

Introduction

Laboratory Medicine complies with ISO 15189:2012 “*Medical laboratories: Requirements for quality and competence*”. Standard 4.14.3 “*Assessment of user feedback*” states that the laboratory shall seek information relating to user perception as to whether the service has met the needs and requirements of users. This survey has been performed to comply with these standards, and in doing so, will bring to the attention of laboratory management areas where we could improve the service.

Our focus group in 2023 was external users of the laboratory service based at GP surgeries across the Bristol and Weston areas. This is the first user survey for GP surgeries since the merge of UHBW Laboratory Medicine.

Objectives

To better understand the effectiveness of our processes in delivering an appropriate service that meets the needs of our users. To help us highlight positive elements to continue and replicate across sites and to understand where our service can be improved from the perspective of our users, so we can address and find solutions to better meet their needs.

We aim to better user satisfaction through this annual exercise to continuously improve the service we provide to our users, increase the quality of results released, and in turn, deliver better patient care.

Response to the Survey

For this survey, the focus group were external users of the laboratory service based at GP surgeries across the Bristol and Weston areas. The survey was designed by the Quality Team within Laboratory Medicine to elicit user’s views of the service in light of the merger and continuous quality improvement.

The survey was open for responses between 3rd November 2023 to 29th January 2024, using the platform Survey Monkey.

We received, over the 12 weeks, thirty responses in total, working in the following roles:

Role	Number of responses
GP	15
Nurse	7
Practice Manager	3

Nursing/Healthcare Assistant	2
Allied Health professional	0
Admin	0
Other (please specify)	3
Totals	30

Method Used

The following questions for the survey were designed by the Laboratory Medicine Quality Team.

Q1: What is your current job role?

Q2: Which GP surgery or community healthcare provider is your role predominantly based at?

(Demographic questions were included to better isolate issues that maybe role or site specific)

Q3: The overall service meets my needs.

Q4: I know where to find the Laboratory medicine user guides (used at the Bristol Royal Infirmary) or the Pathology User Manual (used at Weston general Hospital).

Q5: Laboratory staff are always polite, helpful and professional.

Q6: Laboratory staff and clinicians are easy to contact.

Q7: Sample transport arrangements meets my needs.

Q8: Results are clear, concise, easy to understand and reported within an appropriate timeframe.

Q9: Since the 2020 merge of University Hospitals Bristol and Weston General hospital, operational changes in the pathology service have been communicated effectively to users so there has been no negative affect on the service delivered as a result.

(The satisfaction of the above statements were graded from Strongly agree, Agree, Neutral, Disagree, and Strongly disagree. We interpreted Strongly agree, Agree, or Neutral as equal to satisfied. Disagree or Strongly disagree as dissatisfied)

Q10: What improvements would you like to see made to the pathology service that will help improve your work in your role? Specifying the department and assay of any suggestions you provide to help us investigate to how to best we can implement them. Please provide contact information if you would like to receive a direct response.

(Finally an open question was included to allow staff to express specific comments they wished to highlight)

The survey was built, distributed and collected on the Survey Monkey platform.

Initially, the survey was open for 4 weeks, but during this time very few responses were received. We sent the survey link out via the GP bulletin newsletter and repeated this process over the following four weeks but still only gained 7 responses. In the first week of January, we contacted the Users (Practice and Service Managers) directly asking them to distribute the survey link to their teams. This resulted in an influx of responses to the total of 30, where we decided to close the link on the 29th January once this influx subsided.

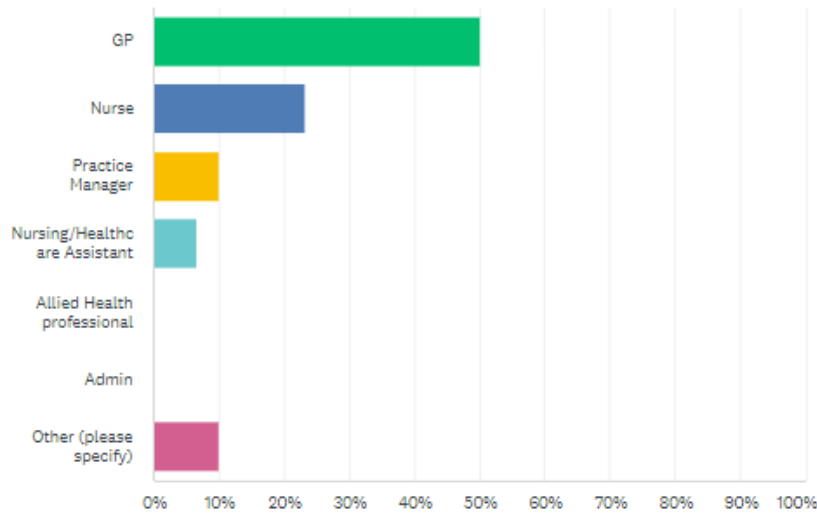
The laboratory's target for user satisfaction is that for each statement in the survey, a satisfactory response of > 90% must be achieved. Any results falling outside of this limit will require further investigation to see what appropriate actions are required to improve that aspect of the service. A satisfactory response is considered as either strongly agree, agree or neutral.

