

Barnsley User Survey 2020 Report

Pathology would like to express their thanks to all those who were able to complete this year's survey.

INTRODUCTION

ISO Standards sub-clause 4.14.3 set requirements that the laboratory management shall seek information relating to user perception as to whether the service has met the needs and requirements of its users. This survey has been performed to comply with these standards, and in doing so, will bring to the attention of the laboratory management any areas of services provided by the laboratory that require improvement.

The user satisfaction survey ran between 7th February 2020 to 6th March 2020 and its purpose is to obtain feedback from our users on the quality of the services provided by the laboratory.

The information gained from this survey will enable laboratory management to look at the service we provide and decide how to improve it to meet the needs and requirements of our users, as part of our commitment to continually improve quality.

METHOD

The satisfaction survey was carried out using a questionnaire which was developed in consultation with BRILS Management Team, Clinical Heads of Department and the Laboratory Director, and comprised of 18 questions designed to elicit users' general views on the quality of the services provided by Pathology.

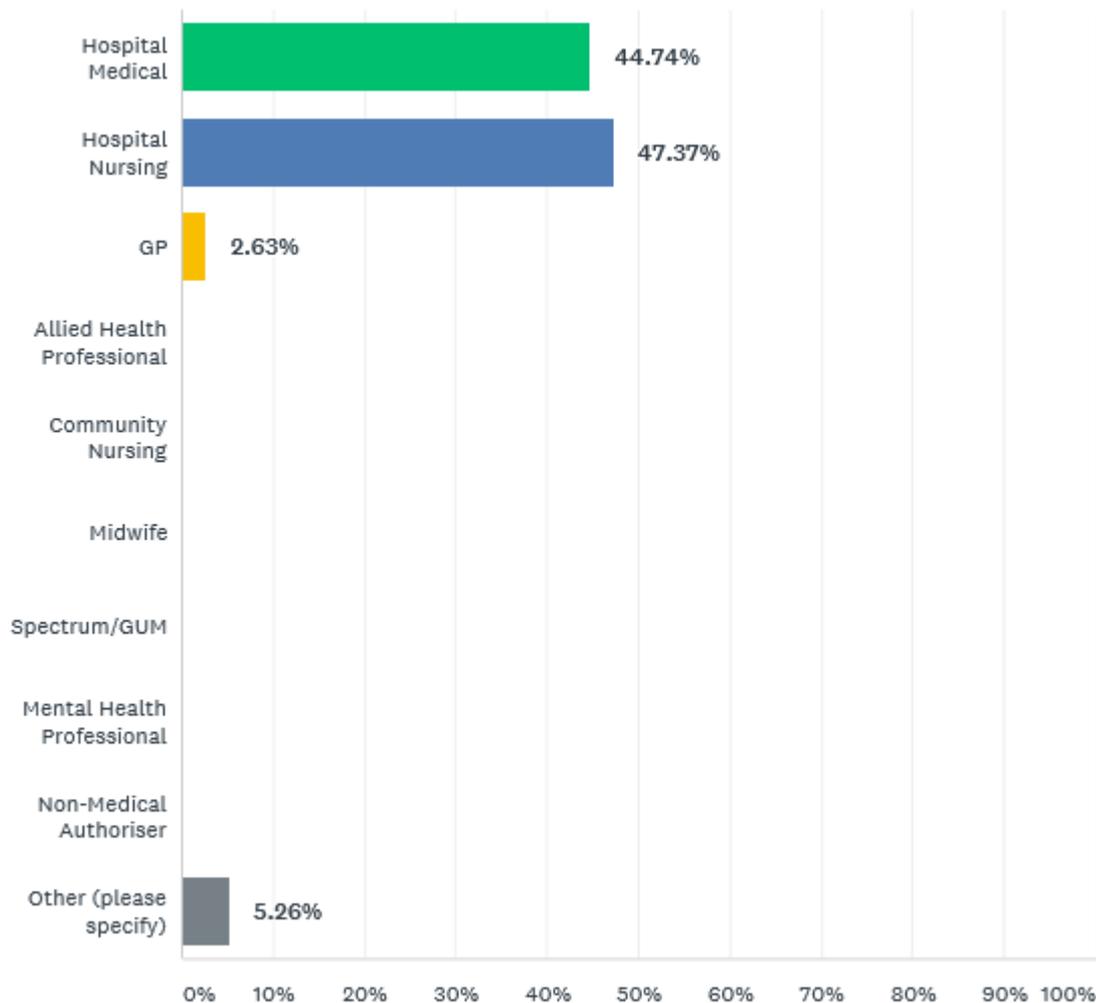
The respondents were asked to rate their satisfaction using the following response options: Yes or No, except in the case of a question asking how the respondent would like to receive communications from the laboratory (answers available were "Email", "News Page via the Website" or "Newsletter"). A percentage distribution of responses was used to present the data and cumulative percentage dissatisfaction compared to cumulative percentage satisfaction.

The respondents were also instructed to use 'not applicable' where appropriate. The penultimate question asks users to provide any comments to improve the service, and the final question asks users to provide feedback of any positive experiences with the service. These have been collated and have been discussed at a feedback session to the BRILS Management Team and actions identified where appropriate. Responses are detailed at the end of the report. All responses received are duplications of the text received.

Separate user surveys have been completed for Community users (DOC 329), Phlebotomy (DOC 331), and Funeral Director (DOC 333).

Questionnaires were sent via survey monkey to

- Trust users – via the communications team, direct email lists and hard copies sent to Education Centre during Lunch and Learn.

RESULTS OF SURVEYQuestion 1: Staff Group

A total of 38 responses were received from users within the Trust. This is an increase on the 24 responses on 2019. These responses are broken down into Hospital Medical and Nursing staff as detailed above. Of the two respondents who answered "Other", their responses were: Manager Admin and MDT Coordinator.

Question 2: Name (Optional)

This question was optional and was included to allow for specific personal feedback to be given where relevant and to enable the incentive of a box of chocolate to be delivered to the winning participant in the draw. For the purpose of confidentiality, the names of participants will not be included in this report. 23 respondents gave their name, whilst 15 respondents opted to submit their response anonymously.

Question 3: Department/Ward (Optional)

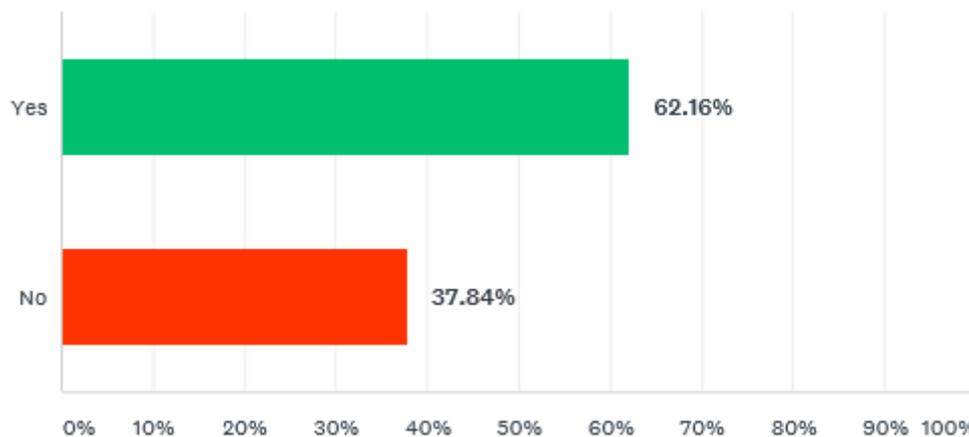
Department/Ward	Number of Participants
Dermatology	1
Hospice/Hospital	1
Cancer Services	4
PAU Med	1
Chemo Unit	3
Paediatrics	1
Ward 18	1
Respiratory Outpatients	1
Student Support	1
SHDU	2
Ward 29 SSU	1
Cardiology	1
Ward 32	1
Pre-operative	1
Orthopaedics	1
ED	4
ENT OPD	1
GOPD	1
Ward 22	1
AMU	1
Head and Neck Unit	1
Endocrinology	1

31 respondents chose to include the department in which they worked, whilst 7 respondents chose to submit their survey anonymously. The above table shows that responses were received from a wide variety of clinical areas within the hospital, covering inpatients, outpatients & surgical areas. A number of different departments/wards were represented in 2020 compared to 2019.

Question 4: Contact Details (Optional)

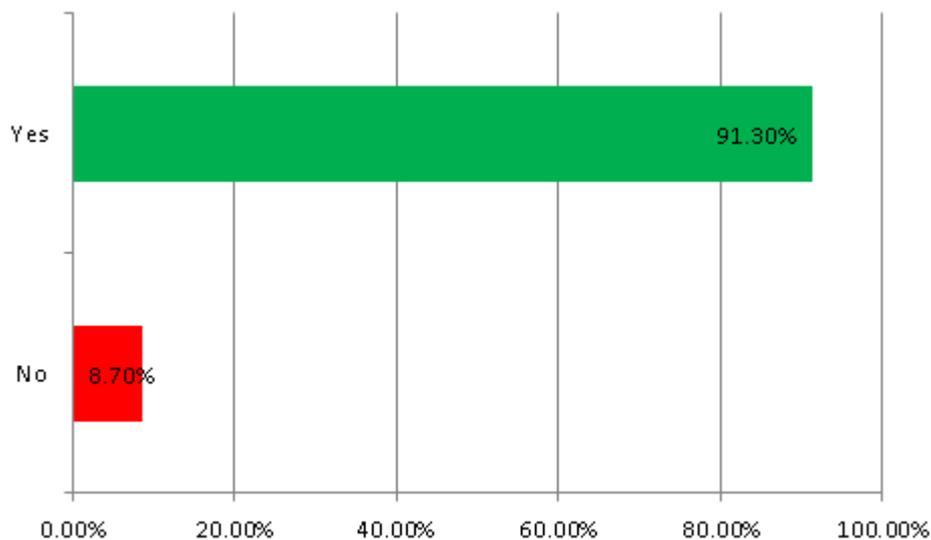
Respondents were given the option to provide their contact details, should they require a direct response about any of their answers to the questions in this survey.

