a safe environment for staff that caters for their personal professional needs

- Endoscopy Unit Global Rating Scale (GRS)
- Waiting Times
- Decontamination and equipment

What is the Global Rating Scale (GRS)?

The GRS is a web-based self assessment tool that provides a standard for accreditation and a quality framework for service improvement

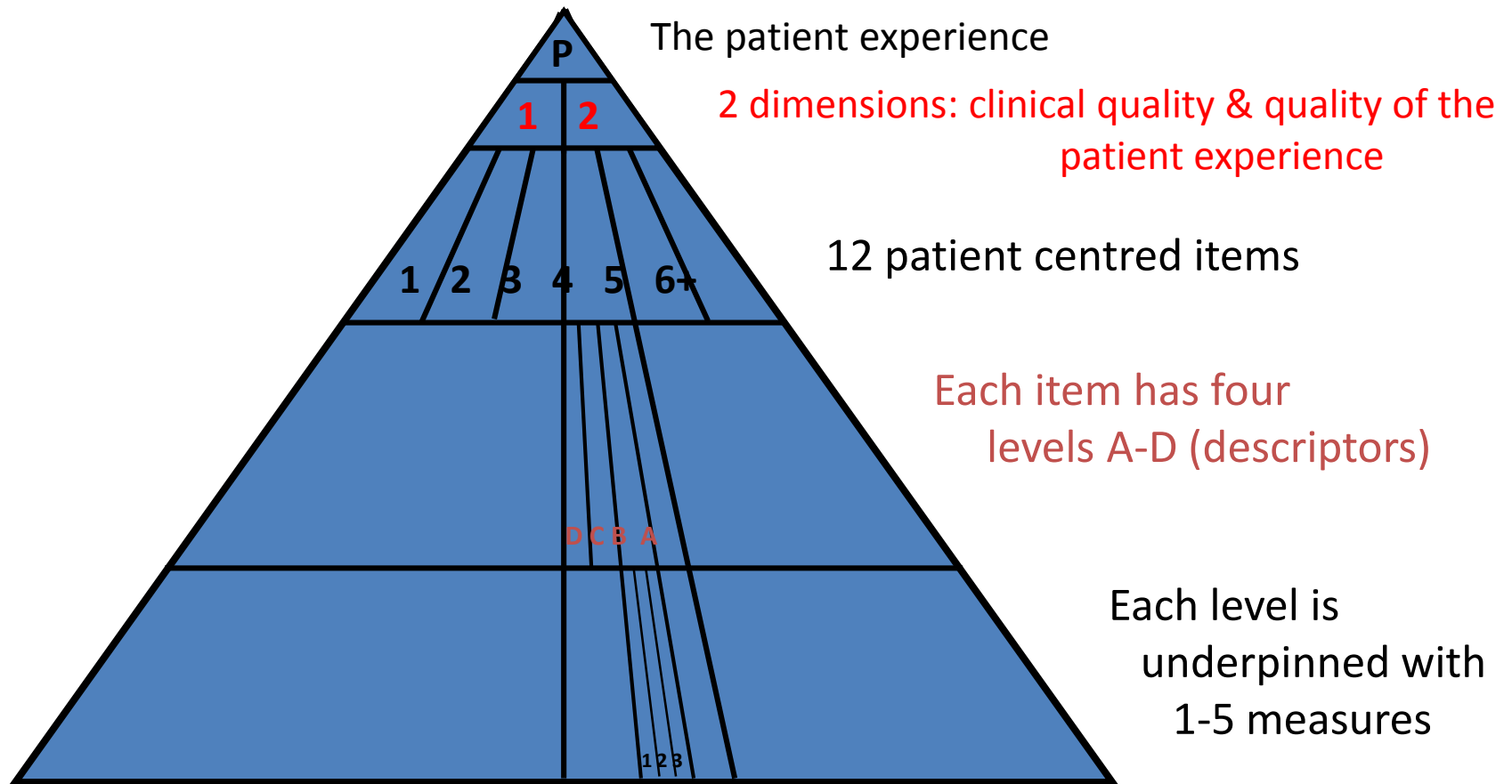
Endoscopy Global Rating Scale

The GRS evolved from a desire to determine whether endoscopy units were providing a patient-centred service

www.grs.nhs.uk

1. Clinical quality	2. Quality of the patient experience
<ol style="list-style-type: none"> 1. Information/consent 2. Safety 3. Comfort 4. Quality 5. Appropriateness 6. Results to referrer 	<ol style="list-style-type: none"> 1. Equality of access 2. Timeliness 3. Choose and book 4. Privacy and dignity 5. Aftercare 6. Patient feedback
3. Workforce	4. Training
<ol style="list-style-type: none"> 1. Skill mix review and recruitment 2. Orientation and training 3. Assessment and appraisal 4. Staff are cared for 5. Staff are listened to 	<ol style="list-style-type: none"> 1. Environment and opportunity 2. Endoscopy trainers 3. Assessment and appraisal 4. Equipment and materials