Results

The following graphs illustrate the results of the responses for each of the questions:

Q1: What is your current job role?

Results: answered 30, skipped 0



ANSWER CHOICES	RESPONSES
GP	50.00% 15
Nurse	23.33% 7
Practice Manager	10.00% 3
Nursing/Healthcare Assistant	6.67% 2
Allied Health professional	0.00% 0
Admin	0.00% 0
Other (please specify)	10.00% 3
TOTAL	30

Other (please specify) responses include:

1. Surgery Manager
2. GP trainee
3. Nursing associate

Comments: This year we received a good level of responses from clinical staff.

Q2: Which GP surgery or community healthcare provider is your role predominantly based at?

Results: answered 30, skipped 0

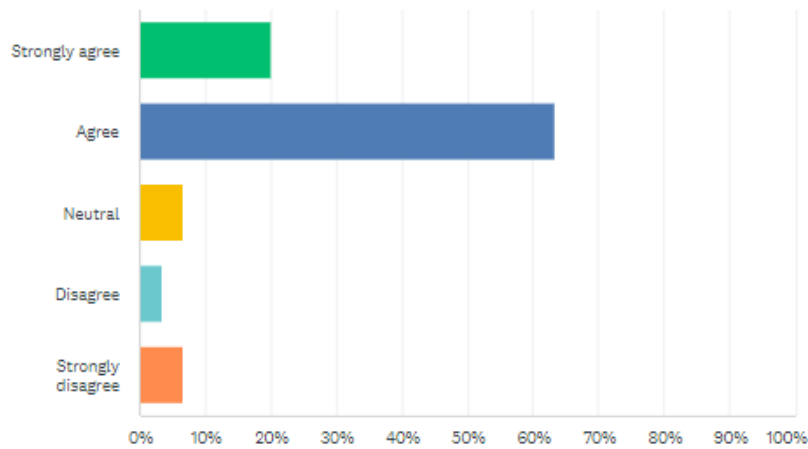
GP Surgery	Number of Responses
Mendip Vale, Sunnyside Surgery branch	4
Mendip vale medical group Langford surgery	1
Mendip vale medical group Unspecified	1

The Family Practice	1
Student health service	7
the wellspring surgery	1
Lawrence Hill Health Centre	1
East Trees	1
St Georges	1
Tudor Lodge Surgery	3
Pioneer Medical Group	2
Brooklea Health Centre	1
Heywood Family Practice	1
Charlotte Keel Medical Practice	1
wellington road	1
The Orchard medical centre	1
Whiteladies	2
Totals	30

Comments: Note that we did not receive a response from all GP surgeries service by Laboratory Medicine. Therefore not all GP surgeries using our service is represented in the findings of this survey.

Q3: The overall service meets my needs.

Results: answered 30, skipped 0

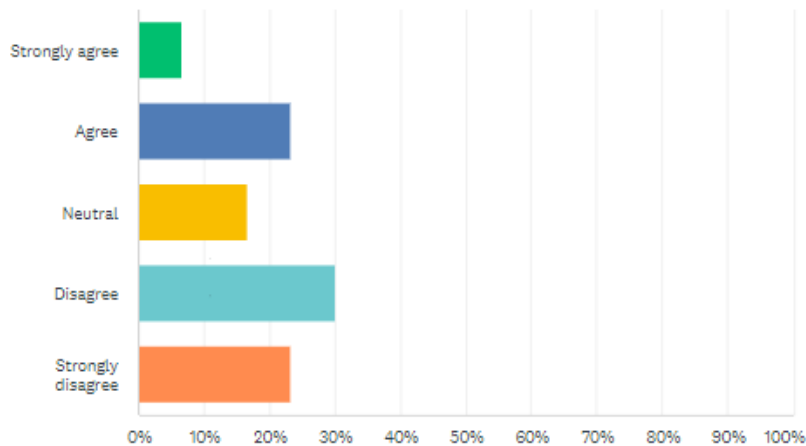


ANSWER CHOICES	RESPONSES
Strongly agree	20.00% 6
Agree	63.33% 19
Neutral	6.67% 2
Disagree	3.33% 1
Strongly disagree	6.67% 2
TOTAL	30

Comments: 90% user satisfaction that the service meets our users' needs.

Q4: I know where to find the Laboratory medicine user guides (used at the Bristol Royal Infirmary) or the Pathology User Manual (used at Weston general Hospital).

