

Pathology User Survey Report December 2021

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PATHOLOGY USER SURVEY SUMMARY

1 AIM

To seek Pathology User views of the service provided by laboratories at Great Western Hospitals NHS Foundation Trust and to establish if the service provided meets the requirements of its users.

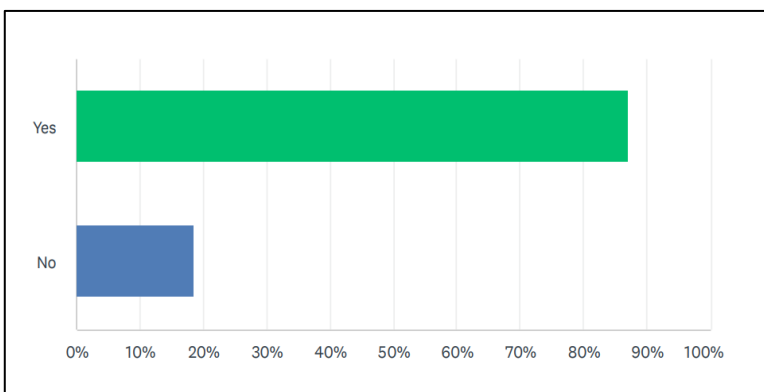
2 METHODOLOGY

Users of Great Western Hospitals NHS Foundation Trust Pathology Services have been able to access an online Pathology User Survey since it first became active in February 2016. Notices with links to the survey were placed on the Trust intranet and extranet pages and a message was added to Trust Comms to encourage hospital staff to participate. Pathology staff have been encouraged to add a link directing individuals to the survey attached on their email signatures. Data is collected periodically as described in PAT-Q-042 (Pathology User Engagement Policy, Including Management of Complaints) and the results presented in a report to Pathology Management. Any additional commentary provided by service users is, where possible responded to and where necessary users are contacted for further discussion. Completed reports are uploaded to the Pathology intranet page, Trust website and also the QPulse document module of the Quality Management System (QMS) where the document is distributed to all Pathology laboratory staff for electronic acknowledgement.

3 RESPONSES

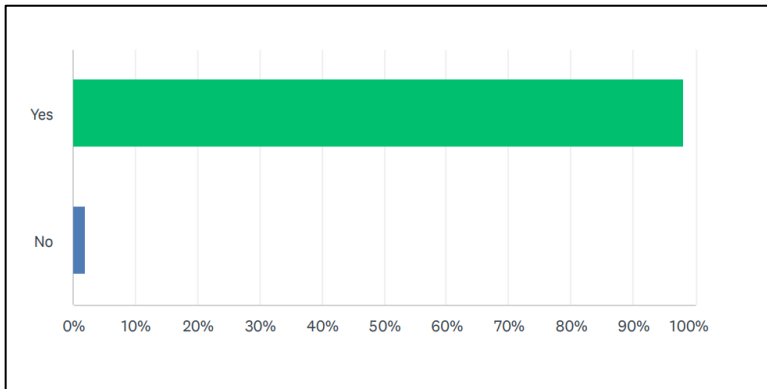
In December 2021 results of the survey were collected for the period of 1st December and 30th November 2021. A total of 54 responses were collected during this period. This compared to the same number which was received during the last reporting period. Similarly, to the 2019 report, a paper version of the survey was sent out to users as well as the availability of the electronic survey which appeared to be preference of Trust based users. Responses have been received from both GP practices and locations from within the Trust which is encouraging. Those users choosing to leave additional commentary increased slightly this year however numbers remain relatively low.

