

Pathology User Survey Report 2024

VERSION No	1.0
DATE OF ISSUE	08/08/2025
REVIEW INTERVAL	1 Year
AUTHORISED BY	N Manzoor
AUTHOR	T Carey
COPY	One
LOCATION OF COPIES	1. Q-Pulse™

Authorisation		
Issue Date	Authorised By	Signature
08/08/2025	N Manzoor	Via Q-Pulse™

Table of Contents

1 Aim 3

2 Methodology 3

3 Responses 3

3.1 Participant Locations 14

3.2 Participant Roles 14

3.3 Visit Requests 14

4 Plans 15

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 web site and a message was emailed to all heads of service, matrons and ward managers across the Trust as well as practice managers within BSW ICB Swindon GP surgeries requesting participation in the survey. Pathology staff have been encouraged to add a link directing individuals to the survey attached on their email signatures. In addition, this year, a QR code was created. The QR code has been added to email signatures of Pathology management and is also accessible from the Trust intranet page.

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 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

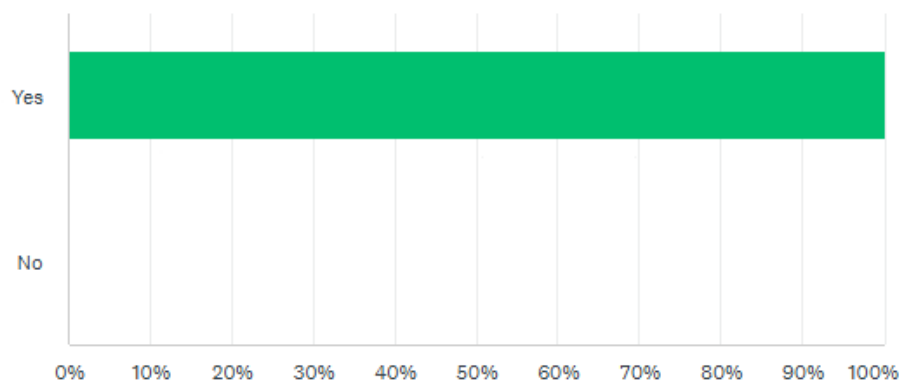
In January 2025 results of the survey were collected for the period of 1st January 2024 and 31st January 2025. A focussed survey was sent out November 2024 which included questions regarding the use of point of care. Data from responses collected between December 2024 and 30th January 2025 have been included within this report.

During 1st January 2024 and 31st January 2025, a total of 55 responses were collected with 49 of these collected during the November 2024 focus survey. This was a marginal increase on last year. Responses have been received from both GP practices and locations from within the Trust. There remains a good rate of additional commentary and a reduced number of skipped questions.

A total of 18 individuals responded when asked if they would like to arrange a meeting with the Pathology Quality and Customer Engagement Manager, 5 replied with a positive response. Where possible, this will be followed up.

Q1. Staff are Polite and Helpful.

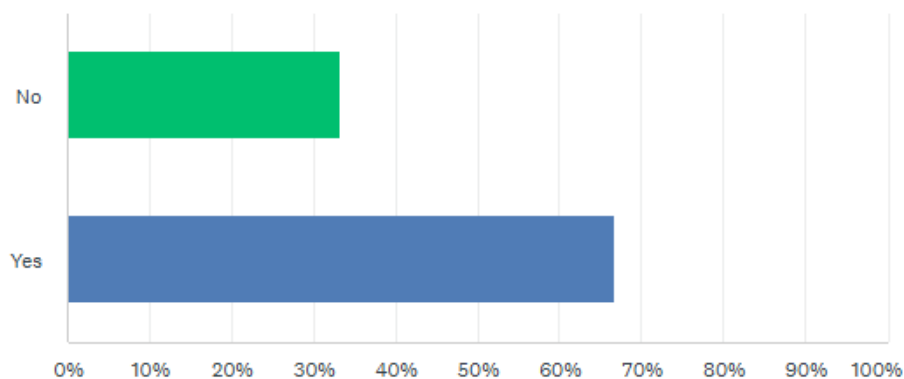
Answered: 55 Skipped: 0



A total of 55 individuals answered this question during the reporting period with 100% of respondents agreeing that staff were polite and helpful. This is an improvement of 8% on the 2023 survey responses.

Q2. Service User Handbooks are Easily Accessible?

Answered: 48 Skipped: 7



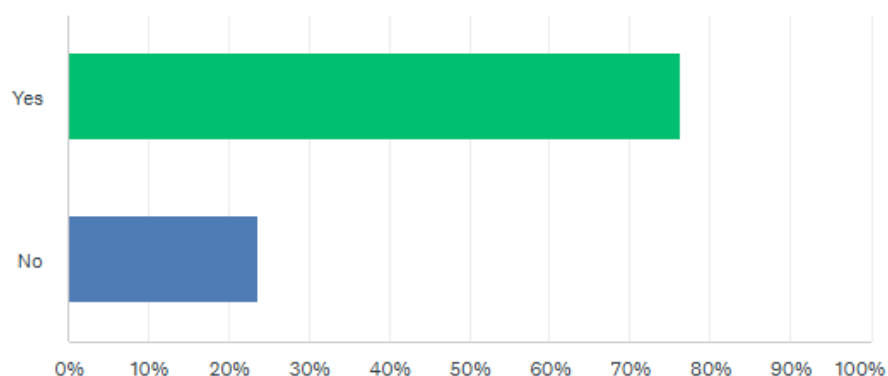
48 service users responded to this question over the reporting period with 7 skipping. Of the feedback received, 67% agreed that user handbooks were accessed easily (a 4% drop compared to last year) and 33% stated that this was not the case which has marginally increased since the last survey report. Handbooks are available on both the Trust website under the Pathology section and on the Pathology intranet pages which are available to all GWH service users.