Question 5: Were you aware that our user information can be obtained via our website?



This question was added to gauge how many users were aware that user information was available via the hub. A hyperlink to the Laboratory Medicine Website on the Hospital Hub was also included in this question to educate users about the location of user information. 37.34% of respondents who stated that they were not aware that the user information was available via the hub. This is similar to the result in 2019. This indicates that although work has been undertaken to promote the Pathology Website, further work needs to be undertaken on this.

Question 6: If yes, are you satisfied with the usefulness of the Pathology website as a source of information for each laboratory?



Of the respondents who were aware of the Pathology website, 91.3% were satisfied with the usefulness of this as a source of information. Where associated comments were left, responses are detailed in the table below.

Comment	Response
Was unaware of website information but could not move on so had to selected NO	The Pathology Website is available via the following link: http://www.barnsleyhospital.nhs.uk/pathology/
Not used	It contains lots of useful information about Pathology and the testing process, including sample & request labelling, sample types/requirements/containers for all tests, result availability and turn-around times, laboratory accreditation, key contacts plus lots more!
Not used. always ring up.	
I have adapted some guidelines from here to help with specific induction information for junior doctors. Thank you	Thank you for using our information to ensure that new staff members are aware of our processes & procedures. The website is where the most up to date information is held, so please continue to use this.
Easy to access and view.	Thank you for your comment. We are pleased to hear that you find the website user friendly.

Question 7: Are you satisfied with the range of investigations provided by the laboratory?

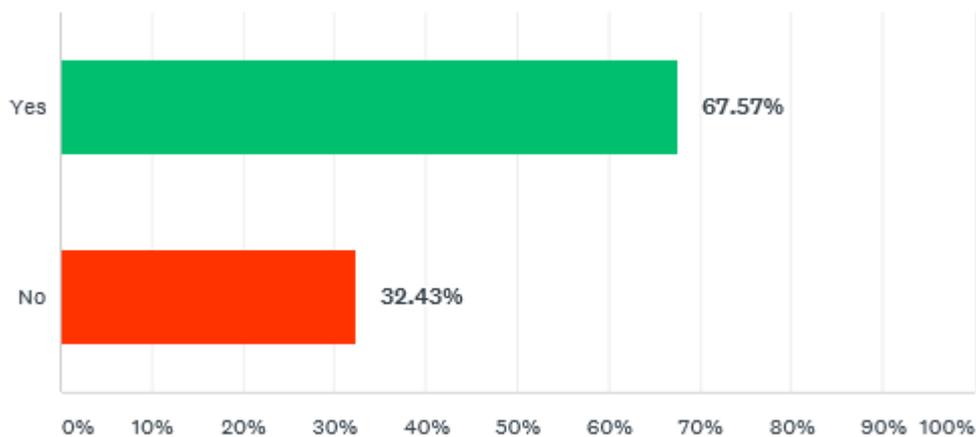


100% of respondents were satisfied with the range of investigations provided by the laboratory in Blood Sciences, Blood Transfusion & Cellular Pathology. In Microbiology, 94.12% of respondents were satisfied. The issues that have been highlighted via associated comments that were left are in the table below and responses to each issue are provided.

Comment	Response
PCRs are often delayed and patients often have prolonged treatment and multiple cannulation attempts.	Thank you for your comment. We are unsure which test/department you are referring to as PCR can be an acronym for a number of different tests (e.g. protein creatinine ratio, respiratory PCR, CSF PCR etc.). If you require further discussions, please contact the laboratory with specific test information. Please note that some of these tests are referred to other laboratories and therefore may take longer. All turnaround times are available on the Pathology website. We are working on the introduction of some PCR tests in house and this should be implemented by

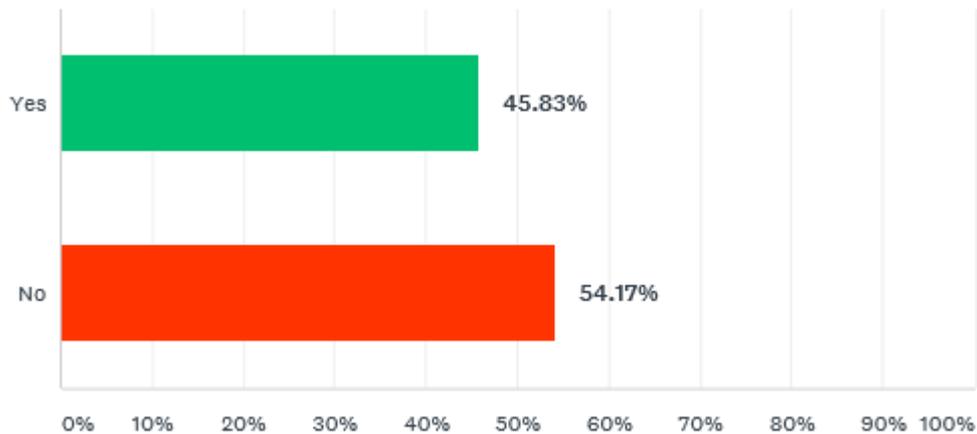
	the end of the summer 2020.
Blood sciences are very helpful. Microbiology not available after 8 pm and this is not always known by ward staff	Microbiology staff are in the laboratory from 8.30am until 8pm. After this time, an on-call Biomedical Scientist is available via switchboard for any urgent samples. All laboratory opening times are available on the Pathology website.

Question 8: Would it be helpful to know the cost of each investigation?



This question was asked following a user suggestion that it would be helpful to know the cost of investigations to enable clinicians to make better judgements about ordering clinically relevant tests. 67.57% of respondents felt that it would be helpful to know the cost of each investigation. Laboratory Management will discuss this response and the best way to make this information available to our users.

Question 9: Are you with the POD/air tube/chute system used to transport specimens to the laboratory?

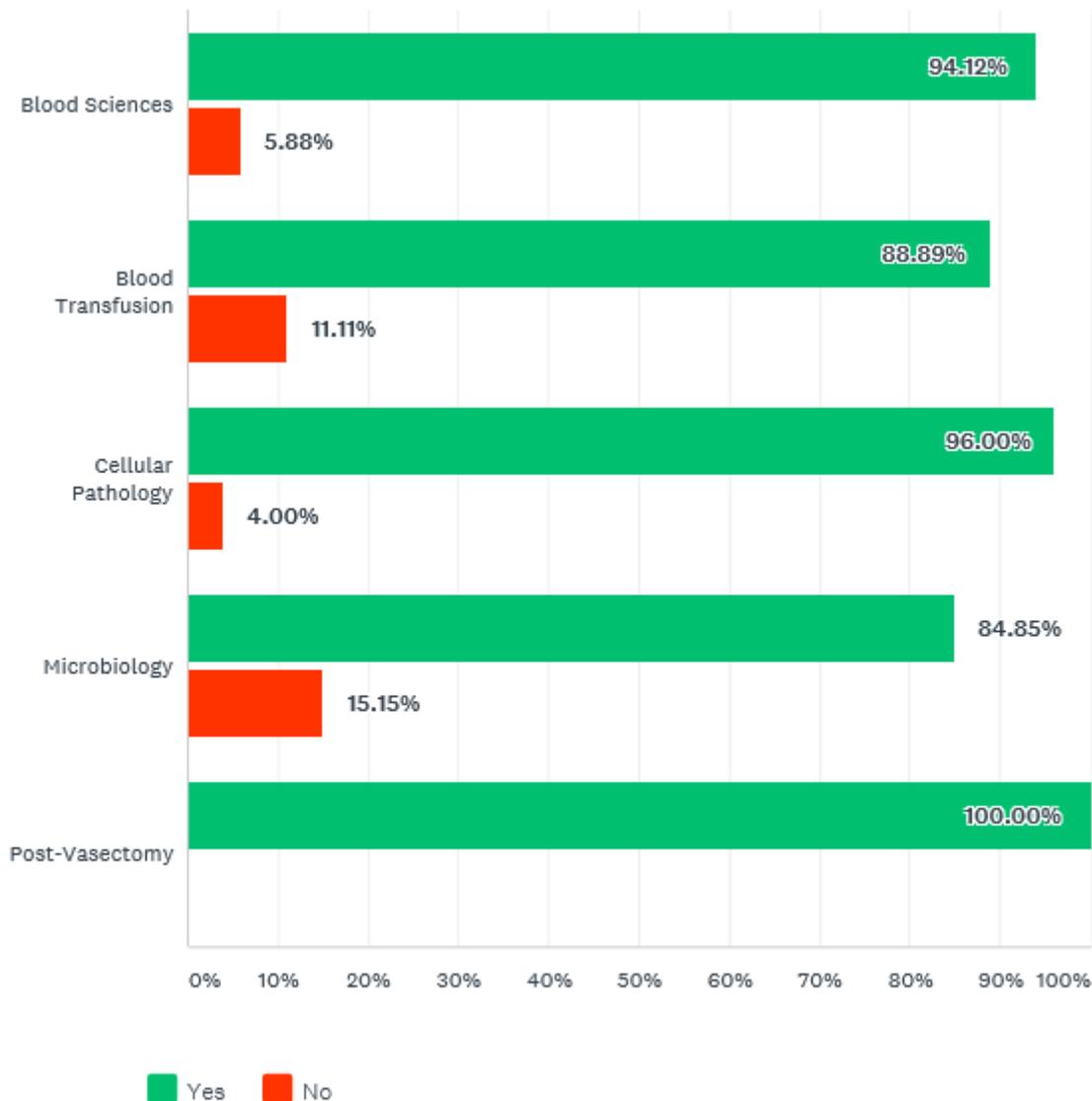


45.83% of respondents were satisfied with the air tube (pod) system used for transporting specimens to the laboratory, which is lower than in 2019 (53.33%). Where associated comments were left, responses are detailed in the table below.

