Health Education England Clinical Endoscopist Training Programme

Clinical Supervisor’s Guide

Introduction
The Health Education England (HEE) Clinical Endoscopist (CE) Training Programme provides Upper Gastrointestinal (GI) endoscopy, Introduction to lower GI endoscopy (30-week modules) and Progression to Colonoscopy (40 weeks module). These are blended clinically and academically focussed programmes to meet the outcomes of the Joint Advisory Group (JAG) Diagnostic Gastroscopy (OGD), Flexible Sigmoidoscopy and Colonoscopy Certification and the HEE Competency Assessment Portfolio. The programme completion is Pass/Fail within the timeframe. It requires all elements to be completed during that period.

Training Programme Overview

Clinical Skills Training
In-house supported clinical training to JAG certification level. This includes a supervisor assessed simulation Objective Structured Clinical Examination (OSCE) around endoscopy.

Level 6/7 academic module
Online delivered interactive workshops, tutorials, and self-directed learning with completion of academic assignment demonstrating knowledge and understanding.

JAG Basic Skills Course/ OGD or Colonoscopy

Portfolio completion
Academic and clinical portfolio demonstrating knowledge, skills, and behaviours to level 7 Skills for Health Transferrable role (Non-medical endoscopist).

Standard Lesion Assessment Tests in Endoscopy (SLATE) e-learning completion
6 online self-directed modules for SLATE.

Simulation learning
Higher Education Institution (HEI)/JAG federation partners delivering simulation days for technical skills improvement, non-technical skills, and polypectomy (JAG approved courses)

Please note: Your student will have detailed information in their Programme Handbook.
Clinical Supervisor Role

You will be invited to join the student induction day for full information. These sessions are recorded and available via your student. At the start of training, in line with the training contract and plan, you will need to undertake your initial discussion, to review learning needs and objectives. Throughout the training period, with the student, you should complete parts one to five of the ‘training review’ section of the portfolio. This should conclude with a ‘final review of training’ once the portfolio has been completed, to assess if all competencies have been met and can be signed off. It is important that students can demonstrate an underpinning knowledge of all aspects of practice in conjunction with the performance criteria for each competence.

The supervisor’s role is to assess the student’s ability to achieve the criteria in the competence document, covering endoscopic and non-endoscopic skills. Each competence achievement should be recorded with relevant supporting evidence, such as witness statements or colleague and patient feedback and signed off by the clinical supervisor or a designated assessor at the time. A record of how and when each competency was achieved should be included. Within the documentation there is a section that allows comments to be made by both the student and where appropriate, the supervisor, for example continued learning needs and areas of achievement. Upon achievement of the individual competences, the supervisor and the student must sign and date both the sign off sheet and the individual competence form. Each competence is a national criteria and links to JAG Endoscopy Training System (JETS) feedback.

Appraisals & Reviews

It is required that as part of the training period, students and their clinical supervisors have regular endoscopic appraisal and review sessions, which are recorded on the JETS Website at www.jets.nhs.uk and the portfolio. These map different stages of the learning journey, which can also be used by students. These include supervision agreement sheets and interview summaries, following completion of each key stage of practice. Clinical supervisors and supporting endoscopy trainers should be familiar with the Global Rating Scale (GRS) training domain standards and the JETS e-Portfolio.

Clinical Supervision

Students should only undertake supervised practice with competent trainers, who are able to provide teaching and development around GI knowledge, disease management, clinical decision making as well as technical expertise. By agreeing to act as a supervisor for a trainee, you must meet the JAG requirements for a trainer, and possess supervision and clinical mentorship skills. You should have attended a JAG mandated endoscopic training the trainers’ course.

It is recognised that others may support trainees during their learning, particularly in relation to the use and management of equipment. In such instances, an individual who has significant experience and expertise in the required areas should be assigned to work with the trainee. This nominated person will be responsible for signing off relevant assessments. As clinical
supervisor, you should be able to identify lack of progress, or a slow learning curve, and utilise strategies to overcome these.

**Practical Tips**

- Book 2 x dedicated training lists six weeks in advance – always plan for missed lists.
- Allow trainees to develop faster though accessing ad hoc lists and bespoke learning opportunities, particularly around the beginning, after basic skills or simulation days and towards the end of the programme.
- For lower GI training, consider planning colonoscopy numbers & training required for Direct Observation of Polypectomy Skills (DOPyS).
- Provide performance enhancing feedback throughout training and review JETS learning objectives regularly.
- Begin polypectomy skills training early in the programme once scope control achieved. Use learning by observation and microteaching and complete DOPyS through out
- Work with the trainee to address issues of falling behind/unexpected issues but raise with the HEE team and clinical leads if issues persist. The Clinical Supervisor is the advocate for the student and liaises with the service and training lead regarding access to cases.
- Discuss & plan summative assessment timings well in advance. We advise a mock summative assessment.

**HEE Intervention and Support Processes**

- If you feel your trainee is not making progress or is slow to learn/ has a health or work issue, please discuss it with them first and raise this with HEE early so that extensions can be considered.
- The students are asked to provide progress to their HEI support for discussion and early escalation and intervention.
- HEE takes safe practice seriously; If you have concerns towards the end of programme regarding the trainee’s competence, please discuss with them in the first instance. Some trainees need additional time to become safe independent endoscopists and while we will always support trainees to complete the programme it is sometimes best for them to withdraw from the programme and complete their training without a deadline.
Reporting Issues of Progress:

- Trusts are responsible for ensuring the trainee has access to sufficient training procedures to pass their summative assessment at the end of 30/40 weeks.
- If you have concerns about your trainee’s progress discuss any issues with them in the first instance.
- The HEI will also request data on progression at key intervals, so this may be raised with you directly.

- Professional guidance on maintaining student progress throughout training during Covid-19 can be found via JAG at The JAG Training on Recovery of Training in Gastrointestinal Endoscopy and via HEE at Covid-19 updates - all professions (October 2020 onwards)
- If you and your trainee have agreed that additional time is needed before they are ready to be signed off as an endoscopist please raise this in good time, ideally around week 26, least one member of HEE and one of the clinical leads. The escalation process should be followed with completion of form and plan.

Preparing to Complete Training

Identify a role for successful trainees and agree this with trainee and management team in addition to considering a preceptorship for successful integration into the new role.

HEE Contact Details

Please email the HEE Clinical Endoscopist Programme Team at diagnosticsprogramme@hee.nhs.uk