

bsg BRITISH SOCIETY OF
GASTROENTEROLOGY

Clinical Services and Standards Committee

Strategic Plan 2022-2025

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INTRODUCTION BY DR ALASTAIR MCKINLAY

President of the British Society of Gastroenterology

Clinical standards are at the heart of everything we do as gastroenterologists and hepatologists, and improving the clinical services we provide, is one of the main charitable objectives of the BSG. The Clinical Services and Standards Committee is, therefore, fundamental to the working of the Society. The Strategic Plan outlines our ambitions over the coming years. The challenges facing clinical gastroenterology and hepatology are considerable as the UK recovers from the COVID pandemic, and it is easy to become disheartened. Our strategy, however, shows how we can improve care even in the face of adversity.

The BSG clinical guidelines process is rigorous, independent and defines the evidence base on which best care can be built. The quality standards framework defines the practical measures we can take to improve our practice.

The care of patients can only be improved, if the workforce that delivers that care is fit for purpose. That means not only enough gastroenterologists, hepatologists, specialist nurses and endoscopists to meet the demand, but also ensuring that those staff have appropriate time to deliver and develop the best care. The workforce data gathered by the CSSC is, therefore, crucial if the quality of care is to be advanced.

The BSG strategic documents are a snapshot in time. They represent our considered response at the time of writing. In reality, our strategic aims are never fixed and the CSSC will continue to respond to developments and new opportunities as they present in the future.



Dr Alastair McKinlay



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FOREWORD BY DR ANDY DOUDS

CSSC Chair

The purpose of the Clinical Services and Standards Committee (CSSC) is “To advance excellent patient care by maintaining and developing clinical services, encouraging and developing quality improvement and producing guidelines and standards of care based on the best available evidence.”

The CSSC is central to the delivery of excellent care for our patients with gastrointestinal and liver disease. We aim to meet this goal in three main ways. Firstly, by understanding the current landscape of gastrointestinal and liver services throughout the UK by collecting data from the regional and four nation representatives and supporting professional networking opportunities. Secondly, by developing and implementing a national set of quality standards to reduce variability and improve quality of patient care. And thirdly by developing the highest quality evidence-based guidelines, guidance and care bundles to support members in their everyday clinical practice.



Dr Andy Douds



The CSSC is central to the delivery of excellent care for our patients with gastrointestinal and liver disease.



PART ONE

Introduction

The Clinical Services and Standards Committee delivers key benefits to patients, BSG members and others with an interest in gastroenterology and hepatology in the UK and around the world. This strategy will outline what has been achieved and delivered in recent years and how the committee will continue to provide important benefits to the Gastroenterology and Hepatology community.

CSSC provides a vital **networking forum** across the four nations of England, Scotland, Wales and Northern Ireland and across the regions of England for those working in gastroenterology and hepatology to come together to share examples of good practice, provide mutual support and raise concerns. This was particularly important when the COVID-19 pandemic brought disruption and uncertainty to all NHS services. CSSC was pivotal in publishing its guidance on rebooting outpatients utilising enhanced specialist triage and remote consultation. We have also undertaken Covid surveys to understand the detail of the effects of the pandemic on services and produced a toolkit to aid recovery published on the website.

In conjunction with key stakeholders, we developed a **Quality Standards Framework (QSF)** in recent years, which provides the foundations for improving clinical care against evidence-based standards. We worked with pilot sites to test those standards in clinical practice, but this work was severely disrupted when the COVID-19 pandemic struck. This strategy will outline how we will now take this work forward and build on the foundations of the work done in the last few years.

We played a key role in the [Getting it Right First Time \(GIRFT\)](#) programme – a national programme designed to improve the treatment and care of patients through in-depth review of services, benchmarking, and presenting a data-driven evidence base to support change. We will support our members to implement the recommendations in the GIRFT report.

