

The Endoscopy Governance Group for New Zealand Workshop

Wednesday 6 September 2017

Auckland Airport



Workshop Update:

The aim of the workshop was to facilitate understanding of the processes and needs in endoscopy units to provide quality endoscopy for New Zealand.

The Endoscopy Governance Group for New Zealand (EGGNZ) was established in 2015 by endoscopy clinicians in response to a need for a national endoscopy governance structure; as highlighted by NEQIP and the Sapere (2015) report on 'Governance of endoscopy quality and related initiatives'. The first year was spent engaging stakeholders, developing Terms of Reference, Memorandum of Understanding and establishing working groups to produce 2 sets of standards; 'Endoscopy Standards for Individual Colonoscopists in Performing Bowel Cancer Screening in New Zealand' and 'Endoscopy Unit Standards for performing Bowel Cancer Screening in New Zealand'. The standards are now completed and have been made available in hard copy to attendees at the workshop and circulated electronically to all other stakeholders, endoscopy units (DHB and Private), and CMOs.

The workshop aimed to demonstrate the work EGGNZ and NEQIP have been doing over the last 12 months and review the issues which are currently being faced by endoscopy in New Zealand and which will likely

effect endoscopy for the next few years.

Sessions included:

1. Understanding Training in Endoscopy

- FRACP NZ perspective
- RACS perspective
- A training curriculum proposal
- Nurse Endoscopy training
- Training experiences of other practitioners

2. Understanding Certification and Recertification

- Standards in endoscopy
- Current system for recognition of training in NZ

3. Quality in Endoscopy Units

- Understanding the NZGRS
- Results of the March 2017 Census
- Unit Accreditation

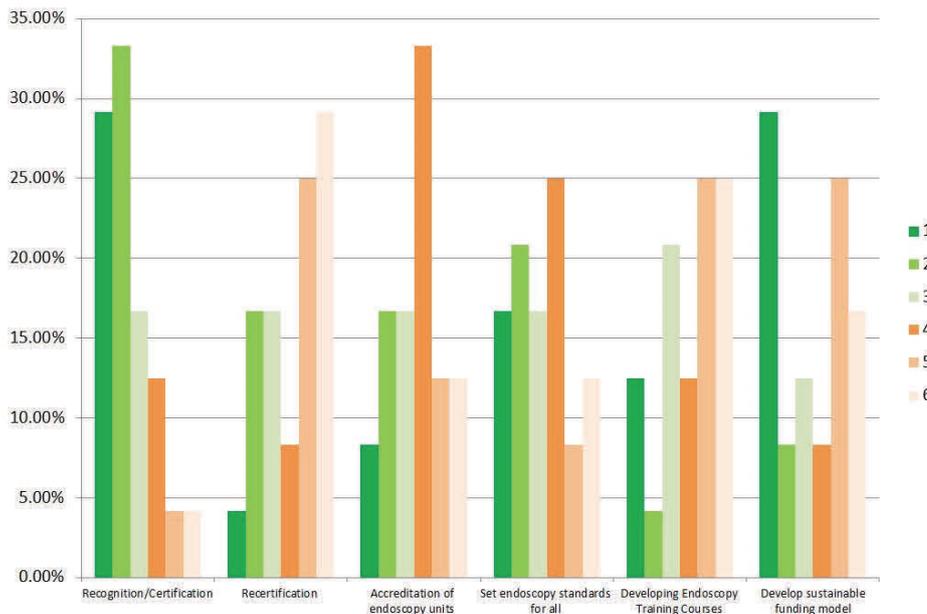
4. Understanding the Endoscopy workforce

- NZ workforce prediction model
- NZSG survey results

The event was well attended with 82 attendees from across New Zealand with at least one representative from each of the DHBs. In addition, there were representatives from several private endoscopy units, the regional cancer networks and the Ministry of Health.

We requested feedback from the attendees with 29% of the surveys returned. The breakdown of responses reflected the make-up of attendees, although not all DHBs responded to the survey. People responding to the survey were asked to identify their roles and the location they worked in.

Attendees were asked to prioritise the EGGNZ key workstreams for the next 2 years and suggest any further items for consideration. One additional priority was suggested for consideration of the steering group; 'Accreditation of nursing staff'.



	Rank
1. Recognition/Certification of training for all endoscopists	1
6. Development of a sustainable funding model for quality endoscopy improvement in NZ	2
4. Set endoscopy standards for all endoscopy procedures	3
3. Accreditation of endoscopy units based on the NZGRS standards	4
5. To assist in developing Endoscopy Training Courses to support NZ-specific endoscopy training needs.	5
2. Recertification of existing endoscopists	6

Key Points:

1. The current College training curriculums are based on NEQIP's curriculum and should be used to develop NZ based training programmes which are standardised across all endoscopists.
2. There is insufficient sedation training for NZ non-anaesthetist practitioners. EGGNZ will engage with the New Zealand Society of Anaesthetists (NZSA) and the New Zealand National Committee of Australian and New Zealand College of Anaesthetists (ANZCA).
3. Some of the KPIs included in the EGGNZ standards documents are more lenient than other standards and will be reviewed based on the outcomes of the Waitemata Bowel Screening Pilot data.
4. Certification should be based on competency, not the volume of procedures performed (see also .5)
5. A reasonable number of scopes are required to demonstrate KPIs; volume alone is not an indicator for competency.
6. NZ needs an agreed certification and re-certification process.
7. NEQIP and NZGRS are essential to improve quality in NZ endoscopy and endoscopy user groups (EUG) and good clinical leadership are key tools required to achieve this

From the feedback of the workshop EGGNZ will focus on recertification and certification of training for all endoscopists over the coming year. We are engaged with GESA, the RACS and the RACP and have representatives on the ANZ colonoscopy recertification working party. We have an EGGNZ working group established to ensure that any solution meets the

needs of New Zealand practitioners.

We have convened a working group to review possible funding models for EGGNZ for the future.

EGGNZ is also engaged with a third party to consider potential options for unit accreditation under the guidance of the National Screening Unit (NSU).

For further information on this meeting or EGGNZ please contact Russell Walmsley via jan.tew@nra.health.nz