Results: answered 30, skipped 0

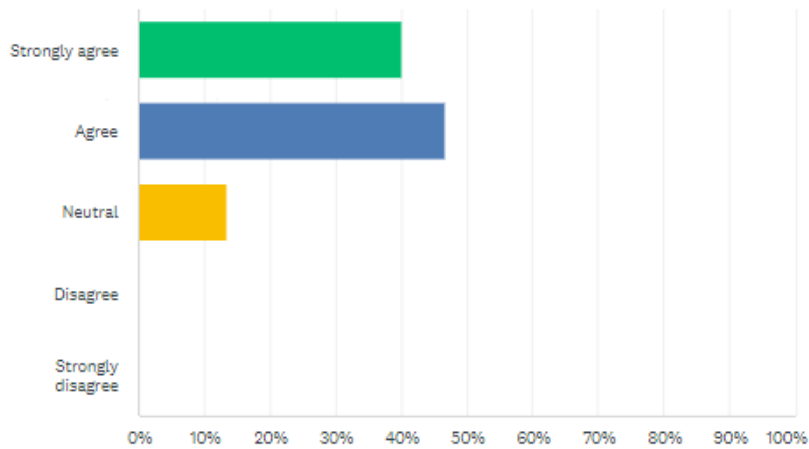


ANSWER CHOICES	RESPONSES
Strongly agree	6.67% 2
Agree	23.33% 7
Neutral	16.67% 5
Disagree	30.00% 9
Strongly disagree	23.33% 7
TOTAL	30

Comments: Greater proportion of staff (70%) did not know where to access the Laboratory guides than those that did. The group that did not know where to access the Laboratory guides included both GP and Nurses.

Q5: Laboratory staff are always polite, helpful and professional.

Results: answered 30, skipped 0

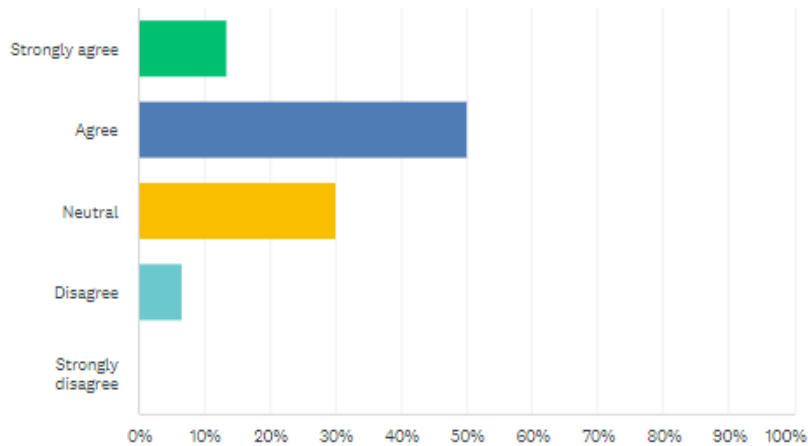


ANSWER CHOICES	RESPONSES
Strongly agree	40.00% 12
Agree	46.67% 14
Neutral	13.33% 4
Disagree	0.00% 0
Strongly disagree	0.00% 0
TOTAL	30

Comments: 100% user satisfaction that staff are always polite, helpful and professional.

Q6: Laboratory staff and clinicians are easy to contact.

Results: answered 30, skipped 0

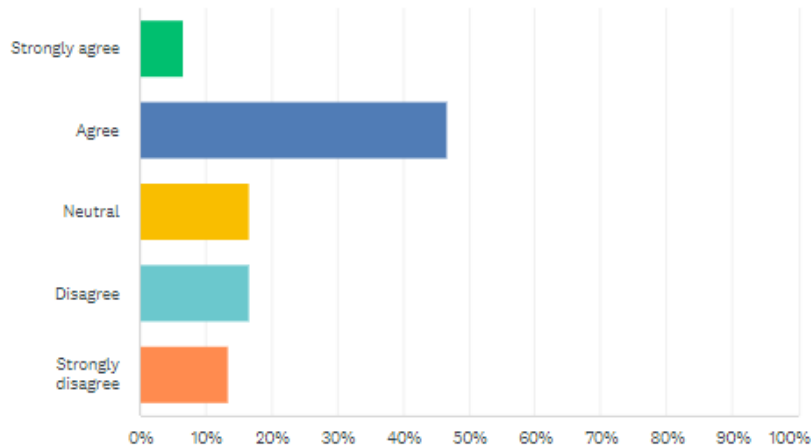


ANSWER CHOICES	RESPONSES
Strongly agree	13.33% 4
Agree	50.00% 16
Neutral	30.00% 9
Disagree	6.67% 2
Strongly disagree	0.00% 0
TOTAL	30

Comments: 93% user satisfaction that laboratory staff and clinicians are easy to contact. One practice manager and one nurse disagreed.

Q7: Sample transport arrangements meets my needs.