Working with the **Royal College of Physicians (RCP) Invited Service Review (ISR)** Team, CSSC invites experienced Gastroenterologists and Hepatologists to support invited service reviews, which involve

Gastroenterology and Hepatology Services, in hospitals in England and Wales. This is an important element of the Quality Improvement activity as the aim is to provide support with specific recommendations to help improve services and ultimately care delivery for patients. CSSC also selects experts to provide detailed case note reviews on behalf of the RCP.

The **BSG works collaboratively** with other organisations to set standards for the delivery of care. This includes the [Joint Advisory Group of Gastrointestinal Endoscopy \(JAG\)](#), which sets accreditation standards for UK endoscopy units, and is a collaboration between BSG, Royal College of Physicians (RCP) and Royal College of Surgeons. Another collaborative improvement programme with the RCP and the British Association for the Study of the Liver (BASL) is the [IQILS programme \(Improving Quality in Liver Services\)](#).

The committee also supports important national projects, such as the [National Acute Upper Gastrointestinal Bleeding Audit \(UK\)](#), which will deliver its findings in early 2023.

CSSC has a proven track-record in producing **world class guidelines** and our guidelines are accredited by the National Institute for Health and Care Excellence (NICE). We have published approximately 24 guidelines and 19 guidance documents in the last 3-4 years. We published a post-polypectomy surveillance guideline in 2020 and this proved particularly helpful during the COVID-19 pandemic by significantly reducing demand for surveillance colonoscopy. This strategy will show how we will continue to strengthen the development and promotion of our guidelines, including our commitment to achieving re-accreditation by NICE in 2023.

PART TWO

Providing a networking forum for Gastroenterology and Hepatology in the UK

CSSC provides a networking forum on behalf of the BSG for the four nations of England, Scotland, Wales and Northern Ireland. All parts of England are represented through regional representatives (and deputies). The 11 Regional Representatives in England also act as Royal College of Physicians Regional Specialty Advisors.

Regional representatives are pivotal in providing update reports from their respective regions. CSSC provides a safe space where clinicians can discuss good practice and concerns. They are also responsible for supporting the wider ambitions of the BSG in their local areas, such as encouraging new members to join, facilitating the deployment of surveys and audits and providing local expertise about all the BSG can offer. They also organise regional networking meetings to disseminate novel practice, educational content and provide an opportunity for clinical colleagues to meet and network.

CSSC encourages BSG members to share innovative practice, which is [published on the BSG website](#). These service success stories were showcased at a recent BSG webinar and included examples of how to become a member of the prestigious World Endoscopy Organisation and development of a gastroenterology digital playbook.

To celebrate innovative practice and improvement projects, CSSC introduced a [Service Development Prize in 2019](#). This award recognises the work carried out by BSG members, as a team or as an individual, that has made a demonstrable impact on patient care by innovative service improvement.

Members of the committee represent the BSG in important external arenas, such as [NHSX](#) which is responsible for carrying out fundamental reforms to services using digital technology. CSSC is a major contributor to the revision and enhancement of electronic referral systems and '[Advice and Guidance](#)'.

“ Regional representatives are pivotal in providing update reports from their respective regions. ”

STRATEGIC PRIORITY 1: FURTHER DEVELOP LOCAL BSG REPRESENTATION IN EACH HOSPITAL OR TRUST ACROSS ALL FOUR NATIONS.

CSSC will work with the regional representatives to develop and implement a framework of local representation through 'honorary BSG Clinical Representatives'. This framework will be designed to be inclusive for medical and non-medical colleagues and ensure that networking, learning and development opportunities reach all gastroenterology and hepatology units in the UK. We will aim to have 80% of hospitals with a nominated BSG clinical representative by the end of 2023.

STRATEGIC PRIORITY 2: BSG ROADSHOWS

CSSC will host four Roadshow meetings during 2022/23. The aim of the roadshows will be to strengthen regional engagement of the BSG leadership across the UK, galvanise the regional representatives in their role in promoting the BSG and to provide an opportunity for mutual sharing and learning. We will measure attendance and attendee feedback and collate and publish feedback and success stories that emerge from the Roadshows. We will ensure that the Roadshows are an opportunity for a diverse range of voices to be heard both from the BSG and externally. An outline proposal will be drafted to identify the purpose, design and outcome of the Roadshows.