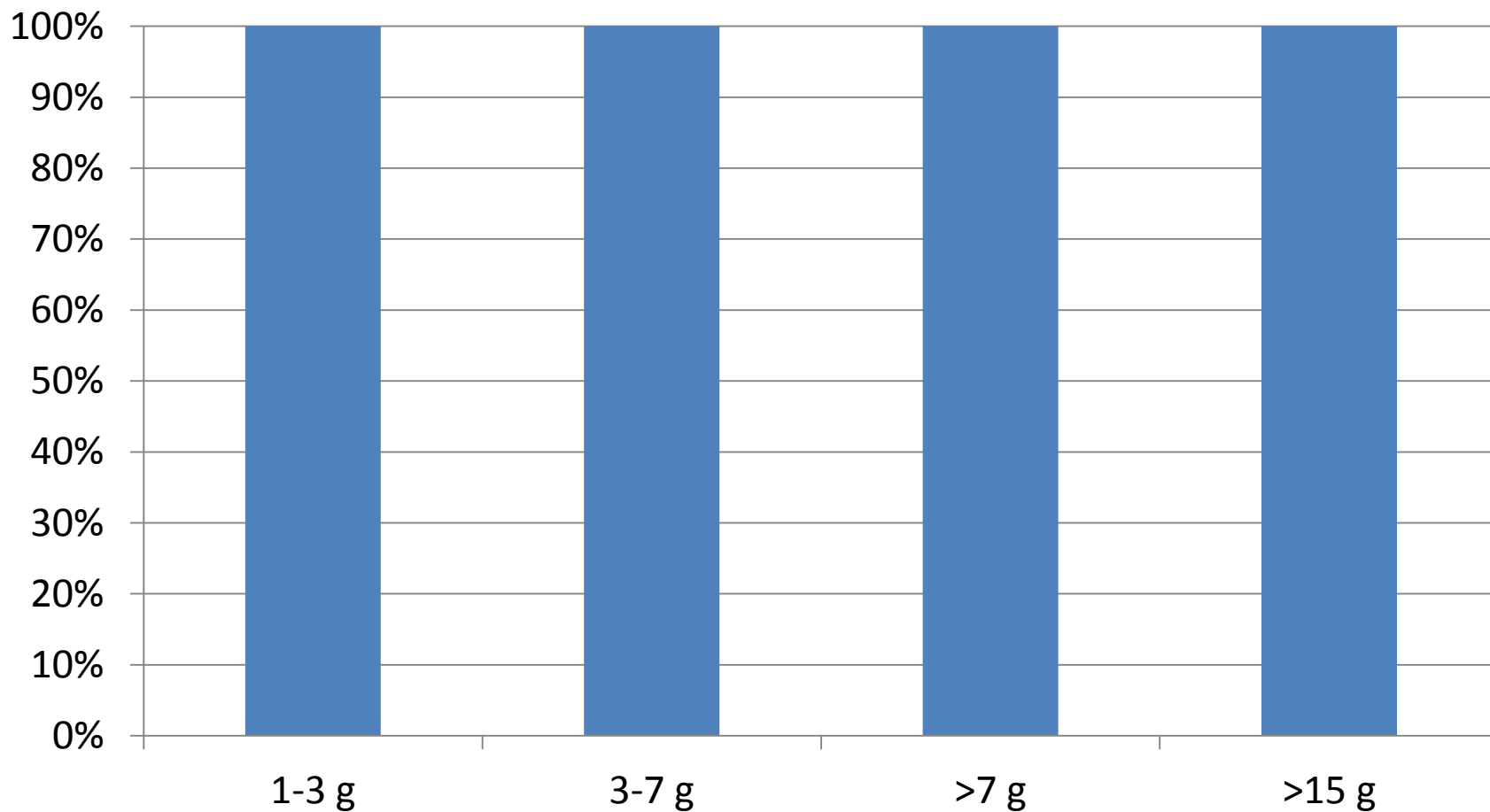
Endoscopy Global Rating Scale



Waiting times

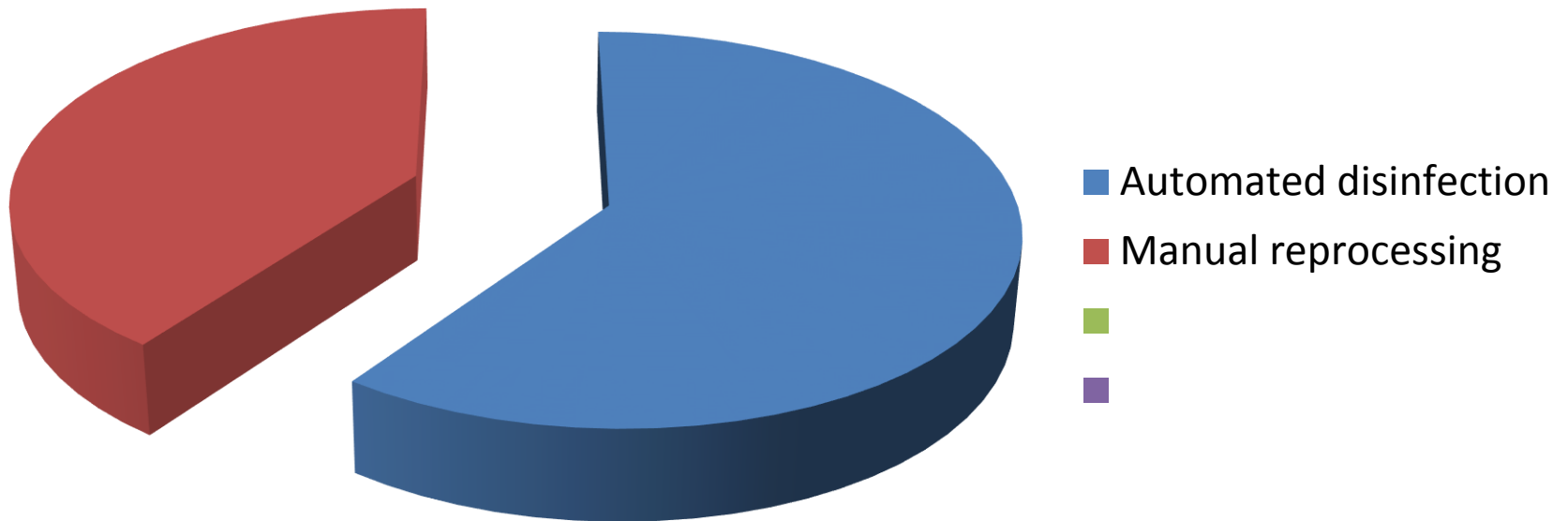
- To ensure that patient anxiety is not unnecessarily increased, it is recommended that follow-up colonoscopy after positive screening be performed as soon as reasonably possible, but no later than within 31 days of referral (acceptable >90%, desirable >95%)

Equipment in Endoscopy Units in Croatia



Cleaning & disinfection in endoscopy units in Croatia

Disinfection



Selection criteria for bowel cancer screening center accreditation in Croatia (proposal)

- Service requirements
- Environments
- Disinfection & Equipment
- Education

Service performance

- Endoscopy service should be patient oriented
- Waiting time of follow-up colonoscopy after positive screening be performed not later than 31 days
- Complies with assessment model for screening colonoscopists (>200 colonoscopy/y)
- Adequate number of staff – (BSG guidelines i.e. 2 or 3 trained members of staff per room, one or two of whom is a qualified nurse)
- Appropriate grades of staff
- Implementation of IT system for evidence of endoscopic parameters in national database
- Service and individual activity audit
- Supportive radiology and pathology service
- Departmental multi disciplinary meetings as recommended by CSCG
- Key performance indicators as prescribed by CSG and ESGE
- Image capture
- System for monitoring and reviewing unpredicted incidents

Environment

Essential

- Adequate size of endoscopy room (5x6 m)
- Complies with ESGE/ESGENA standard for decontamination of equipment
- Sufficient room for increase in capacity
- Separate waiting and recovery areas
- Light, colors, privacy
- Access to acute surgical opinion
- Adequate storage space

Environment Desirable

- One-way flow
- Separate access inpatient and outpatient