Results: answered 30, skipped 0



ANSWER CHOICES	RESPONSES
Strongly agree	6.67% 2
Agree	46.67% 14
Neutral	16.67% 5
Disagree	16.67% 5
Strongly disagree	13.33% 4
TOTAL	30

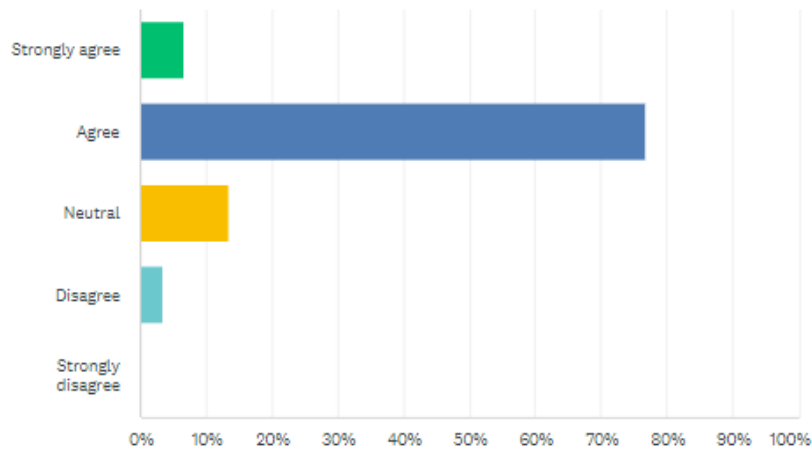
Comments: 70% user satisfaction that sample transport arrangements meets my needs. Sites that were unsatisfied with the transport arrangements include:

- Mendip vale, Sunnyside
- Student Health
- Pioneer Medical Group
- Whiteladies Medical Group
- Charlotte Keel Medical Practice

Please see Q10 for further feedback regarding transportation of samples.

Q8: Results are clear, concise, easy to understand and reported within an appropriate timeframe.

Results: answered 30, skipped 0

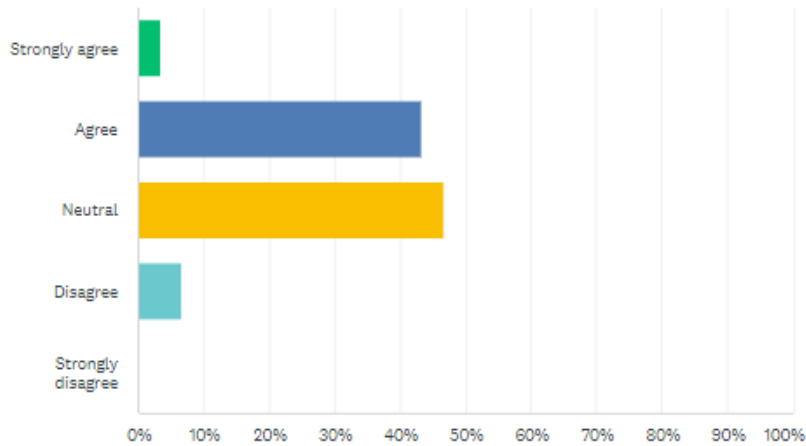


ANSWER CHOICES	RESPONSES
Strongly agree	6.67% 2
Agree	76.67% 23
Neutral	13.33% 4
Disagree	3.33% 1
Strongly disagree	0.00% 0
TOTAL	30

Comments: 97% user satisfaction that results are clear, concise, easy to understand and reported within an appropriate timeframe. One GP at Student Health disagrees. Please see response 3 for Q10 for their feedback.

Q9: Since the 2020 merge of University Hospitals Bristol and Weston General hospital, operational changes in the pathology service have been communicated effectively to users so there has been no negative affect on the service delivered as a result.

Results: answered 30, skipped 0



ANSWER CHOICES	RESPONSES
Strongly agree	3.33% 1
Agree	43.33% 13
Neutral	46.67% 14
Disagree	6.67% 2
Strongly disagree	0.00% 0
TOTAL	30

Comments: 93% user satisfaction that no negative affect on the service delivered as a result of the merger. One GP and one nurse disagrees, but there was no further elaboration what aspect of the service had degraded due to the merge.

Questions 3-9 User Satisfaction Summary

The target is >90% users satisfied, by answering either strongly agree, agree or neutral.

Statement	Percentage Satisfied (Strongly Agree to Neutral)	Percentage Dissatisfied (Disagree to Strongly Disagree)	Assessment against Satisfaction Target (>90%)
The overall service meets my needs.	90%	10%	ACHIEVED
I know where to find the Laboratory medicine user guides (used at the Bristol Royal Infirmary) or the Pathology User Manual (used at Weston general Hospital).	30%	70%	FAILED
Laboratory staff are always polite, helpful and	100%	0%	ACHIEVED

professional.			
Laboratory staff and clinicians are easy to contact.	93%	7%	ACHIEVED
Sample transport arrangements meets my needs.	70%	30%	FAILED
Results are clear, concise, easy to understand and reported within an appropriate timeframe.	97%	3%	ACHIEVED
Since the 2020 merge of University Hospitals Bristol and Weston General hospital, operational changes in the pathology service have been communicated effectively to users so there has been no negative affect on the service delivered as a result.	93%	7%	ACHIEVED

Question 10 User Comments Summary

Q10: What improvements would you like to see made to the pathology service that will help improve your work in your role? Specifying the department and assay of any suggestions you provide to help us investigate to how to best we can implement them. Please provide contact information if you would like to receive a direct response.