STRATEGIC PRIORITY 3: BSG SERVICE DEVELOPMENT PRIZE

CSSC will continue to award an annual service development prize to an individual or teams that have shown courage and innovation in improving services for their patients.

The overall winner is awarded a £500 prize and presents their work as an oral presentation at the BSG annual meeting and BSG Conference. In 2021 and due to the very high standard of submissions, runner-up winners and 'highly commended' submissions also received recognition for their projects. From 2022 the main prize winner will be extended to 1st, 2nd and 3rd prize winners with awards given of £500, £300 and £100 respectively.

STRATEGIC PRIORITY 4: MAINTAINING SURVEY DATA ON WORKFORCE AND KEY PATIENT SERVICES

In order to understand the landscape in which members are operating we will continue to collect and publish data from regional and clinical representatives on workforce and key services such as outpatients, endoscopy and staffing. This will inform the committee and BSG executive on potential bottlenecks and areas where focussed solutions are required.

The CSSC works collaboratively with the BSG Workforce lead and receives regular [Workforce reports](#) to review their implications on service delivery and will continue to support workforce improvements agreed at CSSC. Recent examples of supporting workforce include the development and publication on the website of [consultant job planning guidance](#).

PART THREE

Improving Services

One key area of focus for CSSC is improving the quality of Gastroenterology and Hepatology services for patients across the four nations. We achieve this by developing our work in the following priority areas.

QUALITY STANDARD FRAMEWORK (QSF)

We initiated this ambitious national project in 2016. Its core objectives are to raise the standards of gastroenterology and liver services for patients in all hospitals and regions and to reduce unwarranted variance in the provision of care.

Pilot sites volunteered to take part in the project and are distributed across the four nations and include a mixture of larger University hospitals as well as smaller general district hospitals.

Unfortunately, the COVID-19 pandemic severely disrupted the piloting of the framework, and we are now committed to re-starting this programme during 2021/22 and expanding its reach.

Following consultation with key stakeholders and the Quality Standards Framework Working Group (QSFWG), 17 key standards have been initially agreed which encompass key domains as pivotal areas for excellent patient care, to include; Diagnostics, Interventions, Surveillance, Leadership and Governance, and Research/Innovation. These domains would be considered for quality standards measurement across fields namely; Inpatient care, Outpatient care, Endoscopy, IBD and Luminal, Alcohol services, Liver, Nutrition, Pancreato-biliary.

STRATEGIC PRIORITY 5: DEVELOP AND DEPLOY BSG QUALITY STANDARD FRAMEWORK (QSF)

Following the COVID-19 disruptions, we will re-launch the piloting of the framework, refine the content based on the learning from pilot sites and then make it available nationally. We will also develop and publish regional key service data. This will establish a benchmark for subsequent years data for comparison.

We will explore how to best provide a communication platform or information repository for anyone engaged in improvement activity, including implementing the QSF. This will enable sharing of case studies, business cases, improvement tools and other helpful material.

We will also continue our joint working with GIRFT, JAG and IQILS and other stakeholders to ensure that the QSF works seamlessly alongside other quality improvement programmes.

As the BSG develops its environmental sustainability strategy, we will seek to integrate quality standards that reduce waste or reduce the use of resources in line with the NHS Net Zero ambitions.