Comment	Response
Pod often is broke. We need to use it very often.	<p>The air tube (POD) system is managed by estates. We have passed on this feedback to the Estates department.</p> <p>Pods are returned via the air tube system as soon as possible after emptying by laboratory staff.</p> <p>Please note that some samples should not be transported via the pod e.g. precious or unrepeatable samples/danger of infection samples. For a full list of samples that should not be transported via the pod, please see the Pathology website.</p>
It's always faulty.	
Very poor. Not usually working.	
It frequently does not work.	
unsure on accountability if it goes wrong	
POD system is fine when it does actually work lots of times a week it is out of use .	
Sometimes unavailable. Would be useful to know who is responsible for this; estates or pathology?	
Often doesn't work	
Sometimes we lose sample through the airtube. But we know if the sample is urgent we should hand deliver it to avoid any issues.	
Often faulty or no pods available	
never enough pods and tends to brake down	
Sometimes not working/difficult to get pods to the ward to use	
Often no POD's on ward so staff need to hand deliver to the labs. Can be very unpredictable with reliability.	
never any pods to send samples down to the labs.	
Always a shortage of PODS meaning a staff member has to physically transport specimens.	
Very reliable now	Thank for your feedback. We are pleased that you are satisfied with the air tube system.

Not used recently however.	Thank you for your comment. If you do need to use the air tube system, we hope that you are satisfied with it.
Mostly send from hospice.	

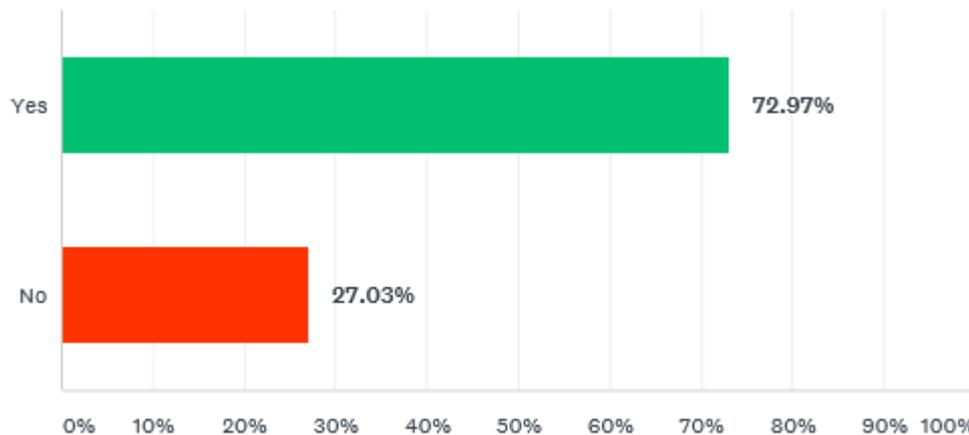
Question 10: Are you satisfied with the format/layout of the test request form for handwritten non-electronic requests?



More than 84% of respondents were satisfied with the format/layout of the handwritten request forms in Blood Sciences, Blood Transfusion, Cellular Pathology & Microbiology. Post-vasectomy request forms were added to this year’s questionnaire, as they are different to request forms for other disciplines. 100% of respondents were satisfied with these. Where associated comments were left, responses are detailed in the table below.

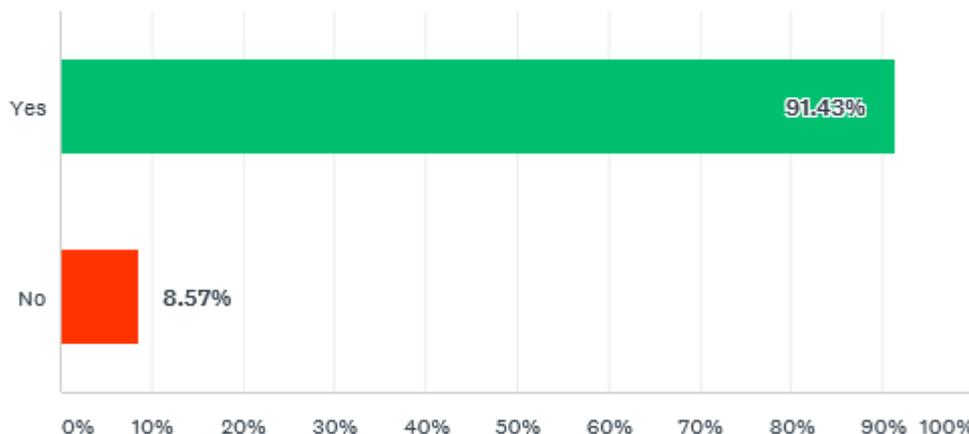
Comment	Response
Transfusion request form crowded and sometimes difficult to see exactly what needs to be filled in	<p>There are 3 types of Transfusion request forms within the Trust: Routine, Antenatal and Neonatal request forms.</p> <p>Routine forms are for general use when requesting group & screens, DAT tests and blood products. Antenatal forms are purely for use by the antenatal clinic. Neonatal forms are to be used for patients <4months old.</p> <p>We will take your comments into account when next reviewing our request form.</p>
Consider ensuring old forms are out of circulation. The obvious cut off on the form is before the signature box and can lead to the pattern recognition assumption that the rest of the form is for the lab.	We will take your comments into account when next reviewing our request form.
I feel that this create issues for both the patient pathway and for the Clinical team within the Histology department to ensure that samples are priorities correctly and that escalation of findings can be also delivered at the necessary pace required. Electronic request in some form is the way forward	Thank you for your comments. There is a workstream underway for electronic requesting of Histology on ICE.
Some of the tests can't be found.	Please note that due to the space available on the handwritten request forms, it is not possible to include tick boxes for all tests. The most commonly requested tests are included as tick boxes, and any other tests should be requested by handwriting these on to the request card. The full repertoire of tests can be found on the Pathology Website.
I would rather the system use stickers than an a4 sheet of paper	Thank you for your comment. It is assumed that you are referring to ICE requesting as opposed to using the handwritten non-electronic request forms. Unfortunately, the laboratory is unable to change this as this is how ICE requesting within the ICE System is operated.
Microbiology is untidy and often difficult to select the correct test. The Chemistry hand written requests on the back of the ice requests are easy to use.	Thank you for your comment. We will take this into account when next reviewing the request form.

Question 11: Do you use electronic requesting?



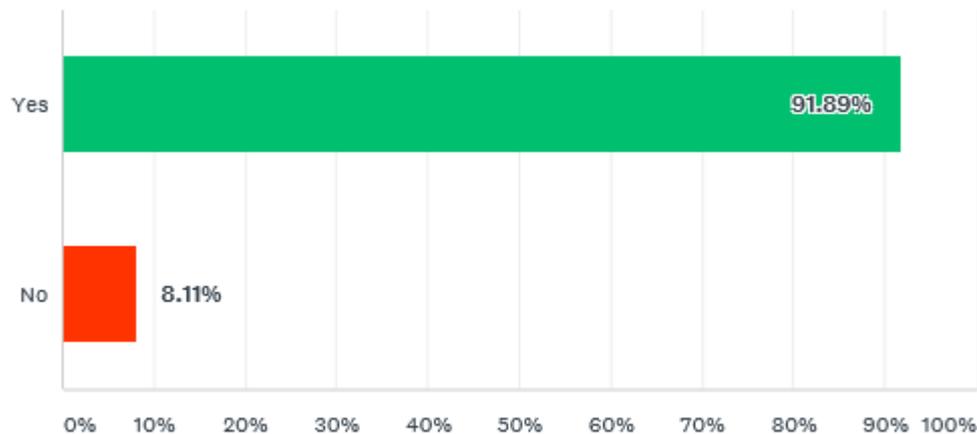
72.97% of respondents request electronically. This is a decrease from the 2019 user survey where 75% of respondents used electronic requesting via ICE.

Question 12: Are you satisfied with ICE when requesting laboratory tests?



91.43% of users are satisfied with electronic requesting via ICE, which is comparable to the results of the 2018 user survey. Where associated comments were left, responses are detailed in the table below.

Comment	Response
But system fails too often	Please report downtime of ICE to the Clinical Systems Team.
Would be useful to know how many/which types of bottles needed before requesting, so can add on tests.	This information is provided on the request form and is visible to the requestor at the final stage of requesting. Please note that this information is also available on the Pathology Website.
Very tedious, time consuming, difficult to navigate.	If you have any specific examples, please feed these back to the BRILS IT Team at bdg-tr.brils-it@nhs.net who will feed comments back to the ICE provider, CliniSys.