During 2023 there has been a significant period of downtime to the Trust intranet due to it being upgraded which may provide some explanation for the decline in positive feedback. Whilst the documentation was available to users updates to the information was kept minimal whilst the upgrade took place.

Q3. Laboratory Contact Details are Easy to Find when Required

All respondents (55) answered the above question and provided overall positive feedback with 76% confirming that contact details for the laboratories are easily located. This is a decline of 11% compared to the last report. 24% of individuals raised that this was not the case. Contact details are available to users on the Trust Pathology web page and the Trust intranet however again, it is noted that the details on the intranet page may not have always been up to date during the system down time for upgrade.

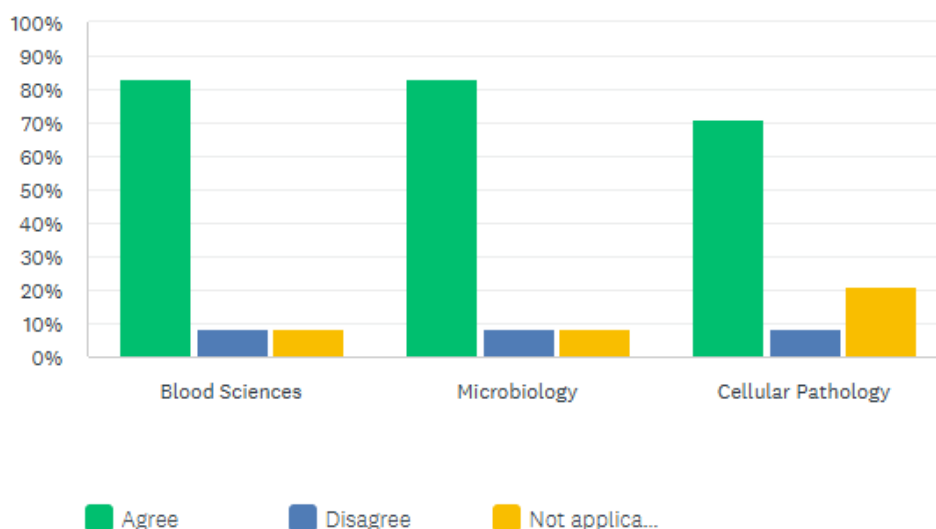
Answered: 55 Skipped: 0



Q4. Sample Requirements are Clearly Indicated

48 individuals answered this question during the reporting period and 7 skipped responses. Overall, feedback was positive with all services receiving responses that agreed with the previous report results.

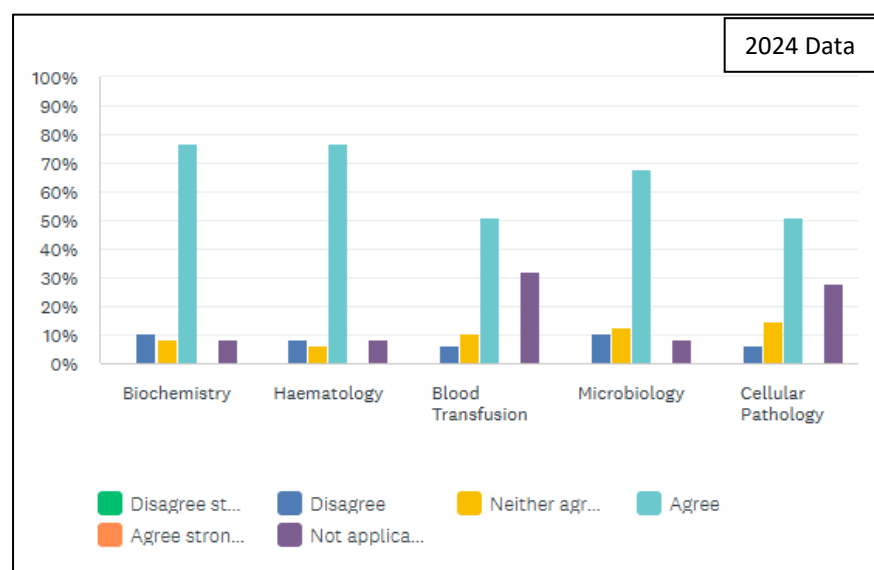
Answered: 48 Skipped: 7



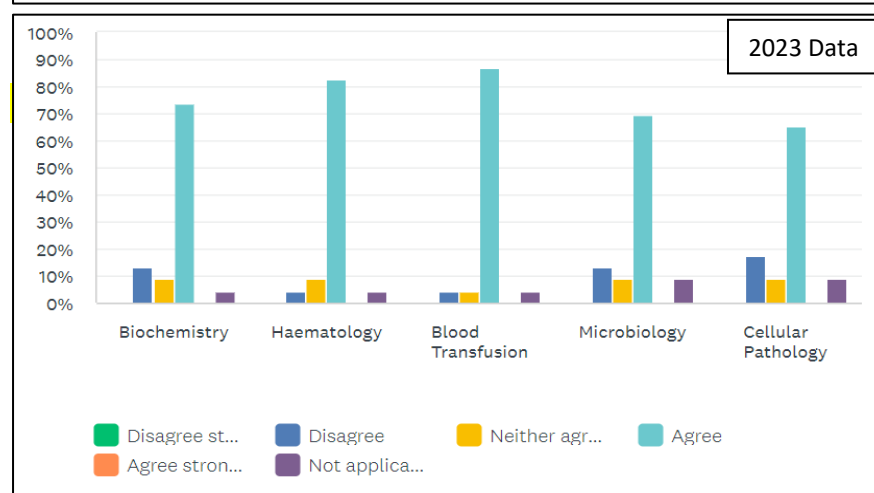
A small number of negative responses were received (4 responses across disciplines). When asked to support with commentary the following was noted:

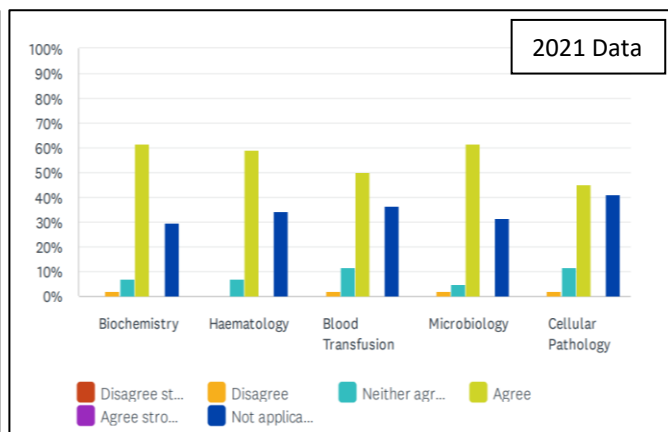
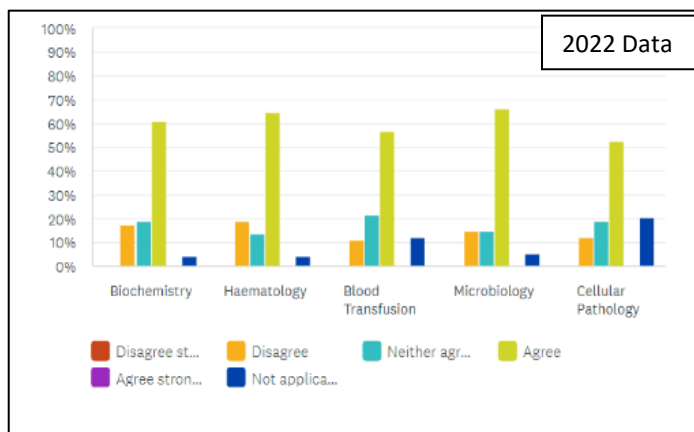
- “Particularly for paediatric samples, the info on the label may not match with the specimen requirements- made even more complex in the case of investigations we don't run routinely. I'm keen to set up more paed order sets- feel free to email me, wendy.mccay@nhs.net Thanks!” (Wendy, Paeds ED consultant). (SF-62-025)
- “When we want a specific test ,it is not easy to find in ICE request” (AMU Consultant). (SF-63-025)
- “There is constant confusion about the blood bottles needed for certain tests - most specifically lupus anticoagulant, B27; cryoglobulins” (Elizabeth Price, Consultant, Rheumatology). (SF-64-025)
- “Samples are lost frequently or not processed on time and hence discarded as the pathology reception missed to notify lab for urgent processing, despite clear information on the ICE mob request and handing the samples to the reception in person, highlighting the urgency” (Consultant,GWH). (SF-64-025)
- “SOME OF THE BLOOD FORMS (HANDWRITTEN) ONES ARE ILLEGIBLE, HANDWRITING AWFUL :(“ Old Town Surgery).
- “Confusing to know which box to tick sometimes no vitamin d or magnesium” (GP, Kennet & Avon Medical Practice).(SF-65-025)

Q5. Results are reported in a reasonable timeframe

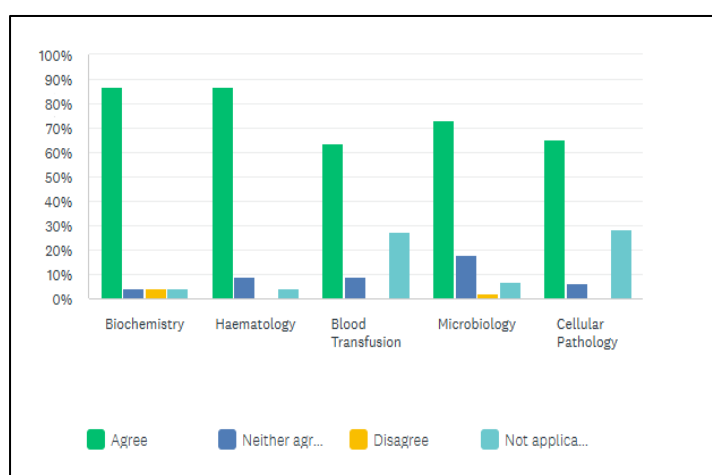


47 participants provided feedback during the reporting period. Primarily, respondents are satisfied with the timeframe for reporting. Cellular Pathology and Blood Sciences are noted to have an improvement in positive response received this year. No additional commentary was provided to explain negative responses.