Results: answered 19, skipped 11

1. So many duplicate results from Weston lab. We have had a phenomenally rude man collecting our samples over recent weeks. He has also missed lunchtime sample collections – *GP at Mendip Vale, Sunnyside Surgery branch*
2. Apologies for the neutral comments but this is where i have no knowledge/experience in the area – *Practice Manager at The Family Practice*
3. Occasionally not all results are sent back to emis - this has happened with bloods and imaging. I have picked up on a few by chance and reported them but no satisfactory outcome/resolution. Potential safety issue – *GP at Student health service*
4. A later collection for us (currently 3pm) would be useful As would the option of deleting an ICE request – *GP at Student health service*
5. Sometimes ICE results do not pull through to EMIS. This means having to call lab, more time consuming on both sides. Also, specific example, but transferrin saturation - I have difficulty requesting this at BRI lab and do not get the result back. I have been told that they can send the sample to Southmead lab who calculate this in a different way, however this does not automatically happen- I have had to wait for the sample to get to

- the BRI lab, check result to see if trans sat was able to be calculated, and if not, call the lab, before the sample gets disposed of, to ask them to send it to Southmead to calculate this formally. If I'm not working, I have to ask a colleague to do this on my behalf. If we are too late calling, and the sample has been thrown away, the patient has to come back for another blood test and the process repeated. Can the BRI lab tech be updated so they can calculate this? Can the sample be automatically sent to Southmead if the result cannot be given from BRI lab? I have always had helpful and knowledgeable staff when I have called the lab for advice- thank you – *GP at Student health service*
6. microbiol have ward rounds that coincide with GP gaps between surgeries- can make access difficult; more info on abnormal biochem results/ links to ref guides would be helpful; really helpful if we could add to requests via ICe again – *GP at Student health service*
 7. It would be helpful to be able to do the add on function online not over the phone – *GP at Lawrence Hill Health Centre*
 8. Sample transport- after many of issues. Very rude staff and blood collections not happening- our blood collection gentleman has caused a lot of issues for us, which has caused, blood samples not being collected, rude comments and conversations including being ignored, intimidation, and walking out without our samples 25 min before our set collection time. this definately needs improving and reflects badly on the amazing job everyone else does – *Nursing/Healthcare Assistant at Mendip Vale - Sunnyside Surgery*
 9. For the last couple of weeks we have been having issues whereby bloods samples were refused to be taken by the Courier at lunchtime. On one occasion a blood test needed to be at the lab for a Patient who had a Hosp appointment that day and were urgent. The bloods were not collected until 4pm in the afternoon. On another occasion the Courier arrived at 15.47 to collect the last collection of the day. The Receptionist came to inform the Nursing staff that he had arrived. He promptly left the building before we could hand these over. This was at 15.50, as I understand it the last collection should be at 16.00. I made a call to our Senior management team for advise as the bloods could not be stored overnight in the fridge. MendipVales maintenance man had to come to Clevedon from Langford to collect the samples and deliver them to WGH. This collection system has been quite a concern over the last couple of weeks. We have never had an experience of this nature whereby a courier dictates when he collects – *Nursing/Healthcare Assistant at Mendip Vale - Sunnyside Surgery*
 10. our bloods to actually be collected – *Practice Manger at Mendip Vale - Sunnyside Surgery*
 11. I am not aware of any clear add-on process short of phoning the lab, which is laborious for all involved. This would really benefit both clinical teams and patients. There have been quite a few duplicated reports coming through recently, which increase our work load. I would also like the BNP provisional reports (i.e. nothing yet) to be removed if possible. Generally however, I am really pleased with the service provided and would

- like to thank the laboratory staff for their hard work. They're a vital part of our team, who we never get to meet or say thank you to – *GP at Tudor Lodge Surgery*
12. Please reduce duplicate results, FBC are sent x4 sometimes and interim reports clutter up the inbox and require multiple clicks to get rid of them (BNP, MSU, dexa). When you have >50 results to clear after an 11 hour day, each additional click is arduous. thanks – *GP at Tudor Lodge Surgery*
 13. Bariatric surgery bloods profile (like NBT), ability to delete requests. Less changes on user permissions. – *Nurse at Tudor Lodge Surgery*
 14. The only concerns is that sometimes on a Saturday they do not arrive to pick up the samples – *Nurse at Pioneer medical group*
 15. Able to organise Saturday pick ups of samples to the Lab – *Nurse at Charlotte Keel Medical Practice*
 16. I can't remember if it's biochemistry or I think more likely microbiology that disappears at lunch time when we as GPs need to communicate most – *GP at The Orchard medical centre*
 17. Requesting faecal calprotectin on ICE prints out on same request which is not always possible to achieve. Calprotectin coming out as a separate sample would be really helpful – *GP at Student health service*
 18. end of afternoon collections as the GP day runs until 6.30pm and we get many haemolysed samples resulting in repeats needed. Also, prevents urgent bloods during afternoons which impacts on referrals to ambulatory care – *GP at Whiteladies Medical Group*
 19. There have been some spurious problems with me suddenly disappearing as a user on ICE and being able to access all systems. Also results often going back to wrong clinician or clinicians not being able to receive results and administrator/management team having to spend significant time and resource on trying to fix problems that arise – *GP at Mendip Vale Medical Group*