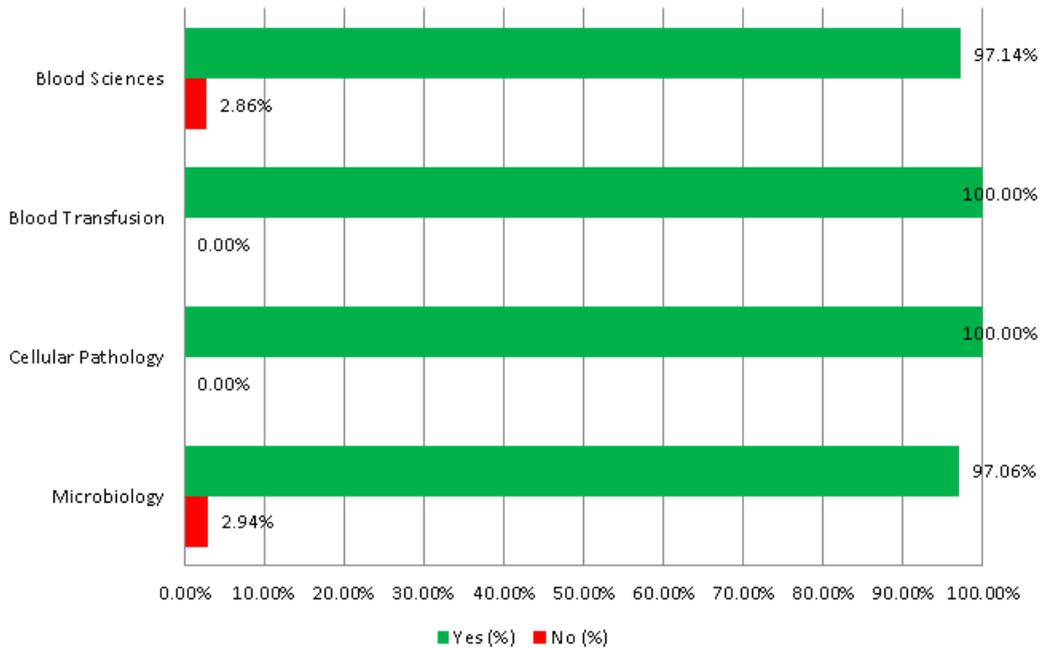
Question 13: Are you satisfied with ICE when reviewing laboratory results?

91.89% of respondents were satisfied with ICE for reviewing laboratory results. This is comparable to 2019 where 91.67% of respondents were satisfied. Where associated comments were left, responses are detailed in the table below.

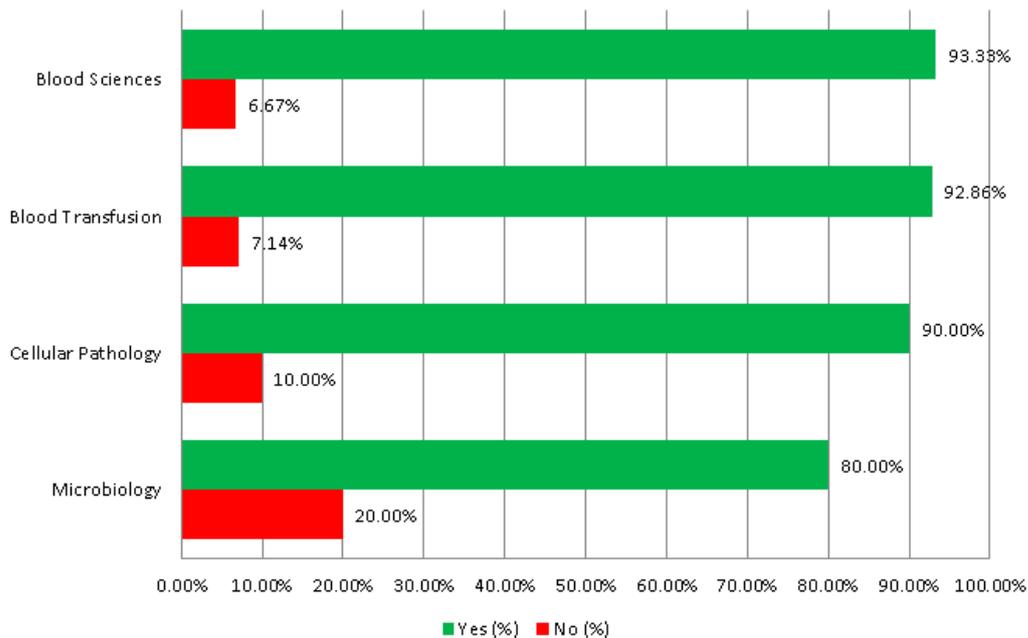
Comment	Response
A lot of screen changes & not easy to find all information	If you have any specific examples, please feed these back to the BRILS IT Team at bdg-tr.brils-it@nhs.net who will feed comments back to the ICE provider, CliniSys.
It says specimen collected for bloods when they've only been requested.	This is based on how the sample is requested. If the request is made using 'Collect now' or 'Collect on a specific date' then the sample will appear as collected. Only postponed requests won't show this.
It would be nice if the 'cumulative' and charting functions worked.	These features do work. If you have any specific examples, please contact the BRILS IT Team at bdg-tr.brils-it@nhs.net who will advise.

Question 14: Are you satisfied with the availability of advice and assistance provided by laboratory staff?

In Normal Working Hours?



Out of Hours?

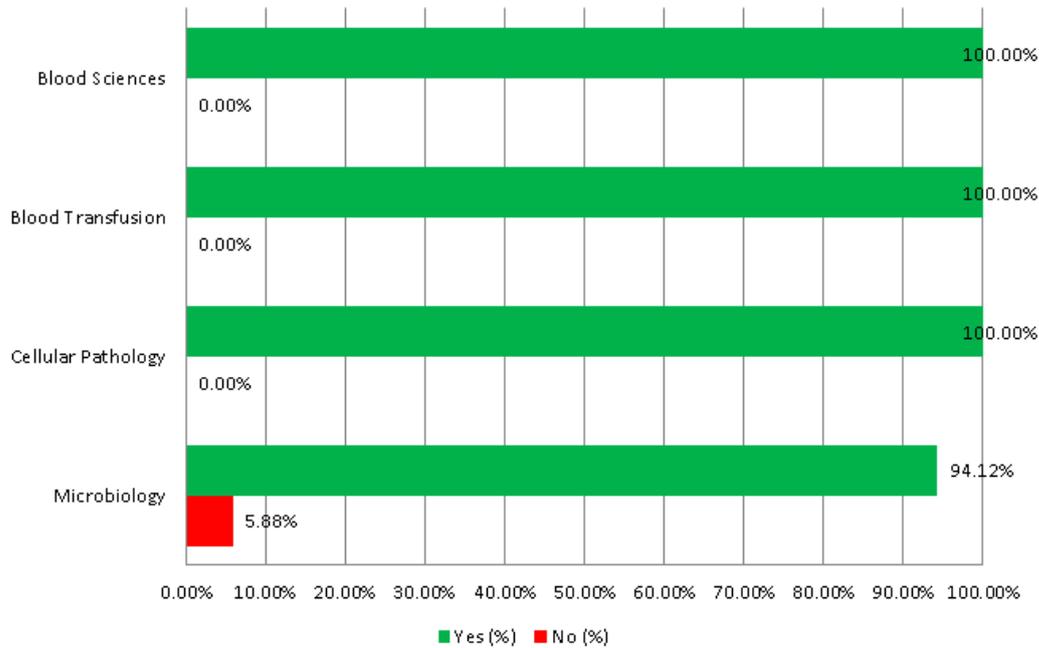


Previously, this question asked about availability and usefulness of advice, however, it was decided that separate questions should be asked relating availability and usefulness as the responses may differ. It is noted that respondents were more satisfied with the availability of advice from laboratory staff during normal working hours. Where associated comments were left, responses are detailed in the table below.