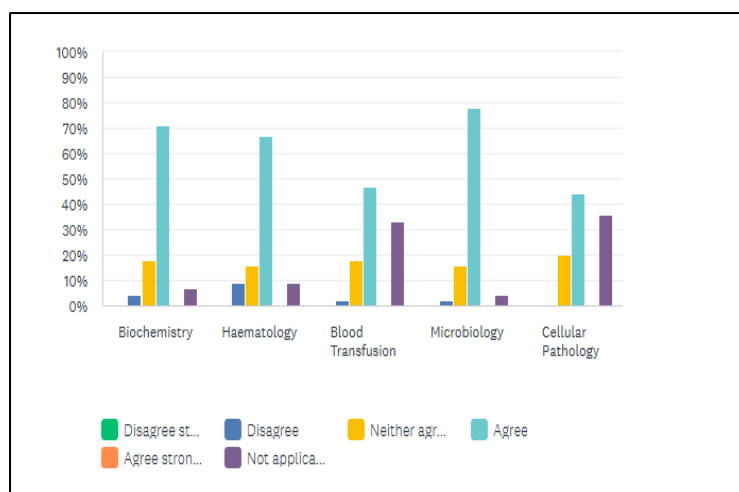


Q6. Report is clear and concise



Overall, all specialities saw an increase in positive response with 75% stating that they agreed reports were clear and concise. This data is a 10% improvement on previous years. Minimal responses provided were negative (<4%).

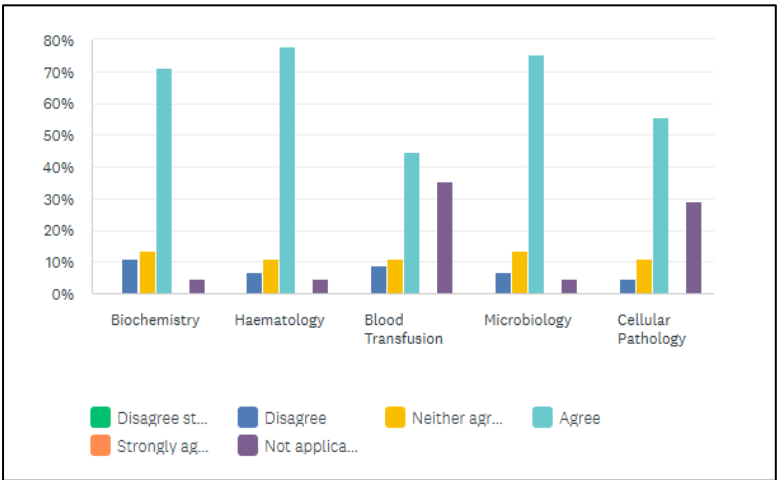
Q7. Clinical advice is readily available from the laboratory when needed



45 individuals chose to provide response. 61% agreed that clinical advice was readily available when required. This data has improved by %when compared to last year. The number that disagreed has decreased to 4% compared to 15% seen in the previous period.

The option to provide additional commentary against the question was not available to help identify reasons for the responses.

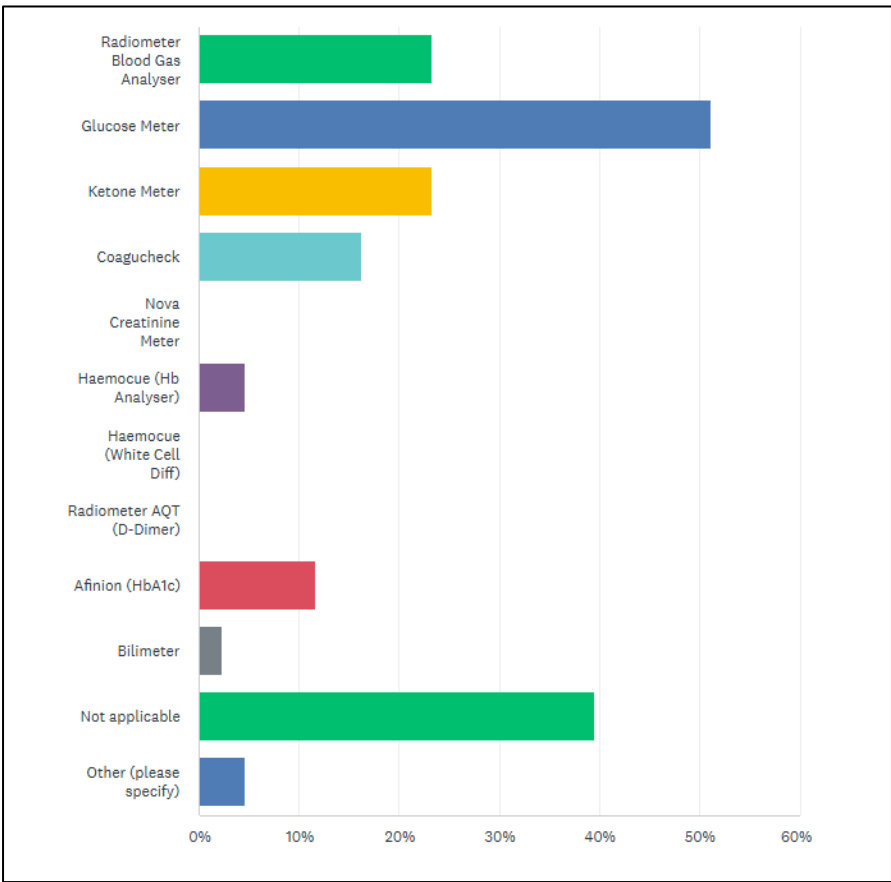
Q8. The format of request forms is user friendly and meet requirements



45 individuals provided response. The number who disagreed with the statement decreased to an average of 8%, a marked improvement on last year where 45% reported that they disagreed with the same statement. An average of 65% of respondents across Pathology services provided a positive response notably with biochemistry, haematology and microbiology laboratories reporting >70% in agreeance.