Q1. Laboratory contact details are easy to find when required



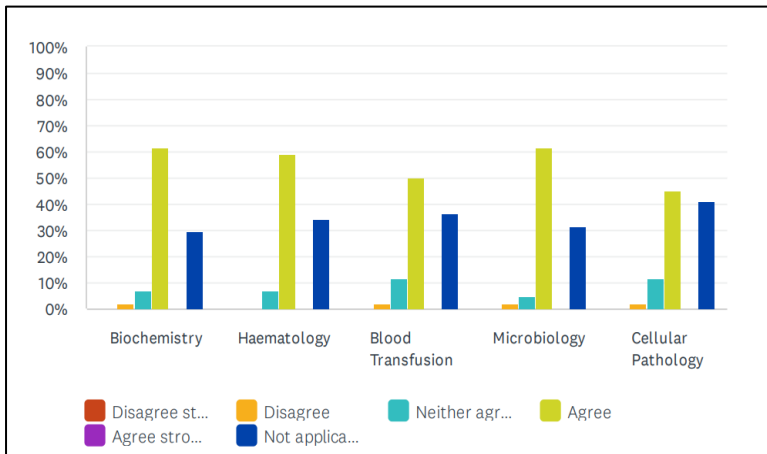
All 54 users provided response to the first survey question with 87% (47) agreeing that they can locate contact details for the laboratory easily. This was an increase in positive response from the last survey of 5%. Only 10 individuals (18%) responded negatively-this was a slight increase on the previous captured data however, no commentary was provided to assist in identifying any significant concerns in this area.

Q2. Staff are polite and helpful



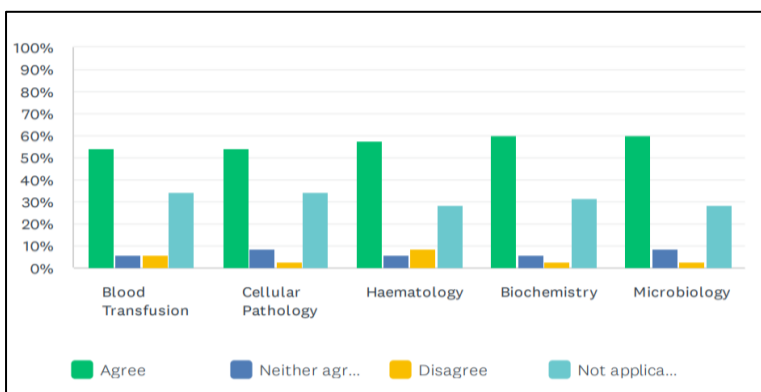
A total 98% of respondents agreed that staff were polite and helpful. This was a slight increase on the last report. 2 individuals provided a negative response and 4 refrained from answering. No specific commentary was provided to support the negative responses.

Q3. Results are reported in a reasonable timeframe



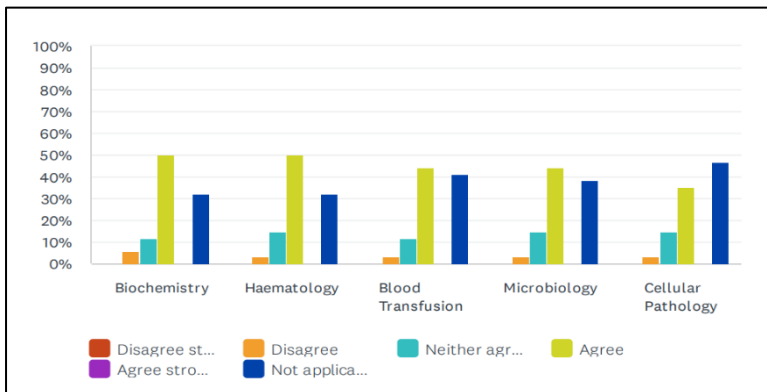
44 participants provided feedback – this was a 10% increase when compared to the 2020 reporting period. Consensus showed that users agree that results are reported in a reasonable timeframe with Biochemistry and Microbiology most agreeable with 61% closely followed by Haematology with 59%. Cellular Pathology observed the most significant decrease in satisfaction receiving 46% - a reduction of 22%. Biochemistry, Blood Transfusion, Microbiology and Cellular Pathology received 1 respondent that disagreed however no commentary was provided to suggest explanation for the dissatisfaction.

