North West Endoscopy Academy

A NEW APPROACH TO THE REQUIRED NHSE TRAINEE CLINICAL ENDOSCOPIST COMPETENCY PORTFOLIO



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INTRODUCTION

In 2015, Health Education
England (HEE) launched a
national training programme
for clinical endoscopists (CEs)¹,
combining practical training,
academic study, and a
competency portfolio. CEs are
healthcare professionals from
non-medical backgrounds,
such as Nursing, Radiography,
ODPs, and Dietetics.



Evaluations of the programme by Liverpool John Moores University (LJMU) highlighted that the previous portfolio was burdensome, time-consuming and repetitive, covering competencies already demonstrated in their professions.



In 2023, the programme was devolved to Academy level², and the North West Endoscopy Academy (NWEA) redesigned the portfolio, replacing free text with endoscopy-specific assessments, including DOPS, Mini-CEX, and CbD, better to demonstrate training competence.

METHODS

Online surveys (JISC) with Likert scales and open questions.

Sent to CE trainees and their supervisors within the NWEA CE programme.

Aiming to evaluate the effectiveness of the redesigned portfolio.

RESULTS

clear improved improved requirements

relevant self-explanatory valuable role prepared relevant prepared

Figure 1 – Trainee (n=6, response rate 100%) survey responses.



Figure 2 – Supervisor (n=1, response rate 20%) survey responses.

DISCUSSION/CONCLUSION

The new portfolio was piloted for trainee CEs within the NWEA; the aim being to have a robust and valid document that specifically displays evidence of training competence, related to endoscopy expertise.



Results from this small cohort study identified it added value to training and enhanced preparedness for the role of a CE.

IMPACT TO PRACTICE

The revised portfolio has been shared across all NHS regional endoscopy academies in England for adoption on a national scale and to improve consistency within CE training.



Evaluation will continue to include the further six endoscopy academies and allow for a holistic review of the changes and inform future improvement.

REFERENCES