The option to provide additional commentary against the question was not available to help identify reasons for the responses.

Q9. What Point of Care equipment do you routinely use? Please select all that apply



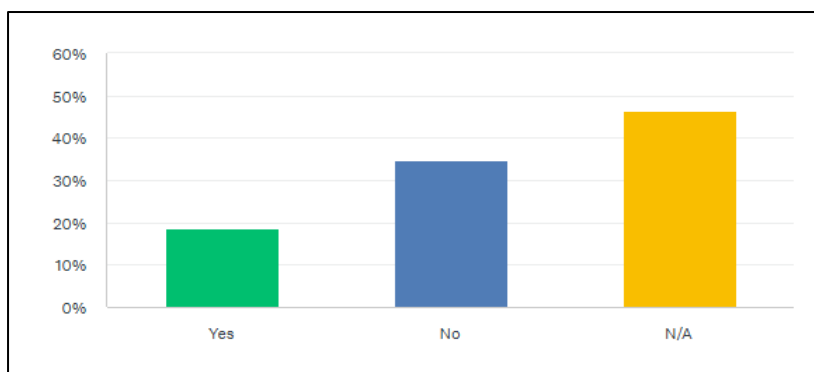
Radiometer Blood Gas Analyser	10
Glucose Meter	22
Ketone Meter	10
Coagucheck	7
Nova Creatinine Meter	0
Haemocue (Hb Analyser)	2
Haemocue (White Cell Diff)	0
Radiometer AQT (D-Dimer)	0
Afinion (HbA1c)	5
Bilimeter	1
Not Applicable	17
Other (please specify)	2

HIV tests and pregnancy tests

Not hospital issued

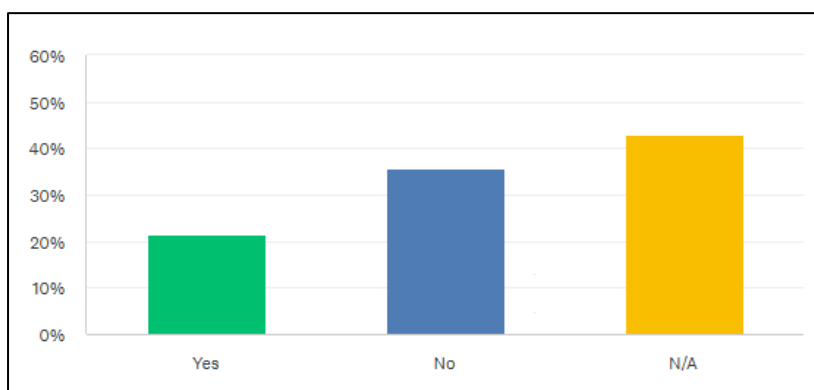
Added to the annual survey during 2023, this question aims to gain an understanding of the types of point of care equipment our service users currently use. Response was positive with 43 responses collected and the above equipment noted.

Q10. Do you have a specified POCT Key User?



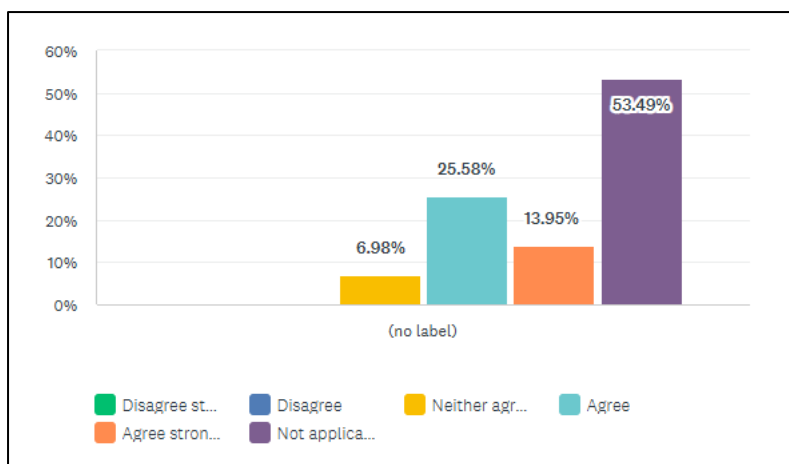
A total of 43 responses were collected this year compared to 18 last year. Variance in having a designated POCT Key User was noted.

Q11. Do you feel that further guidance would be beneficial regarding Point of Care?



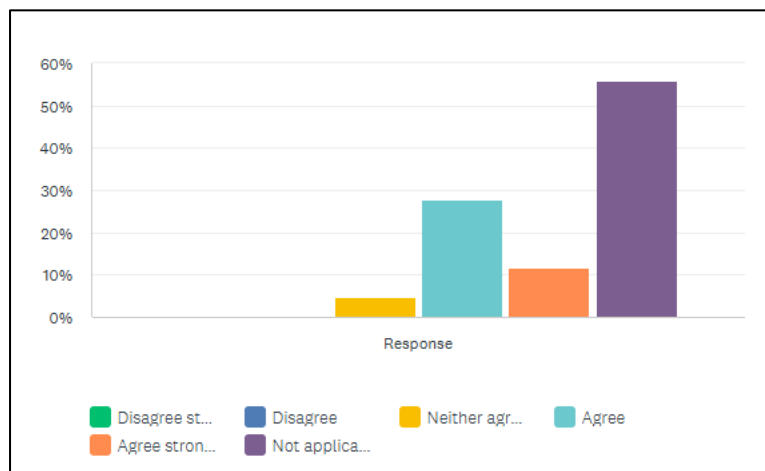
21% (↓4% from last year) of respondents highlighted that they felt further guidance would be of benefit and a further 35% stated that further guidance was not required compared to 49% during the last survey.