4. Report is clear and concise



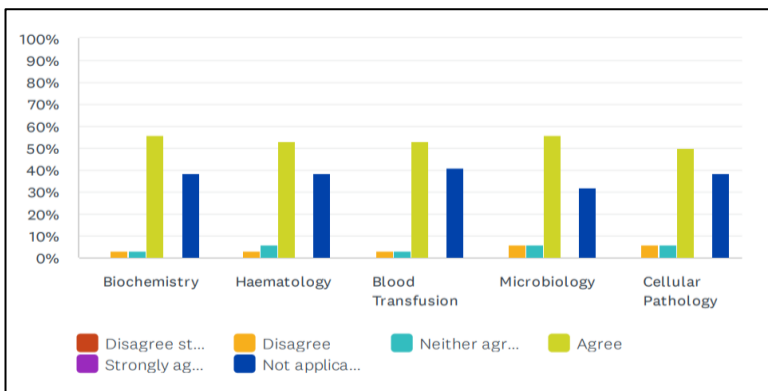
A lower response rate was observed with only 35 participants providing feedback. Overall, a positive response was received for this question with 57% stating that report templates in use are clear and concise. This is comparable to last year's report which achieved 55%. 7% stated that they neither disagreed nor agreed and 5% disagreed (a decrease on the last report of 12%). 31% were not applicable which accounted for 11 participants.

Q5. Clinical Advice is readily available from the laboratory when needed



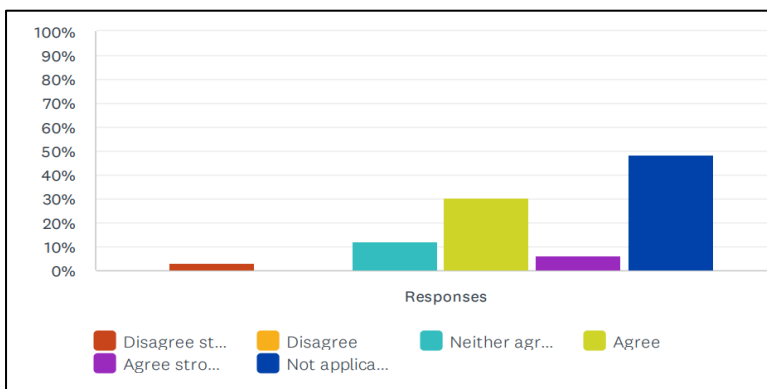
Response again was low with 20 choosing to skip the question. Of the 34 individuals who answered, 45% agreed that clinical advice is available when required. This is a significant decline when comparing to the last report which stated 68% satisfaction. Biochemistry and Haematology saw 50% of respondents agree however this is still lower than observed last year. 38% selected “N/A”. No commentary was provided to help identify why two participants selected “disagree” across Pathology services.

Q6. The format of request forms are user friendly and meet requirements



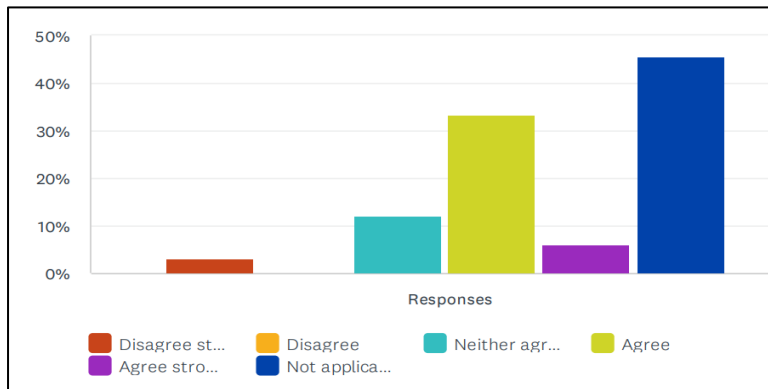
A total of 34 participants responded to the question with 20 choosing to skip. Results were still positive however with an average of 54% stating that they agreed that the format of request forms are user friendly and meet requirements. 4% disagreed. 37% selected that the question was not applicable. No commentary was provided to support the negative responses.