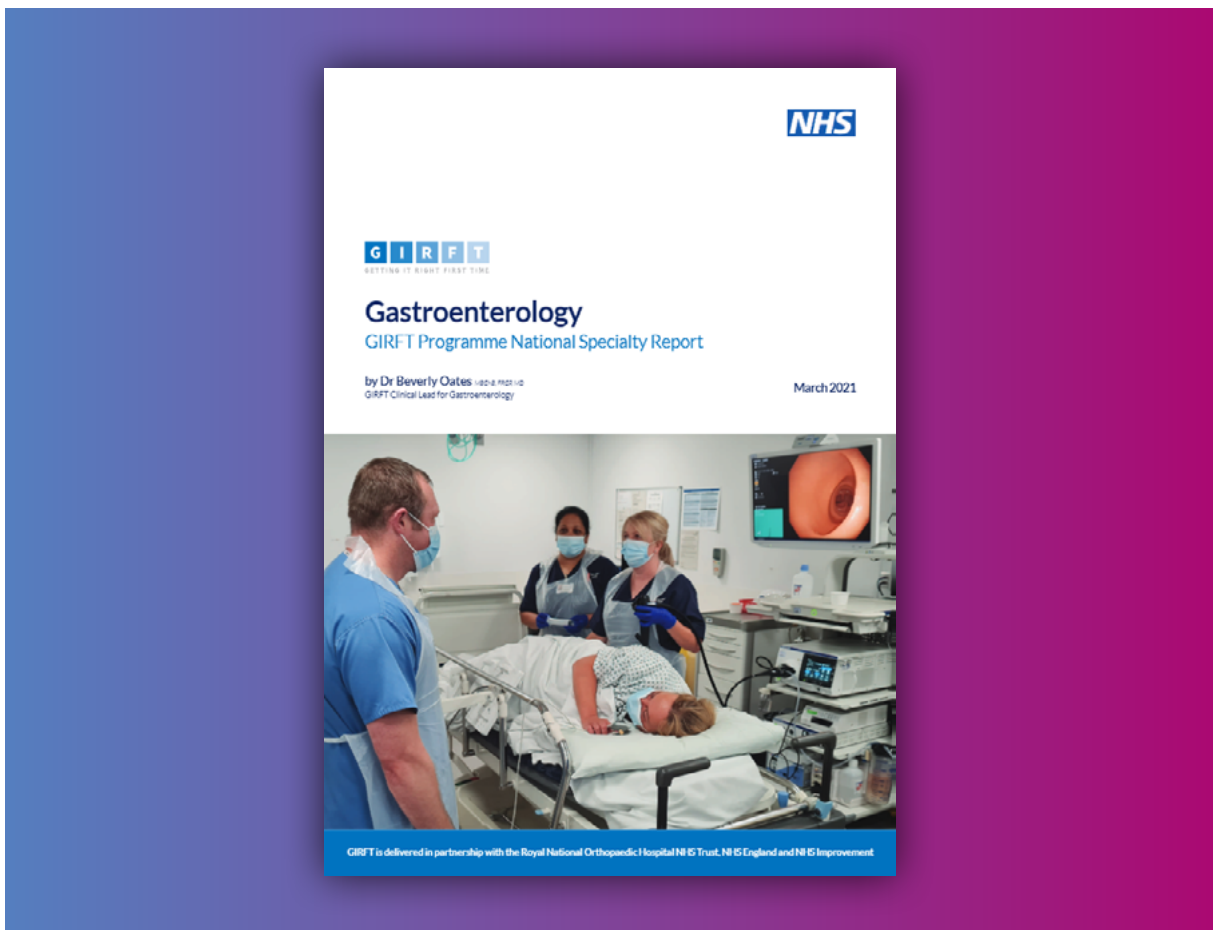
GETTING IT RIGHT FIRST TIME (GIRFT)

We supported the development of the 2020 GIRFT report. The programme undertakes clinically-led reviews of specialties, combining wide-ranging data analysis with the input and professional knowledge of senior clinicians to examine how things are currently being done and how they could be improved.

Working to the principle that a patient should expect to receive equally timely and effective investigations, treatment and outcomes wherever care is delivered, irrespective of who delivers that care, GIRFT aims to identify approaches from across the NHS that improve outcomes and patient experience, without the need for radical change or additional investment.