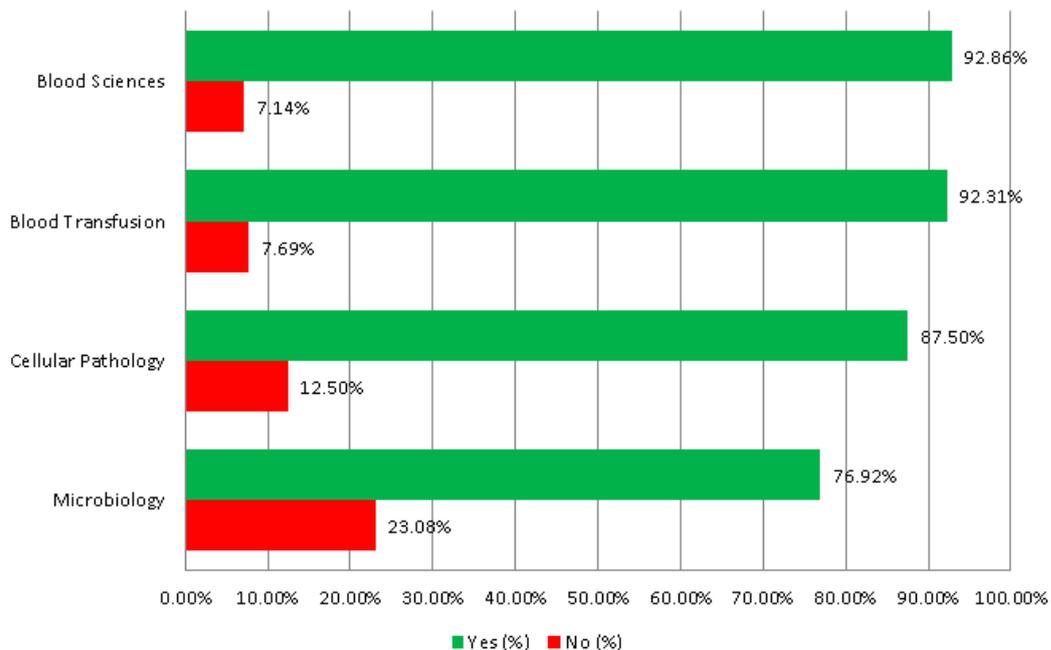
Comment	Response
I have had issues with my code for blood removal not working out of hours – on call assisted and removed on my behalf. The ward gas analyser had run out of tests and no new cartridge at ward level spoke to labs and new one easily obtained.	Thank you. The positive results have been fed back to Laboratory Managers to feed back to staff as part of staff meetings. The results have also been passed onto the Pathology Business and Service manager for inclusion in Staff Briefings. Compliments relating to individual staff members have been fed back to the individual.
Never needed to contact	Thank you for your comments. We hope that if you do need to speak to any of our laboratory staff that you are satisfied with the usefulness and availability of advice that you receive. Laboratory contact details can be found on the website.
Do not use out of hours	
I don't work out of hours.	
Don't use out of hours personally	
Sometimes difficult to get results when not enough scientists available	We strive to report results as soon as possible after receiving them in the laboratory. Please contact us with specific examples so we can investigate.
Generally yes but it's not clear to me who/how I should contact someone to discuss a result e.g. an unusual bio hem test	If Clinical advice is required out of hours there is an on call clinician contactable via switchboard.
I think that under the current pressure the department have been under they (where ever possible) try to report suspected cancer referrals in house and under the agreed timescale. I think we need to look at how we best use the MDT for Histology staff to maximise the time that are required to attend to ensure they are available to provide the best outcome decision making for the patient being discussed.	Thank you for your comment. The Department aim to support all the MDTs to provide the best outcome for the patient. We will take your comments on board and feed this into the Cancer Services Team for consideration.
Cell path takes a bit longer in reporting.	The Cellular Pathology Department monitor turnaround times on a monthly basis against defined RCPATH and Screening targets. Generally the target is that 90% of cases should be reported within 10 calendar days. 2 nd opinions, molecular testing and referrals for MDT may take a little longer as these will be sent off site for reporting. If you have any specific examples of please could you contact the Cellular Pathology Department that we can investigate.

Question 15: Are you satisfied with the usefulness of advice and assistance provided by laboratory staff?

In Normal Working Hours?



Out of Hours?

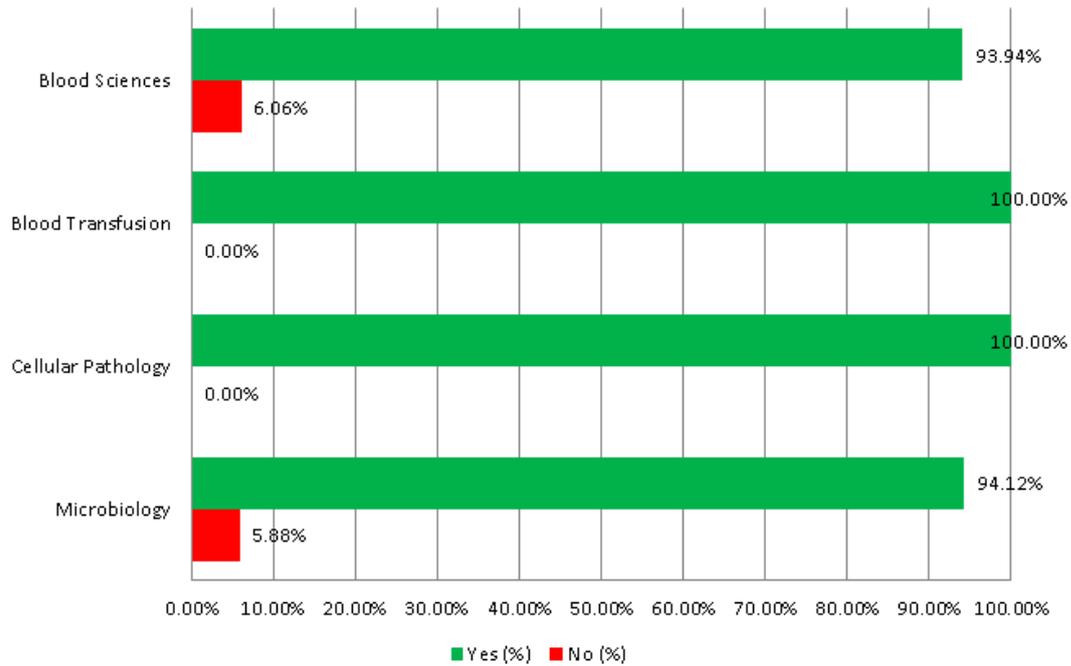


As per Question 14, it is noted that respondents were more satisfied with the usefulness of advice from laboratory staff during normal working hours. Where associated comments were left, responses are detailed in the table below.

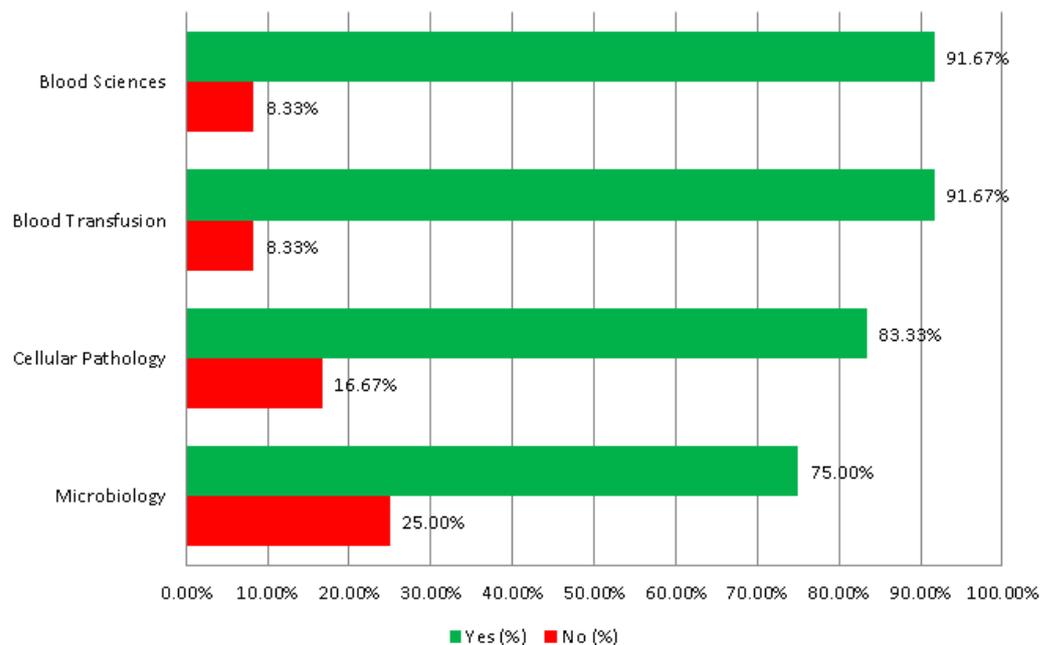
Comment	Response
Blood transfusion advice is always clear. I have dealt with several members of staff and they are always patient and understanding, especially when a we call and are not familiar with a particular blood product Yes	Thank you. The positive results have been fed back to Laboratory Managers to feed back to staff as part of staff meetings. The results have also been passed onto the Pathology Business and Service manager for inclusion in Staff Briefings. Compliments relating to individual staff members have been fed back to the individual.
Never needed	Thank you for your comments. We hope that if you do need to speak to any of our laboratory staff that you are satisfied with the usefulness and availability of advice that you receive. Laboratory contact details can be found on the Pathology Website.
I don't work out of hours.	
Cellular Pathology rarely used	

Question 16: Are you satisfied with the availability of advice and assistance provided by Clinicians?

In Normal Working Hours?



Out of Hours?