Q7. MORTUARY & BEREAVEMENT SERVICES: Staff are knowledgeable and deal with enquiries in a professional manner.



33 participants responded to the question with 21 choosing to skip – this likely due to individuals not having direct contact with the service. 36% agreed with the statement and 1 individual stated that they strongly disagreed that staff were knowledgeable and dealt with enquiries in a professional manner. No additional commentary was left regarding this statement.

Q8. MORTUARY & BEREAVEMENT SERVICES: Administration is dealt with in a timely manner.

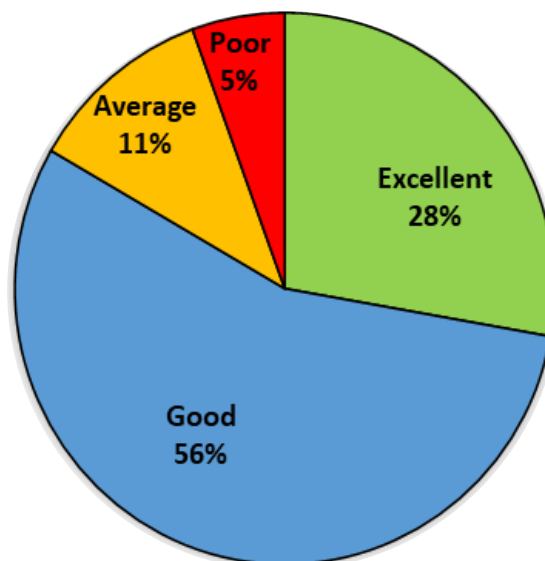


A total of 39% respondents stated that they agreed with the statement. 45% stated that it was not applicable and 12% neither agreed nor disagreed. 1 participant stated that they strongly disagreed. On review of additional comments that have been provided during this survey period it is suspected that the negative response may be linked to concern raised regarding the time for completion of process within the

Mortuary service (see below).

Q9. How would you rate Pathology services overall?

Disappointingly only 18 respondents answered this final question with 36 choosing to skip. In total, 28% stated that they felt the service currently provided by Pathology Services was of an excellent standard (40% achieved in the last report with similar number of participants), 56% stated that it was good (47% last report) and 11% felt that it was average. 1 respondent stated that they felt that the service was poor. By reviewing the additional comments that have been provided it is hoped that it will be possible to determine that cause for the poor response.



3.1 Additional Comments

During the survey a total of 9 responses were documented. The following additional comments were documented, and responses provided accordingly:

- *“There could be a link on site to a page with “estimated turn-around times - time frame between biopsy to reporting.”. This survey should have a question at the beginning that asks: Did you contact Pathology Services - because I didn't contact anyone. I was looking for timeframes, regarding reports, eventually I found it somewhere” – Patient, Wiltshire.*
Estimated turnaround times are included within the Service user Handbooks which are available to view on the Trust Pathology web page and the Trust intranet page for internal service users.