STRATEGIC PRIORITY 6 SUPPORT THE IMPLEMENTATION OF GIRFT RECOMMENDATIONS

Building on the work we have done with GIRFT, we will support the implementation of [GIRFT recommendations](#). During 2021/22 we will promote and disseminate the report to ensure that members are fully aware of findings and recommendations. In 2022/23 we will agree four 'pathways-on-a-page' and sentinel metrics. By the end of 2023 we will incorporate GIRFT recommendations into the QSF. The BSG has ensured that pathways on a page and sentinel metrics are relevant to all four nations and all regions and indeed wider applicability to similar healthcare systems across the world.





STRATEGIC PRIORITY 7
DELIVER HIGH QUALITY
INVITED SERVICE
REVIEWS (ISRS) WITH
THE ROYAL COLLEGE OF
PHYSICIANS IN ENGLAND
AND WALES

The CSSC will continue to support ISRs and, during 2022/23 we will explore ways of formalising roles and encouraging candidates earlier in their careers to participate in ISRs. A more structured approach to selecting representatives will include mentoring for the role and team meetings where experiences could be shared amongst the team, and individuals could be supported within their ISR roles.

STRATEGIC PRIORITY 8
CHAIRING THE 2022
NATIONAL UPPER
GASTROINTESTINAL
BLEEDING AUDIT (UK)

We will provide leadership and funding for the 2022 National Upper Gastrointestinal Bleeding Audit and support the successful data collection, statistical analysis and modelling by working closely with our regional representatives to achieve this.

PART FOUR

Clinical Guidelines

CSSC commissions guidelines on the management of gastrointestinal and liver disorders to promote and improve the standard of practice of clinical gastroenterology. The full Writing and Review Process on the Production of BSG Guidelines is published on the BSG website and updated annually.

NICE has accredited the process used by the BSG to produce best practice clinical guidelines since 2013. Our re-accreditation is valid for 5 years from July 2018 and the next re-accreditation date has been agreed with NICE as July 2023.

Most guidelines are commissioned by the CSSC via the specialist section committees. BSG Council may also suggest topics for guidelines. Guidelines are usually commissioned because of a perceived need for greater clarity and consensus in the recommended management of a given condition. This need usually arises when there have been important recent advances in understanding and treatment, which should lead to improved patient outcomes, but have not been universally incorporated into clinical practice.

CSSC also commissions Guidance documents which are similar to full guidelines but are shorter in length due to less published evidence being available and are not intended to meet NICE criteria.

STRATEGIC PRIORITY 9

ACHIEVE FULL RE-ACCREDITATION OF BSG GUIDELINES BY NICE BY JULY 2023

We will ensure that the high standards of guideline preparation and publication are fully met. We will achieve this by ensuring compliance with the Writing and Review Process on the Production of BSG Guidelines which includes the criteria necessary for guidelines to carry the NICE Accreditation Mark. We review and update the Review Process document each year to ensure continued compliance. The next review will be completed in September 2022.

We will also work with representatives from relevant BSG Section Committees ensuring that their plans for future guidelines is reviewed annually. This will ensure that we have a healthy guideline pipeline that is most relevant for clinicians and patients.

STRATEGIC PRIORITY 10

DEVELOP A COMMUNICATION PLAN TO ENHANCE IMPACT OF GUIDELINES

The BSG guidelines are internationally renowned and valued for their high quality and clinical relevance. During 2022, we will develop a communication plan with the aim of enhancing the reach and accessibility of our guidelines. We intend to propose the development of a Guidelines App to the BSG Executive and will seek funding to develop this App in 2022. This will include a review of readership and how people might wish to access guidelines in different formats. We will also continue to promote our guidelines at BSG educational events and conferences, both in the UK and internationally.

STRATEGIC PRIORITY 11

WORKING COLLABORATIVELY WITH NICE

NICE plays a vital role in how care is delivered in the NHS in England, Scotland, Wales, Northern Ireland and the BSG will seek to ensure that we are closely involved in any work that relates to Gastroenterology or Hepatology that NICE undertakes, for example development of Technology Appraisals and Guidelines. We agreed a collaboration framework in 2020 and will continue to build on that.