- More than 1 colonoscopy room
- Private rooms for discussion / admission/ SSP phone calls
- Separate decontamination rooms

Training

- Offer access to and agree to attend training programme
- Trainees supervised for the required minimum number of cases
- All staff assessed as competent are able to practice
- Agree to attend a screening course relating to screening
- Willingness to release staff for meetings and training sessions

- Pridržavanje modela procjene kompetencija kolonoskopičara
- Dovoljan broj osoblja (BSG smjernice 2 educirana člana osoblja po sali, jedan član je educirana sestra)
- Adekvatna hijerarhija osoblja
- Instalirana aplikacija IT sistema uz redovno unošenje endoskopskih nalaza i traženih parametara nalaza u nacionalnu bazu podataka
- Service and individual activity audit
- Mogućnost pružanja traženih podataka kod kontrole kvalitete: neplanirani hitni prijemi u bolnicu, mortalitet i broj komplikacija, perforacija i krvarenja
- Postojanje odjela radiologije i patologije
- Praćenje indikatora izvedbe prema preporuci Hrvatskog gastroenterološkog društva i ESGE
- fotodokumentacija
- sistem praćenja i evidentiranja neželjenih događaja
- Odjelni multidisciplinarni sastanci

Okolina

- Endoskopska sala dovoljne veličine(5x6 m?)
- Dezinfekcija endoskopa sukladno važećim smjernicama ESGE/ESGENA (ili specificirati?)
- Adekvatno osvjetljenje i ugodne boje
- Dovoljno prostora za podizanje kapaciteta servisa
- Mogućnost pristupa akutnom kirurškom odjelu
- Dovoljno skladišnih prostora
- Odvojen prostor čekaone od sobe za oporavak

- Training, adequate equipment and external evaluation of endoscopy units has proved to be essential during the start-up of a national screening programme. Such activities are likely to play an increasingly important role in quality assurance of symptomatic endoscopy in the coming years.