- *“Time frame for release of bodies is far too long. Coroner sends release to Mortuary on a Friday morning and patient is not released to Funeral Director until 11 days later. Not Acceptable GWH” – Professional, Swindon.*
Unfortunately, without further detail it is difficult to comment on individual cases. Where patients are referred to the Coroner, the Mortuary team are under the jurisdiction of the Coroner’s office and must wait to receive authorisation prior to permitting release into the care of the Funeral Director. Delays can often arise due to Doctor’s completion of documentation and Coroner review process. Delays may also occur where a Funeral Director has not been assigned.
- *“Later collection times from the GP surgeries” – Office Manager, Hungerford Surgery*
Many thanks, your suggestion has been forwarded to our Trust Transport Supervisor. We will provide response once received.
- *“Some blood tests are not available on the forms, so we have to handwrite them such as osmolalities, Vit D, AST and intrinsic factor. It would be helpful to have more panels such as for Pernicious anaemia and liver panel” – GP, Westrop Medical Practice.*
Panels are being actively investigated by various specialities and Trust IT. “Missing” tests are being reviewed by the Pathology IT Manager and Pathology Clinical Applications Specialist to ensure that they are included.
- *1. ““Other” for haem/ biochem - only allowed one choice? more boxes for additional tests - e.g., B12 investigation” – GP Elm Tree Surgery.*
The “Other” is free text and therefore the service user should be able to list multiple tests. This appears to only exist in GP ICE. “Missing” tests are currently being investigated – once resolved, the additional “other” should not be required.
- *2. “Haematology - precise advice better than description of blood film, e.g., especially advice re next steps/ management” – GP – Elm Tree Surgery.*
The laboratory is asked to perform Full Blood Counts and where required will then go onto produce a Blood Film. Blood Film reports are written to be clear and concise. In most cases the description is found to be adequate for most users. Where medical advice is required for management or subsequent actions, this is available from gwh.haematologyadviceandguidance@nhs.net. We find this clinical advice is best arranged as a dialogue where laboratory based medical staff can get a context of the patient's overall condition.
- *“It would be good if you could switch all requests to ICE stickers rather than handwriting forms and bottles - it seems like a very outdated system now” – HCA White Horse Surgery.*
Please discuss directly with your provider’s IT team who should be able to advise/ support.
- *When results phoned through to wards needs to be doctors not ward coordinators - Difficult to understand interpret sometimes – Sister, LAMU.*
The laboratory will only telephone wards where asked to do so or if results require immediate attention. It is appreciated that laboratory analytes do sometimes have long/ complex names or unfamiliar acronyms however, lab staff are prepared to take time to make sure they can be taken down accurately. Often clinicians on wards are not available to take calls immediately - so lab staff would expect to give results to those individuals authorised to take incoming calls. Another unavoidable issue in the laboratory is that with its many analysers there will be a certain level of inevitable background noise.

Compliments

- *“The service provided to me when my mother passed was excellent. The staff of all departments involved was outstanding” – Relative, Devizes.*
- *“They provide a good excellent service with the staff that they have” – Ward Manager, Meldon Ward, GWH.*

3.2 Visit Requests

No formal requests were made for visits during the survey period. The Pathology and the Quality and Customer Engagement Manager will endeavor in the coming months to send comms via the Trust GP newsletter to reignite the visits. This has been another challenging year and due to the COVID-19 Pandemic focus has been reduced on face-to-face meetings however the Pathology team have firmly embedded the use of virtual meetings with Microsoft Teams and it is hoped that some meetings could be scheduled with users over the coming twelve months. The Pathology Quality and Customer Engagement Manager will seek new methods to engage with external users.

4 PLANS

Results of this survey will be presented at the Pathology Management Committee meeting in January 2022 and will be discussed with both the Laboratory Managers and Mortuary & Bereavement Services Manager during the Pathology Quality, Governance and Assurance meeting in January 2022.

The uptake of service users to complete this survey although still encouraging remains lower than hoped. The approach of sending hard copies of the survey to all GP and ward users appears to remain an effective method of obtaining users opinions rather than solely placing reliance on the electronic survey link and therefore will be included as method of communication for the next report.

The Pathology Quality and Customer Engagement Manager is keen to investigate avenues that enable the service to receive increased feedback from the users. Additional feedback is imperative to enable the service to understand why negative feedback is received and to help ascertain what improvements can be considered/implemented to increase the quality of the service provided and as a result improve service user satisfaction. There will be discussion with the Mortuary & Bereavement Services manager to assess if it would be beneficial to develop an independent Mortuary Services User survey to capture further valuable data.

During 2021 the Trust IT team have implemented electronic requesting of Pathology specimens within the Trust (OrderComms). The Pathology Quality and Customer Engagement Manager would like to ensure that the current survey is reviewed and updated to reflect the increased use of electronic requesting across service users.

The current survey will continue to be available via Survey Monkey with responses captured at six monthly intervals during regular audits by the Pathology Quality and Customer Engagement Manager.