Q12. MORTUARY & BEREAVEMENT SERVICES: Staff are knowledgeable and deal with enquiries in a professional manner.



43 individuals responded to this question and 12 skipped. 39% agreed that staff were knowledgeable and professional. No negative responses were received. Feedback has been provided within the survey regarding confrontational behaviour, please see below.

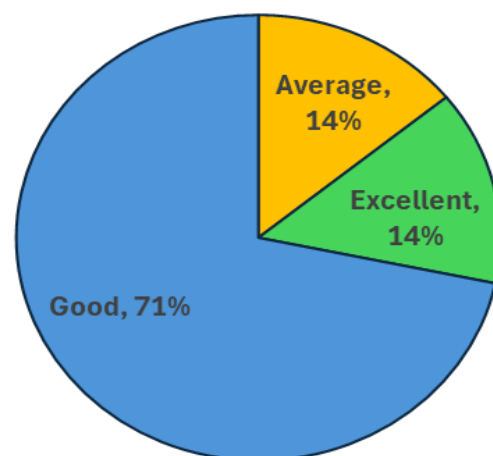
Q13. MORTUARY & BEREAVEMENT SERVICES: Administration is dealt with in a timely manner.



43 individuals responded to this question. 40% agreed that administration was dealt with in a timely manner, a decrease compared to the previous survey. No negative responses were received.

Q14. How would you rate Pathology services overall?

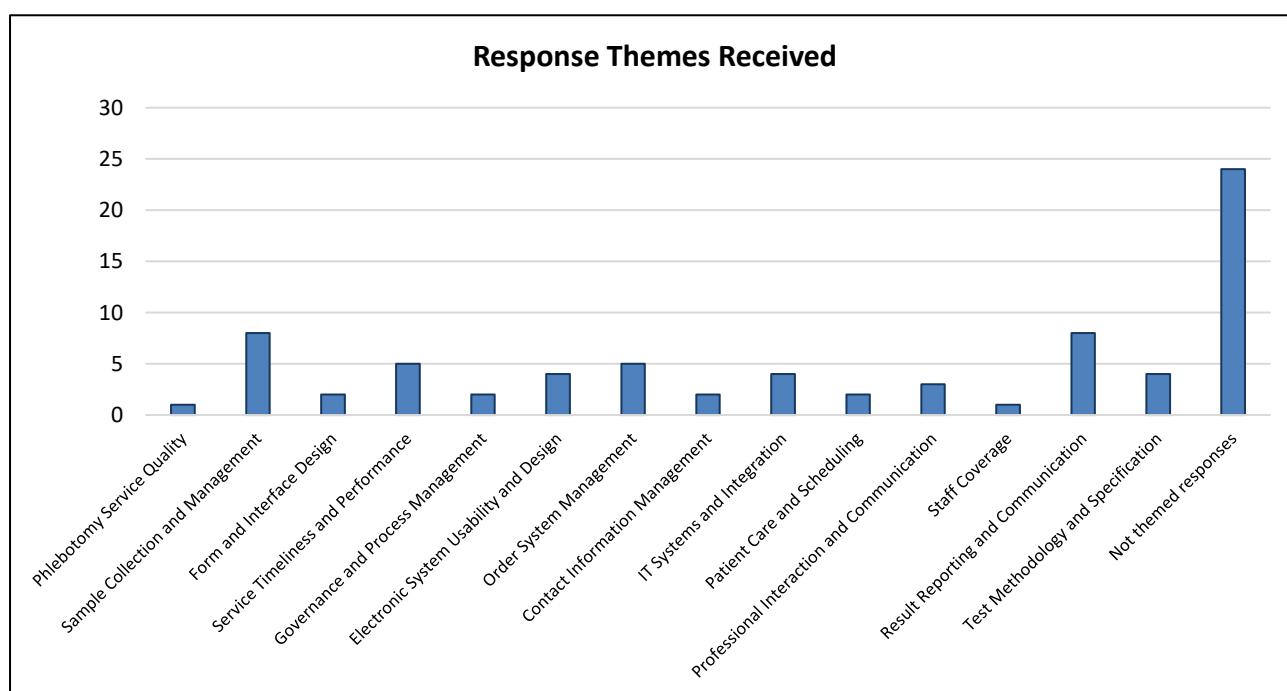
Only 42 respondents answered this final question. Compared to 24 last year. In total, 14% stated that they felt the service was excellent which is slightly lower than previous (21%). 14% stated that the service was average which is comparable to the previous report and 71% (30) individuals reported that the service provided was of a good standard, an improvement on the previous report (63%).



No negative responses were documented.

Q15. Are there any improvements that you would like to see in the service provided?

A total of 24 responses were received. Key themes have been determined from responses received:



All feedback below has been added to our Quality Management System, QPulse as “Service User Feedback” and assigned a record number (this has been recorded against each comment below). Each record within QPulse has been allocated to the most appropriate individual within the Pathology Services department to respond and where necessary, follow up. Responses to the feedback received will be shared on our Pathology intranet page and in a 2nd revision of this document which will be uploaded to the Trust web page and the intranet page ensuring accessibility to all service users.

