**Introduction**

The JETS Workforce programme enables the endoscopy workforce across the UK and Republic of Ireland to access a standardised, quality assured and updated framework for training. The training pathway is made up of three key elements: e-learning modules, a competency framework and training courses. JETS Workforce is part of the Joint Advisory Group on GI Endoscopy (JAG) and is built on the previous Gastrointestinal Endoscopy for Nurses (GIN) training program and the All-Wales Endoscopy Competency Framework (AWENcf). JETS Workforce is designed for the whole of the endoscopy workforce from new starters to those experienced in the specialty. The programme completed a successful pilot in 2018 before launching in 2019.

**Aims and methods**

JETS Workforce is available to the workforce of any endoscopy unit registered with JAG. The programme is designed for all members of the endoscopy workforce, including unit managers, endoscopy nurses, health care support workers, practice educators, and decontamination technicians. The programme is comprised of three levels: level 1 foundation and decontamination, level 2 advanced endoscopy, and level 3 management and leadership. For each level there are three learning elements to complete: e-learning modules, training courses, and a competency framework.

**Results**

We have 9,100 registered users on the JETS Workforce website from 431 units. Nearly 1,800 users are assigned as assessors of the competency framework and we have recruited over 100 endoscopy workforce members to become teaching faculty on our ENDO1, ENDO2 and ENDO3 courses. Having this amount of endoscopy workforce members on board with our work is leading to a significant change in the culture of endoscopy, with more focus on providing a standardised and structured approach to training, assessments, and appraisals. So much so that there has been national and international recognition of our training programme with presentations over the 5 years to the European Society of Gastrointestinal Nurses Association (ESGNA), course delivery in Bangladesh and the adoption of the program by the Republic of Ireland. Another significant achievement for the programme is the mandating of certain elements of the training framework for services in the UK undergoing accreditation or reaccreditation. From 1 October 2024, all services in the UK must demonstrate that 10% of their endoscopy workforce (bands 2-8) have completed the ENDO1 e-learning modules and ENDO1 course, either virtually or in person, to maintain their accreditation status or achieve accreditation. This will increase to 25% from 1 October 2025. We are also very pleased to be working with endoscopy services in the Republic of Ireland and that members of the endoscopy workforce can engage with the training framework. Our e-learning modules can be accessed via e-integrity and workforce members can attend our online ENDO1 course. We hosted two in person ENDO3 courses in Dublin in September 2024 which were very well received.

**Conclusion**

We want to continue to support the endoscopy workforce by providing a framework for training and clear standards to work towards, as well as increasing confidence, job satisfaction and sense of achievement through gathering of evidence and attainment of final certification. We want to ensure that training for the endoscopy workforce is on a par with that of medical endoscopists and that time is clearly marked for training and upskilling.