Response to NHS Chief Executive’s Open Call for Evidence and Ideas

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NHS Chief Executive Innovation Review Team
Department of Health
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Dear Sirs

Please find attached the response to the Department of Health call for evidence and ideas on Spreading innovation in the NHS from the Joint Advisory Group on GI Endoscopy.

Should you have any queries or wish to discuss any points raised, please do not hesitate to contact me.

Yours truly

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Innovations in endoscopy

JAG response to Department of Health
‘Spreading innovation in the NHS: call for evidence and ideas’

The JAG has considered the Department of Health call for evidence and ideas on spreading innovation in the NHS and outlines its response below with a specific focus on endoscopy provision as a key diagnostic and therapeutic area with a track record for innovation and much anticipated scope for further development. Representatives from the JAG Committee attended a recent workshop on Adoption and Spread of Diagnostic-related Innovations in the NHS (23rd June 2011) organised by the DoH and Life Sciences innovation Delivery Board, and the Committee were circulated the call for evidence and ideas on 28th July 2011.

Endoscopy is closely linked with the successful delivery of the national policy priority on cancer as a pivotal diagnostic tool and during delivery of a key procedure in the NHS Bowel Cancer Screening Programme. Endoscopy can deliver benefits in early diagnosis and in addition, early, and sometimes novel treatments – all of which improve effectiveness and patient outcomes. However endoscopy services, like many other hospital services are slow to introduce new technology, the main reason often cited being cost. Other barriers include slow and costly procurement, lack of large scale evidence base, and the inability to effectively measure benefits, especially across multi-specialist areas. With a diagnostic test (endoscopy, radiology, pathology and blood sciences) included in 80% of patient pathways it is clear that diagnostic services should work more collaboratively (eg. Diagnostics Collaborative Programme in Scotland).

Innovation should aim to deliver substantial clinical and efficiency benefits to reflect the investment required.

Key areas where changes may be implemented to achieve an increase in the speed of adoption of innovations in endoscopy include:

- Enabling industry and innovators to communicate effectively with clinical leads
- Enabling rapid reviews and large scale clinical trials
- Ensuring a robust business case is constructed
- Ensuring cost benefits are clearly demonstrated
- Aiming to conduct elements of the process in parallel
- Assigning champions to the adoption process
- Effective planning
- Skilled change managers
- Development and access to tools
- Funding

Recommendations
It would be ideal to have an effective national endoscopy innovations group drawn from the relevant professional groups involved in endoscopy.

This body could:
- horizon scan for innovations within the endoscopy field. Current new technologies include capsule endoscopy, double balloon, flexible endoscopes, endoscopic surgical techniques and endoscopic ultrasound
- serve as a first port of call for industry and individuals seeking a platform to provide a firm evidence base for new ideas and products
- assist within refining of existing products with feedback from professionals
- undertake rapid reviews
- bring about a scaling up of evidence from national clinical studies similar to the function of the NCRI
- provide recommendations on who should use the new technology and how it should / could be used

**About the Joint Advisory Group on GI Endoscopy**

The JAG represents a range of multi professional groups including physicians, surgeons, general practitioners, nurses, non-medical endoscopists and endoscopy teams in general. It has already delivered substantial work on standards, competencies and assessment and hosts a knowledge management system and website which can be further developed to improve sharing best practice and evidence base. It also has the capability to offer additional tools to support its suite of productivity, planning and business case tools. Many of the JAG’s current policies and processes are now being adopted internationally. To date, JAG’s main focus has been the QA of endoscopy training and endoscopy service. It might be well placed to host or facilitate an innovations group for endoscopy.