Laboratory Responses and Suggested Actions

Reviews and discussions of user surveys results are performed within the Laboratory's Clinical Governance and Management meetings. These reviews and discussions allow for the formulation of plans, actions to be identified and for the Head of Department's to respond to user's outlining any suggestions or ideas that are to be implemented.

Comment	Laboratory Response/Action
1. <i>So many duplicate results from Weston lab. We have had a phenomenally rude man collecting our samples over recent weeks. He has also missed lunchtime sample collections – GP at</i>	With regarding to the sample collection issue, this is a known problem which was raised as a formal complaint about the courier in attendance from Mendip Vale, Sunnyside Surgery. This courier was

<p><i>Mendip Vale, Sunnyside Surgery branch</i></p>	<p>removed from this route as 29th January 2024 by the Transportation manager in response to issues raised.</p> <p>Regarding the duplicate results received from Weston, a previous ICE downtime resulted in multiple messages being sent out as a process was repeating an error and generating multiple files. However preliminary results being issued such as 'pending' we are currently unable to stop the second follow-up result. We are hoping to change the reporting process from ICE to EMIS to align Weston with UHB Bristol, and as the 'pending' reports are not issued in UHB Bristol, this would no longer happen.</p>
<p>2. <i>Apologies for the neutral comments but this is where i have no knowledge/experience in the area – Practice Manager at The Family Practice</i></p>	<p>No problem, thank you for your responses.</p>
<p>3. <i>Occasionally not all results are sent back to emis - this has happened with bloods and imaging. I have picked up on a few by chance and reported them but no satisfactory outcome/resolution. Potential safety issue – GP at Student health service</i></p>	<p>With limited information we believe the reason results may not arrive back into your EMIS could be a result of the patients on ICE not being present in our trust EPR system. Pathology orders for tests cannot be accepted into our laboratory system unless the patient exists in the EPR. This is an ongoing issue which we are investigating. We are able to add patients to our EPR for any blood science requests, however as the Microbiology samples are processed at NBT they are unable to amend our EPR to add the patients. These orders are then requested manually, so results may not be returned to the original patient record in ICE. Due to the nature of the cohort of your patients, this may present a larger issue than other primary care locations where populations are more stable.</p>
<p>4. <i>A later collection for us (currently 3pm) would be useful As would the option of deleting an ICE request – GP at Student health service</i></p>	<p>We are unable to offer an alteration to the collection service at this time due to the constraints within Transportation team. We apologise for this inconvenience.</p> <p>Pathology ICE orders can be deleted until they have reached the 'sample collected' status. This status means that the order has already been electronically sent to our laboratory system and labels have been printed. Please take care when making requests on ICE that the correct patient is chosen. ICE requests can also be scheduled, where they stay at status 'pending' or 'booked', the order can then be deleted if the patient does not arrive for their appointment or the samples are not taken. For further</p>

	<p>information, the ICE team can be contacted on ICE.Support@UHBW.nhs.uk</p>
<p>5. <i>Sometimes ICE results do not pull through to EMIS. This means having to call lab, more time consuming on both sides. Also, specific example, but transferrin saturation - I have difficulty requesting this at BRI lab and do not get the result back. I have been told that they can send the sample to Southmead lab who calculate this in a different way, however this does not automatically happen- I have had to wait for the sample to get to the BRI lab, check result to see if trans sat was able to be calculated, and if not, call the lab, before the sample gets disposed of, to ask them to send it to Southmead to calculate this formally. If I'm not working, I have to ask a colleague to do this on my behalf. If we are too late calling, and the sample has been thrown away, the patient has to come back for another blood test and the process repeated. Can the BRI lab tech be updated so they can calculate this? Can the sample be automatically sent to Southmead if the result cannot be given from BRI lab? I have always had helpful and knowledgeable staff when I have called the lab for advice- thank you – GP at Student health service</i></p>	<p>Following our recent instrument replacement programme, the BRI laboratory now uses the same method as Southmead for transferrin saturation so this should no longer be an issue. We apologise for the issues this has temporarily caused.</p> <p>With limited information we believe the reason results may not arrive back in your EMIS could be a result of the patients on ICE not being present in our trust EPR system. Pathology orders for tests cannot be accepted into our laboratory system unless the patient exists in the EPR. This is an ongoing issue which we are investigating. We are able to add patients to our EPR for any blood science requests, however as the Microbiology samples are processed at NBT they are unable to amend our EPR to add the patients. These orders are then requested manually, so results may not be returned to the original patient record in ICE. Due to the nature of the cohort of your patients this may present a larger issue than other primary care locations where populations are more stable.</p>
<p>6. <i>microbiol have ward rounds that coincide with GP gaps between surgeries- can make access difficult; more info on abnormal biochem results/ links to ref guides would be helpful; really helpful if we could add to requests via ICE again – GP at Student health service</i></p>	<p>Several improvements have recently been made to the Microbiologist contact process. We now have the GP mailbox for non-urgent enquiries (which is advertised on Remedy and wider) and if primary care call when we are unable to answer the phone, there is a voicemail service which provides details on how to access advice. This is via email or call back and NBT Bacteriology or WGH lab extension, with the latter 2 options only being accessible in a time critical emergency, which is a very rare event. We hope that this has rectified any previously experienced issues in recent months.</p> <p>Thank you for the request for more information on interpretation of abnormal results. We will look to add links to external resources such as LabTestsOnline to the Laboratory Medicine website. The temporary suspension of the add-on request service that had to be imposed around the time of implementation of new equipment has now been lifted. Additional tests specified within our additional</p>