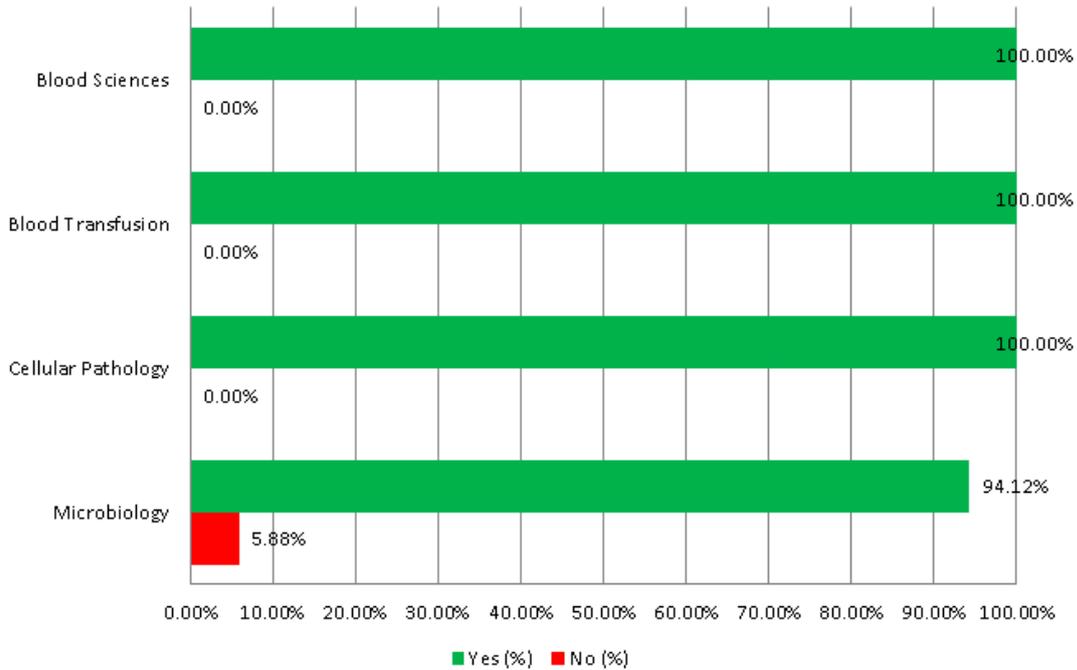


Previously, this question asked about availability and usefulness of advice, however, it was decided that separate questions should be asked relating availability and usefulness as the responses may differ. As with Question 14 regarding availability of laboratory staff, It is noted that respondents were more satisfied with the availability of advice from Clinical staff during normal working hours. Where associated comments were left, responses are detailed in the table below.

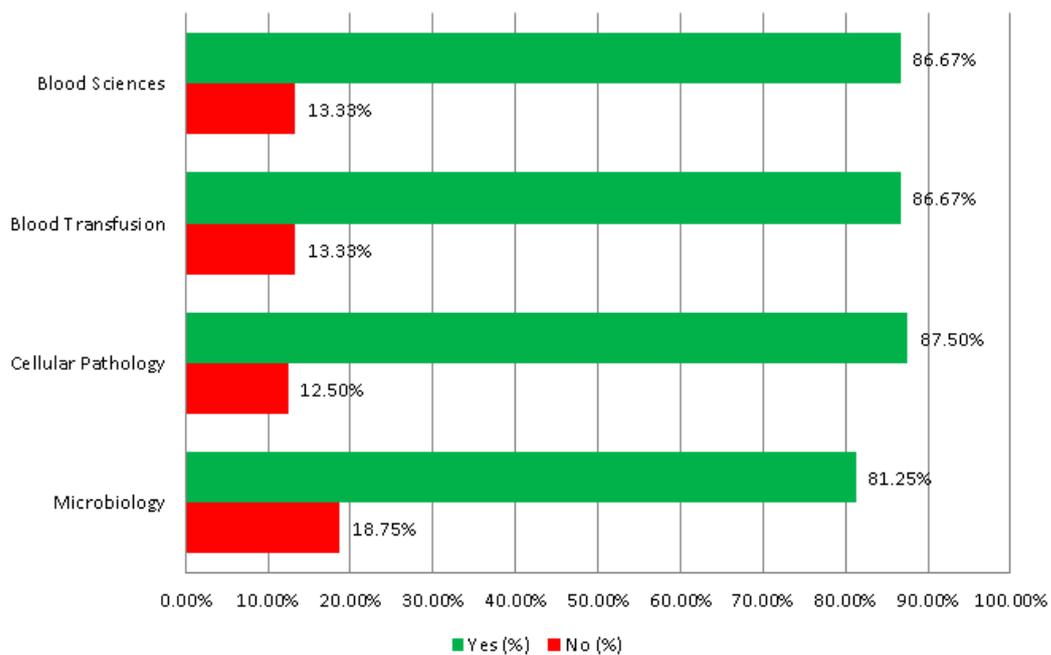
Comment	Response
Never needed	Thank you for your comments. We hope that if you do need to speak to any of our laboratory staff that you are satisfied with the usefulness and availability of advice that you receive. Laboratory contact details can be found on the website.
I don't work out of hours.	
I have only called the Microbiology consultant once, but I did not get the help I needed. The consultant did not give any useful advice and seemed reluctant to comment on my issue - a needlestick injury. Cellular pathology doctors are helpful. Blood sciences consultants are also fairly understanding, however the lab staff are often more than able to deal with any issues I have.	Thank you for your comments. We are sorry that you were unable to obtain the information you required, the consultants on-call are often busy being single handed and covering two Trusts, information is also available either on the trust web site, the antimicrobial policy or the Microbiology pages. Needlestick injuries are managed by Occupational health, and they should be contacted to arrange any follow ups required.

Question 17: Are you satisfied with the usefulness of advice and assistance provided by Clinicians?

In Normal Working Hours?



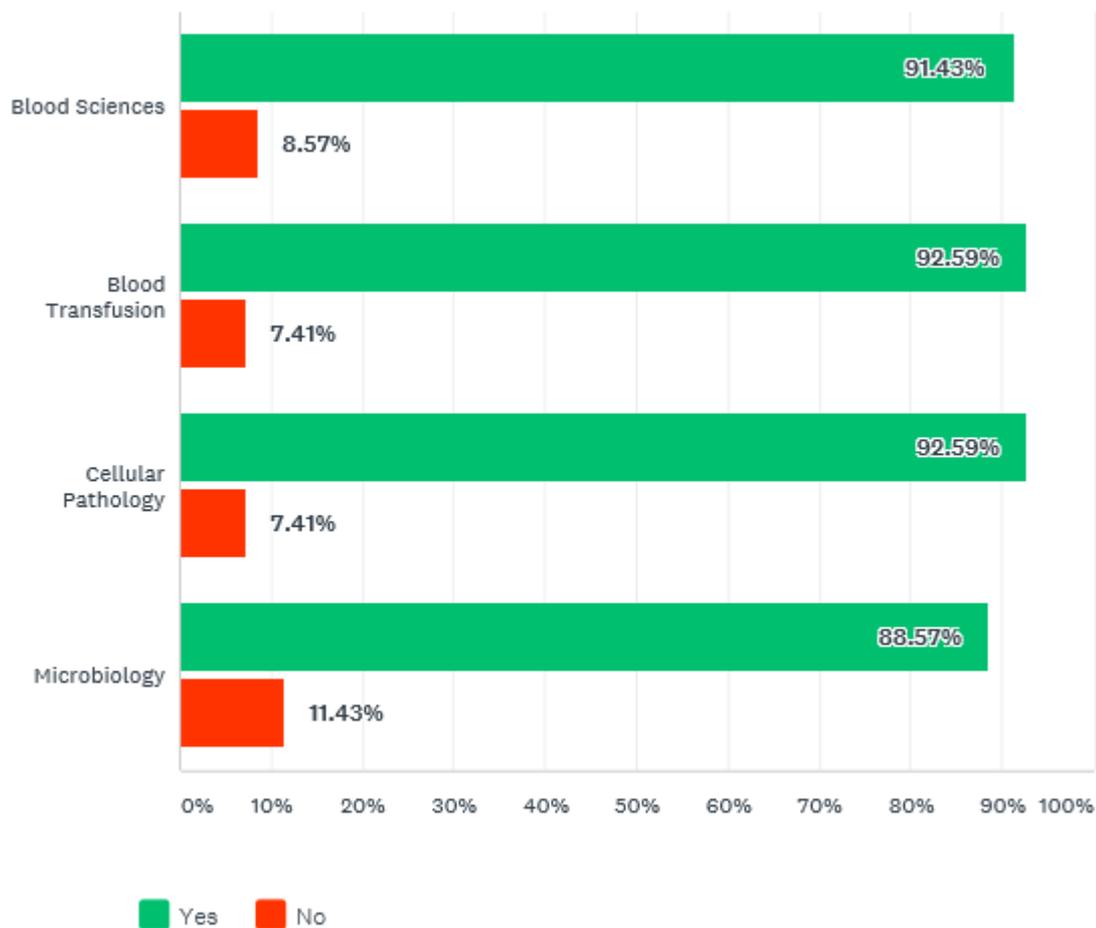
Out of Hours?



As per Question 16, it is noted that respondents were more satisfied with the usefulness of advice from laboratory staff during normal working hours. Where associated comments were left, responses are detailed in the table below.

Comment	Response
I have answered yes - I do think this could have been a maybe. I sometimes believe that we can double report samples (when not necessary) and therefore this can add delay into the pathway. However working on the wider centralisation and specialisation of reporting with the ICS will really improve this workload and patient journey.	Thank you for your comments.
There has been problems with not knowing how to process a maternal sample for a neonate whose mother was in Hull and embrace had brought a fully labelled sample from there.	Please contact the Blood Transfusion laboratory if you wish to discuss further.
Never needed	Thank you for your comment. We hope that if you do need to speak to any of our laboratory staff that you are satisfied with the usefulness and availability of advice that you receive. Laboratory contact details can be found on the website.

Question 18: Are you satisfied with the report turnaround times?