1. ***“More phlebotomy rounds for inpatient”*** Doctor, Trauma Unit, GWH
2. ***“Lab staff are superb and always willing and helpful. Delays in reports are usually due to how busy the service is, staff are working really hard. Paper forms should be a last resort, only used in time of power cut or system crashes but ICE mobile needs to be much more user friendly. ICE classic is easy to navigate and request on. ICE Mobile has too many useless features and extra 'checks' like repeating the hospital number that don't necessarily help prevent errors or keep patients safe. More order sets would be useful, happy to work on this with the team if that would be helpful. :-)”*** – Consultant, Children’s Emergency Unit, GWH. (SF-36-025)
3. ***“Better forms for cell path requests”*** – Consultant Surgeon, GWH . (SF-37-025)
4. ***“Thanks! Excellent job! Always try to be helpful.”*** –Consultant, ED, GWH . (SF-38-025)
5. ***“Summer D’Kadik is amazing and we need more staff like her, she is so responsive to questions and so helpful, it is very obvious when she goes on leave as no-one seems to cover her work or reply to the serology e-mails. Please can we clone Summer!? We have been trying for 2 years in Sexual Health to set up Lillie order comms. We have been paying for the module that is currently not working. This is mainly an IT issue but it would be great for all of us if we could get this up and running to reduce the amount of results errors we get working with a half paper and half electronic system”***- Consultant, Sexual Health (SF-39-025)
6. ***“Well done to all the cell path team- especially Dr Lazic :) some amazing patient care in the past few days”***. Consultant, Radiology, GWH (SF-40-025)
7. ***“To facilitate some of the request of test:yesterday we could not find specific test”*** Consultant, AMU, GWH (SF-41-025)
8. ***“Would like to apply POC and discussion on going for faecal claproctectin would like titre in liver auto immune screen tests”*** Consultant, Gastroenterology, GWH (SF-42-025)

9. ***“Too many samples rejected”*** Unknown (SF-43-025)
10. ***“Put results on Careflow in a timely fashion. For microbiology test the sensitivity of antibiotics used by ophthalmology rather than inferring. Culture microbial keratitis specimens for longer.”*** Consultant, Ophthalmology (SF-44-025)
11. ***“Some info on how some biochemistry samples need to be taken and transported such as ammonia, CSF Protein 14-3-3”*** Consultant, Neurology (SF-45-025)
12. ***“Could we get a contact details for all lab services in one place on the department and services webpage on the intranet?”*** Consultant, Haematology (SF-46-025)
13. ***“As a consultant anaesthetist I don't often request tests, however when I do I use paper as I find the electronic system difficult to use and navigate. I find the continuous file requests on the results service extremely annoying: I am not usually a treating and test organising physician, I'm planning anaesthetic care. This filing window slows down assessing results and like I say it's not often appropriate for me to file them. Sometimes blood transfusion can be slow to put results on the system, leading to unnecessary calls. This can waste time when confirmation or group and screen is very urgently needed. Otherwise though I realise your teams work hard and provide a good service. Thank you.”*** Consultant, Anaesthetics (SF-47-025)
14. ***“Haematology clinicians often difficult to access and transfusion staff often cause delays to blood being available in timely fashion”*** Consultant, Emergency Department (SF-48-025)
15. ***“We have ongoing concerns about immunology tests in particular. the current service is poor. it is slow and and results often say pending for weeks - only for us to contact reference lab to be told either that the test was never requested, or rejected by them on 'clinical' grounds or reported by them but not transferred to careflow. Not happy with the ongoing reporting of weakly positive ANA as 'positive' generating multiple queries. We have also noted discrepancies between Southampton and oxford labs in terms of test results. We are still having requests for CCP turned down on inpatients (even when requested by rheum) and being turned down for other tests (eg BNP, FCP etc) when done by us as regarded as GP tests (given that our patients are increasingly struggling to access GP services we are increasingly having to look after them holistically. Very happy to discuss all of this Elizabeth Price Rheumatology”*** Consultant, GWH (SF-49-025)

16. ***"If a decision is made to switch off paper copies of pathology reports in the future please communicate this to the clinical teams affected by this"*** Consultant, Wren Unit ([SF-50-025](#))
17. ***"The biochemistry team is very supportive and helpful, and I could not ask for more. But the biochem reception phlebotomy (perhaps not under path service) lets us and our patient down quite frequently"*** Consultant, GWH ([SF-51-025](#))
18. ***"LATE AFTERNOON/EARLY EVENING SECOND TILLEY COLLECTION"*** HCA, Old Town Surgery ([SF-52-025](#))
19. ***"NO - ALWAYS RECEIVED EXCELLENT SERVICE PROVIDED BY PATHOLOGY DEPARTMENT GWH. HELPFUL AND POLITE 10/10"*** Abbey Meads Medical Group ([SF-53-025](#))
20. ***"Contact details - emails or more phone numbers. Summer D'Kadik is incredibly helpful, responsive, knowledgeable. and professional"*** Consultant, Swindon Health Centre ([SF-54-025](#))
21. ***"POST-INTERNAL BAG TO BE COLLECTED PM -HAS BEEN REFUSED 3 TIMES RECENTLY"***. OPS Manager, Merchiston Surgery ([SF-55-025](#))
22. ***"Software on ICE could be streamlined a little, not printing is very frustrating"*** Nurse Practitioner, The Old School Surgery ([SF-56-025](#))
23. ***"Clunky forms and results often split so multiple clicks to check everything Radiology 3 joint you'll get three reports all the same"*** GP. Kennet & Avon Medical Partnership ([SF-57-025](#))
24. ***"Stop sending results to GPs if you're not sure who requested them or took the sample. Often these patients are in hospital and it takes the GP a lot of time to try and establish that when you should be establishing it for yourselves. We recently had a set of very abnormal bloods phoned through to our practice reception at 17.30hrs and after an extensive amount of time spent trying to work out who requested and sent the bloods, we established they were done on an inpatient at Savernake hospital and the bloods had been requested and sent by the ward team. We were unable to get a response from anyone at GWH pathology to return the results so ended up (yet again) with the responsibility of doing the detective work and then notifying the ward at Savernake hospital. This is unacceptable. Also please do not routinely copy GPs into results requested elsewhere"***. GP Partner, Kennet & Avon Medical Partnership ([SF-58-025](#))
25. ***"Good service, especially Dr Patel for advice when needed - thank you."*** GP Partner, Old School Surgery ([SF-59-025](#))