	<p>test requesting policy can now again be requested via ICE.</p> <p>Please use the following links to access our user guides.</p> <p>Bristol: Laboratory Medicine University Hospitals Bristol NHS Foundation Trust (uhbristol.nhs.uk)</p> <p>Weston: Pathology (waht.nhs.uk)</p>
<p>7. <i>It would be helpful to be able to do the add on function online not over the phone – GP at Lawrence Hill Health Centre</i></p>	<p>The online add-on test requesting service via ICE has now resumed.</p>
<p>8. <i>Sample transport- after many of issues. Very rude staff and blood collections not happening- our blood collection gentleman has caused a lot of issues for us, which has casued, blood samples not being collected, rude comments and conversations including being ignored, intimidation, and walking out without our samples 25 min before our set collection time. this definately needs improving and reflects badly on the amazing job everyone else does – Nursing/Healthcare Assistant at Mendip Vale - Sunnyside Surgery</i></p>	<p>With regarding to the sample collection issue, this is a known problem which was raised as a formal complaint about the courier in attendance from Mendip Vale, Sunnyside Surgery. This courier was removed from this route as 29th January 2024 by the Transportation manager in response to issues raised.</p>
<p>9. <i>For the last couple of weeks we have been having issues whereby bloods samples were refused to be taken by the Courier at lunchtime. On one occasion a blood test needed to be at the lab for a Patient who had a Hosp appointment that day and were urgent. The bloods were not collected until 4pm in the afternoon. On another occasion the Courier arrived at 15.47 to collect the last collection of the day. The Receptionist came to inform the Nursing staff that he had arrived. He promptly left the building before we could hand these over. This was at 15.50, as I understand it the last collection should be at 16.00. I made a call to our Senior management team for advise as the bloods could not be stored overnight in the fridge. MendipVales maintenance man had to come to Clevedon from Langford to collect the samples and deliver them to WGH. This collection system has been quite a concern over the last couple of weeks. We have never had an experience of this nature whereby a courier dictates when he collects – Nursing/Healthcare Assistant at Mendip Vale - Sunnyside Surgery</i></p>	<p>With regarding to the sample collection issue, this is a known problem which was raised as a formal complaint about the courier in attendance from Mendip Vale, Sunnyside Surgery. This courier was removed from this route as 29th January 2024 by the Transportation manager in response to issues raised.</p>