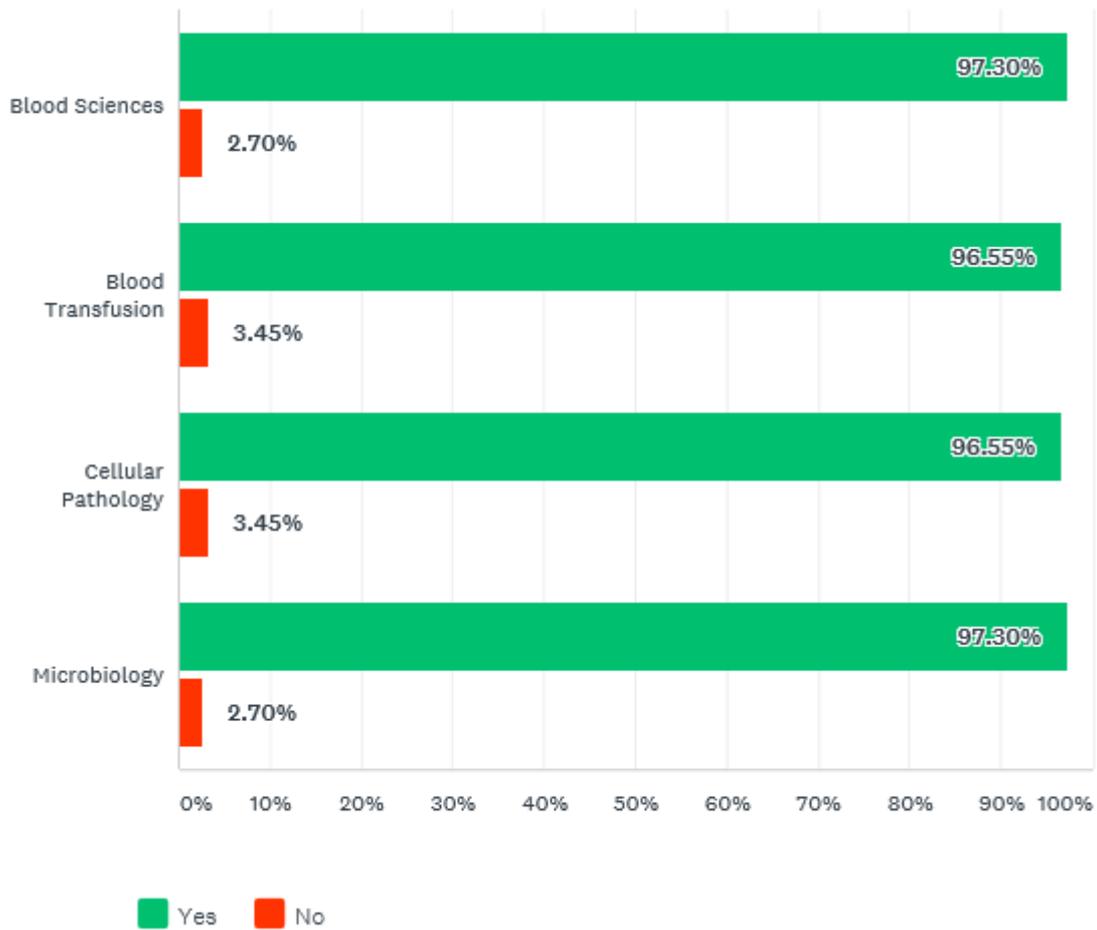


92% of respondents were satisfied with the turn around times for Blood Transfusion and Cellular Pathology, which is comparable to 2019. 88.57% & 91.43% of respondents were satisfied for Blood Sciences & Microbiology respectively, which is improved on the results of the 2019 survey where this was 80%. Where associated comments were left, responses are detailed in the table below.

Comment	Response
Most of the time yes. Sometimes at clinics it can take.	Thank you for your comment. We are pleased that you feel our turnaround times are good.
If any reports are unavailable on ice, secretaries always very helpful in getting reports signed and onto ice Under the pressure I think the team cope extremely well with the demand. I do believe the accuracy of requesting will improve the TAT	Thank you for your compliment this has been fed back to Laboratory Managers to feed back to staff as part of staff meetings. The results have also been passed onto the Pathology Business and Service manager for inclusion in Staff Briefings. We agree that accurate requesting and inclusion of relevant clinical details will help us to process your request.

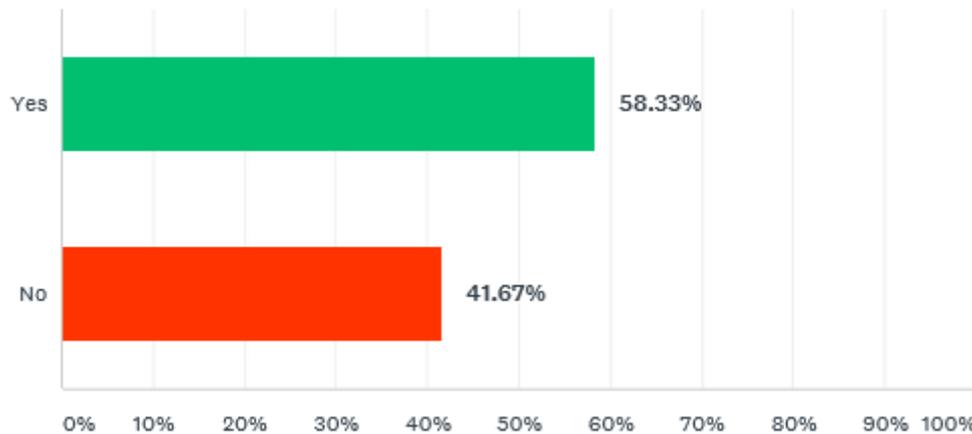
Too long	Thank you for your comment. Please appreciate that different tests take different lengths of time to process. Turnaround times are available on the Pathology Website. If you are concerned about a specific test, please contact the laboratory with examples to allow us to investigate.
Could occasionally be quicker in emergency	
Had some incidents of very long waits for things like clotting, leading to delays in urgent interventions	Thank you for your comment. We have systems in place to prioritise urgent requests. Please report delays to the Laboratory for investigation.
Flu swabs sometimes take a long time	Please note that flu swabs have previously been sent to a referral laboratory and have therefore taken slightly longer. Point of care testing for flu is available in ED and is now also available in the laboratory, so TAT will be reduced going forward. Turnaround times are available on our website.
Long waits for PCR lead to extended courses of antibiotics and/or acyclovir and admissions even after discussion and sometimes multiple cannulation attempts and trauma for the patient.	Please note that these tests are currently referred to other laboratories and therefore may take longer. However we are currently in the process of setting up this test in-house so results will be available on the same day by the end of 2020. All turnaround times are available on the Pathology website.

Question 19: Are you satisfied with the report content, clarity and interpretive comments?



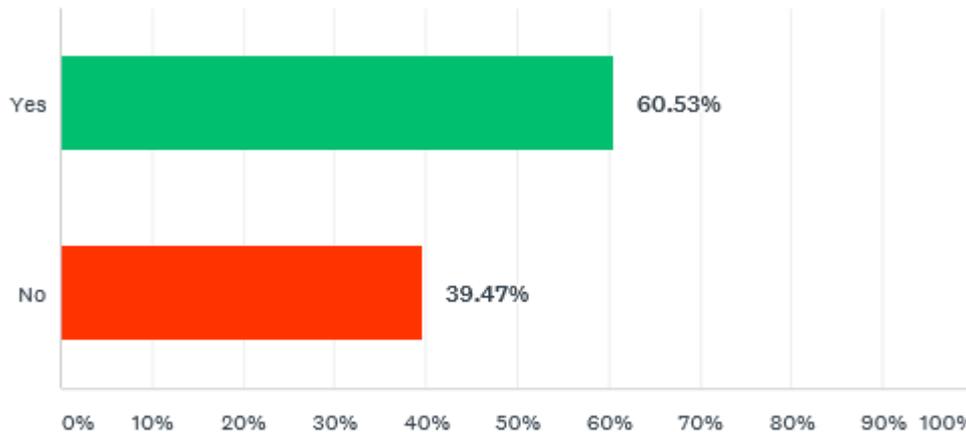
More than 96% of respondents were satisfied with the report content, clarity and interpretive comments in all disciplines. This is comparable to 2019.

Question 20: Are you aware of the criteria by which samples are accepted or rejected in Pathology?



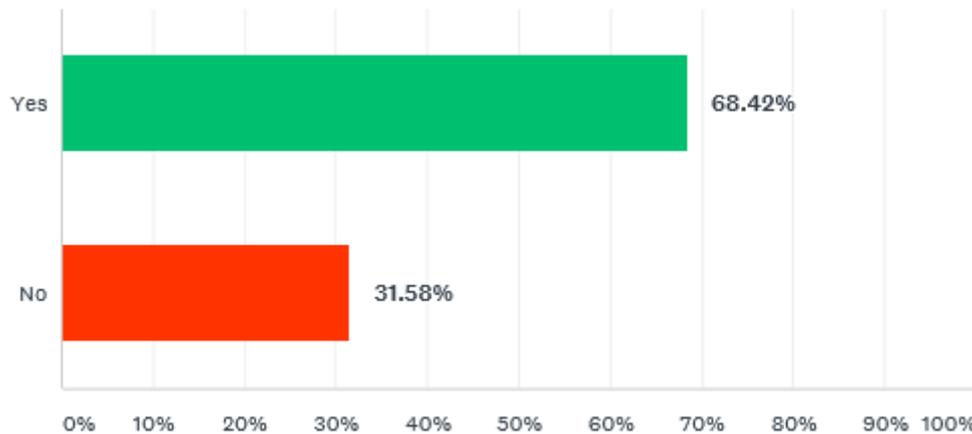
This question was designed to determine the awareness of sample acceptance in Pathology for Biochemistry, Haematology, Cellular Pathology and Microbiology and determine the need to provide further education about minimum criteria for sample acceptance. A hyperlink to the Sampling and Request Labelling page of the Pathology Website was included in the survey question to raise awareness of the criteria. 41.67% of respondents were not aware of the minimum sample acceptance criteria, which is an increase on 2019. Further information has been made available to the clinical areas over the last year, however, it is clear that further education regarding Pathology Sample Acceptance and the rationale for this. Please note that a minimum data set is required to ensure full patient identification in the laboratory. The laboratory receives a large number of samples on a daily basis, and it is paramount that the laboratory ensures full traceability of the sample to the request, and to the patient record.