26. *“Investigation into why so many neonatal samples are rejected/insufficient due to possible side effects of repeated blood samples on this patient population”* Sister, Neonatal Unit (SF-60-025)

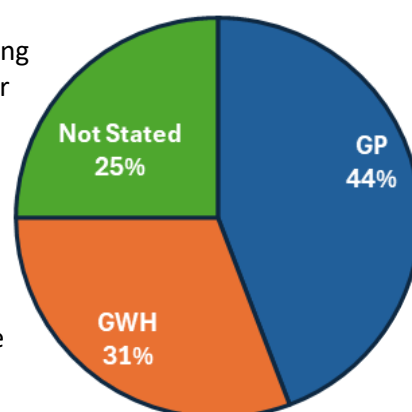
27. *“More availability on GP requests – CA19-9”* – GP Partner, Old School Surgery (SF-61-025)

Suggestions and queries have been passed to the most appropriate members of staff within the Pathology team and feedback will be provided once full review has taken place. All suggestions/ queries raised through our survey will be investigated and shared with the Pathology Management Committee for discussion during the Pathology Annual Management Review.

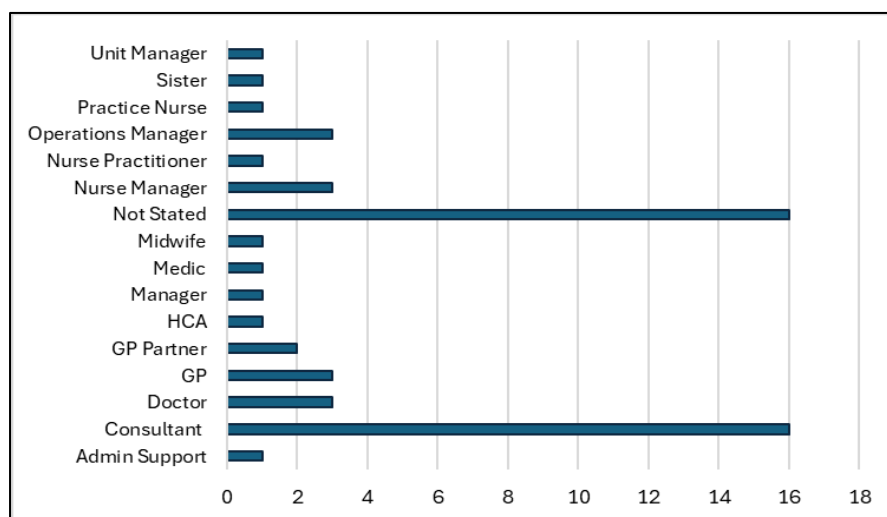
3.1 Participant Locations

Participation from GP’s increased to 44% (from 24%) during this reporting period. Similar to previous years the Pathology Quality and Customer Engagement Manager provided both digital and hard copy access to the survey this year with a mix of uptake noted.

Participation within GWH was potentially lower this year (76% last year) however “not stated was 25% so these are possible additional GWH service users. Valuable feedback has been provided by a range of service users and these will be reviewed, responded to and where possible actions taken to improve.



3.2 Participant Roles



The survey during the reporting period continues to have been completed by a range of roles both within the Trust and external service users.

3.3 Visit Requests

In total 54% of participants replied to Q16 and 5 stated that they would be happy to arrange a meeting with the Pathology Quality & Customer Engagement Manager and relevant staff to discuss your suggestions / concerns further. Wherever possible the Pathology and the Quality and Customer Engagement Manager will attempt to contact these individuals.

4 PLANS

Results of this survey were provisionally shared with the Pathology Management Committee March 2025 and will be discussed with both the Laboratory Managers and Mortuary & Bereavement Services Manager during the Pathology Annual Management Review in August 2025.

The uptake of service users to complete this survey continues to be pleasing. The method of accessing service users through email link and QR code in addition to the option of a hard copy version of the survey for GP 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. Feedback is imperative to enable the service to understand any 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 whether it would be beneficial to develop an independent Mortuary Services User survey to capture further valuable data.

The Pathology Quality and Customer Engagement Manager will discuss with the Point of Care Manager the suitability of current questions to ensure that appropriate feedback is captured from Trust and GP service users. The survey aims to ascertain what technology is being used within the Trust and determine who the best point of contact is. Information received via the survey is shared with the Point of Care Manager in Pathology for oversight.

The 2025 survey will continue to be available via Survey Monkey with responses captured periodically through audit by the Pathology Quality and Customer Engagement Manager. The next Pathology Service user survey is scheduled to be sent out to all service users in November 2025 with the report anticipated to be available towards the end of December 2025.