Question 21: Are you aware of the criteria by which samples are accepted or rejected in Blood Transfusion?



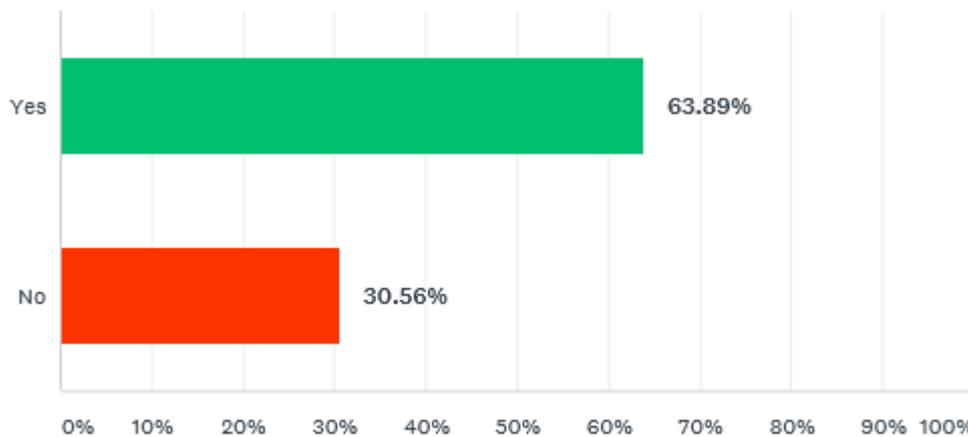
This question was designed to determine the awareness of sample acceptance for Blood Transfusion and determine the need to provide further education about minimum criteria for sample acceptance. A hyperlink to the Sampling and Request Labelling page of the Pathology Website was included in the survey question to raise awareness of the criteria. The sample acceptance criteria for Blood Transfusion is more stringent than for the rest of Pathology due to BSQR requirements. 39.47% of respondents were not aware of the minimum sample acceptance criteria. Information has been made available to clinical areas via communications, the Pathology Website and Trust inductions, however, this response suggests that further education of clinical staff is required.

Question 22: Are you aware of the reasons for the check group two sample rule in Blood Transfusion?



The two sample rule was implemented based on BSQR guidance to improve patient safety and reduce the incidence of wrong blood in tube events. This question was added as in communications with users, and in the response from the 2019 user survey, it was noted that the two sample rule could be a source of frustration for clinical staff members and that these staff members perhaps did not understand the reason for the implementation of this process. A hyperlink to the relevant page of the website was included in this question in an attempt to provide further education to users. 31.58% of respondents did not understand the reasoning for the check group two sample rule. Although previous attempts have been made to educate clinical staff about this, further education to clinical staff is required.

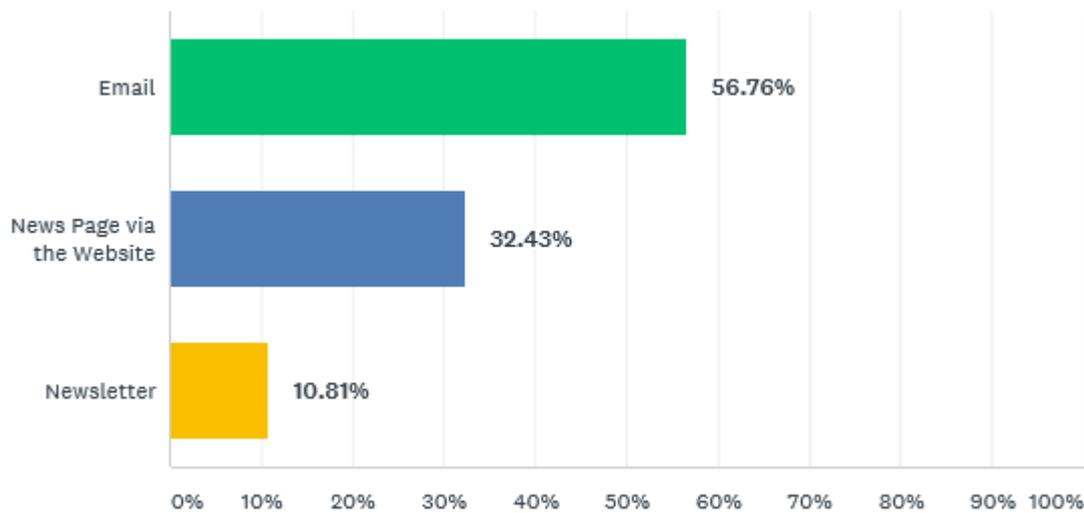
Question 23: Is laboratory news and updates communicated effectively?



30.56% of respondents did not feel that laboratory news and updates were communicated effectively. This is an improvement on 2019 where 54.55% of respondents did not feel that updates were communicated effectively. The laboratory is keen to improve communications to users.

Comment	Response
Can't say I hear much news/updates on lab news.	The laboratory is keen to improve communications to users and will be using the information from Question 24 of the 2020 user survey to determine how best to implement a regular communication.
Do not usually get updates. Made aware of 2 sample rule at recent teaching.	
Not sure	
It would nice to know more about the Pathology laboratories so we could understand the work process a little better	Procedures are in place to communicate any urgent issues via Trust Communications.
Not sure	
When attendance at Trust Ops this really helps	Pathology Management representation will continue at Trust Ops to provide regular updates.

Question 24: How would you like to receive communications from us?



A majority of respondents (56.76%) stated that they would rather receive communications from the laboratory via email, 32.43% via the website and 10.81% via newsletter. The laboratory is currently investigating setting up a regular email newsletter to users.

Question 25: Do you have any comments to improve the service we provide?

Comment	Response
I understand cross matches etc. but not any restrictions on other blood science/biochemistry samples.	<p>Please note that a minimum data set is required to ensure full patient identification in the laboratory.</p> <p>The minimum data set for patient identification includes: surname, forename, date of birth, hospital or NHS number. The laboratory receives thousands of samples on a daily basis, and some patients may have the same name as each other. Therefore, this information is required to ensure full patient identification and traceability of the sample to the request and to the patient record.</p> <p>Requesting clinician and requesting location are required to ensure that the result is sent back to the requestor as soon as it is available. The requestor must take responsibility to act upon the patient result. This information is also required to ensure that the laboratory can contact the requestor as soon as possible in the event that a critical/unexpected result requires telephoning to the requestor.</p> <p>Clinical details are required to ensure that the sample is processed appropriately, and that appropriate comments are added to the result.</p>
Please can we have someone on site to deal when pods are broken. We are a Haematology ward and blood samples need to be taken frequently.	The pod system is managed by Estates. Your suggestion has been passed on to the Estates team.
Centralisation of Reporting Electronic Requesting Smoother Escalation Attendance at Corporate PTL - This is something we are working towards	Thank you for your comments.
Faster turn around of PCRs would significantly improve patient experience and would reduce length of stay and treatment duration for many patients.	A recent business case has been approved and the test is currently planned to be implemented in-house by the end 2020, results for Respiratory and CSF pathogens will then be available on the same day as sample receipt.
ICE isn't very user friendly.	If you have any specific examples, please feed these back to the BRILS IT Team at bdg-tr.brils-it@nhs.net who will feed comments back to the ICE provider, CliniSys.
Utilise stickers as opposed to a4 sheet	Thank you for your comment. It is assumed that you are referring to ICE requesting as opposed to using the handwritten non-electronic request forms. Unfortunately, the laboratory is unable to change this as this is how ICE requesting within the ICE System is operated.

Comment	Response
Knowing the cost would be good - to discourage juniors and teach need study.	Thank you for your suggestion. The laboratory is currently reviewing the most appropriate way that this can be communicated to our users.
Major risk for us is results are listed without highlighting, whilst still pending	If you have any specific examples, please feed these back to the BRILS IT Team at bdg-tr.brils-it@nhs.net who will investigate.
Generally very helpful. A few tweaks would make it even better.	Thank you for your comment.

Question 26: Have you had any positive experiences with the service that you would like to feed back?

Comment	Response
I find the labs very helpful and am able to seek advice when needed. Thank you.	Thank you. The positive results have been fed back to Laboratory Managers to feed back to staff as part of staff meetings. The results have also been passed onto the Pathology Business and Service manager for inclusion in Staff Briefings.
I feel staff are always helpful, we appreciate delays happen and there is normally a good reason.	
As already mentioned. The team have experienced staffing shortage over a prolonged period of time. During one extreme period one of the service lead at the time <staff member name> produced a timetable for reporting of slides and attendance at MDT on a rolling week period. This was helpful to manage the clinical teams within the MDT. It also help the trackers and MDT coordinators know who to contact for support.	Where positive comments are specific to individual staff members/departments, these staff members have been made aware.
Good recent teaching from transfusion department.	
Good labs + transport. ICE is a problem.	
Often communicate with the blood sciences labs. No issues (ever), very helpful team who are happy to help.	
I find the pathology staff across all disciplines to be very professional and helpful	
Dr. <staff member name>	