<p>10. <i>our bloods to actually be collected – Practice Manger at Mendip Vale - Sunnyside Surgery</i></p>	<p>With regarding to the sample collection issue, this is a known problem which was raised as a formal complaint about the courier in attendance from Mendip Vale, Sunnyside Surgery. This courier was removed from this route as 29th January 2024 by the Transportation manager in response to issues raised.</p>
<p>11. <i>I am not aware of any clear add-on process short of phoning the lab, which is laborious for all involved. This would really benefit both clinical teams and patients. There have been quite a few duplicated reports coming through recently, which increase our work load. I would also like the BNP provisional reports (i.e. nothing yet) to be removed if possible. Generally however, I am really pleased with the service provided and would like to thank the laboratory staff for their hard work. They're a vital part of our team, who we never get to meet or say thank you to – GP at Tudor Lodge Surgery</i></p>	<p>Thank you for your feedback.</p> <p>GP add-on process will be aligned to the Bristol Royal Infirmary process. This will allow ICE add-on for amenable tests.</p> <p>Regarding duplicated reports, we are hoping to change the reporting process to align Weston with UHB Bristol, and as the ‘pending’ reports are not issued in UHB Bristol, meaning a second report would no longer happen.</p>
<p>12. <i>Please reduce duplicate results, FBC are sent x4 sometimes and interim reports clutter up the inbox and require multiple clicks to get rid of them (BNP, MSU, dexa). When you have >50 results to clear after an 11 hour day, each additional click is arduous. thanks – GP at Tudor Lodge Surgery</i></p>	<p>Regarding the duplicate results received from Weston, a previous ICE downtime resulted in multiple messages being sent out as a process was repeating an error and generating multiple files. However preliminary results being issued such as ‘pending’ we are currently unable to stop the second follow-up result. We are hoping to change the reporting process from ICE to EMIS to align Weston with UHB Bristol, and as the ‘pending’ reports are not issued in UHB Bristol, this would no longer happen.</p>
<p>13. <i>Bariatric surgery bloods profile (like NBT), ability to delete requests. Less changes on user permissions. – Nurse at Tudor Lodge Surgery</i></p>	<p>As a department, we regularly meet with Primary care user group and a key theme is to harmonise profiles across UHBW/NBT. This work is ongoing but in progress.</p> <p>Permission and user role changes have been undertaken by the Bristol ICE team to harmonise the two systems. This work is now complete, and the user roles are now the same for both systems. This will help in transitioning staff across to the new UHBW ICE. Apologies, for any problems experienced during this time.</p>
<p>14. <i>The only concerns is that sometimes on a Saturday they do not arrive to pick up the samples – Nurse at Pioneer medical group</i></p>	<p>It is regretful to hear that this has occurred at Pioneer Medical Group. Please can any further occurrences be raised to (insert appropriate contact details) to allow for detailed review and</p>

	investigation.
<i>15. Able to organise Saturday pick ups of samples to the Lab – Nurse at Charlotte Keel Medical Practice</i>	It is with regret that the Transportation Manager has feedback that there is currently no scope to add further surgeries to weekend runs. We will monitor capacity as part of internal improvement planning.
<i>16. I can't remember if it's biochemistry or I think more likely microbiology that disappears at lunch time when we as GPs need to communicate most – GP at The Orchard medical centre</i>	The Duty Biochemist (0117 342 7834) covers both the BRI and WGH labs and is continually available Monday to Friday 09:00 to 17:30. The Microbiology service is located at North Bristol Trust (Southmead Hospital). Please contact their Pathology department for information regarding their best contact details.
<i>17. Requesting faecal calprotectin on ICE prints out on same request which is not always possible to achieve. Calprotectin coming out as a separate sample would be really helpful – GP at Student health service</i>	On the UHBristol ICE system, Faecal Calprotectin has recently been changed to being on its own order, so now a separate label should be produced for these samples. This has been the case on the Weston ICE system for some time. We hope this rectifies any issues you have experienced.
<i>18. end of afternoon collections as the GP day runs until 6.30pm and we get many haemolysed samples resulting in repeats needed. Also, prevents urgent bloods during afternoons which impacts on referrals to ambulatory care – GP at Whiteladies Medical Group</i>	We are unable to offer an alteration to the collection service at this time due to the constraints within Transportation team.
<i>19. There have been some spurious problems with me suddenly disappearing as a user on ICE and being able to access all systems. Also results often going back to wrong clinician or clinicians not being able to receive results and administrator/management team having to spend significant time and resource on trying to fix problems that arise – GP at Mendip Vale Medical Group</i>	Permission and user role changes have been undertaken by the Bristol ICE team to harmonise the two systems. This work is now complete, and the user roles are now the same for both systems. This will help in transitioning staff across to the new UHBW ICE. Apologies, for any problems experienced during this time.

Conclusion and Summary

This External User survey reflects the high quality service provided by Laboratory Medicine across our hospital sites at University Hospitals Bristol and Weston NHS Foundation Trust.

We achieved our user satisfaction target for five of the seven statements, with some issues noted in the other two, one of which has recently resulted in known courier issues via formal complaint and has now been rectified successfully. The other missed target was that of users knowing how to find information regarding our test repertoire and test requirements (user guides and handbooks). We have previously put actions in place to try to improve this, but unfortunately, it appears that the issue remains. The department will now publish the User Guides on the MyStaff App for easier

access for users within the hospital, and email out new version of guides and handbooks to our external users, as and when they are updated. Please note there are future plans to improve our externally facing website as well, which work will commence on, once the Trust has formalised the new UHBW webpage. If there are tests that you require that are not listed on our repertoire please get in touch with our teams to discuss how best we can support your request. To ensure that our current repertoire meets need, we constantly review the tests we are providing in terms of their suitability, turnaround times and workloads to ensure we provide the best possible service. We are committed to continually improving our services and value the feedback that has been provided. This feedback will be used to guide future improvement measures and is discussed at our governance meetings.

Current out of hours information and test information can be found within user handbooks and on our intranet pages in the following links:

Bristol: [Laboratory Medicine | University Hospitals Bristol NHS Foundation Trust \(uhbristol.nhs.uk\)](https://uhbristol.nhs.uk)

Weston: [Pathology \(waht.nhs.uk\)](https://waht.nhs.uk)

Acknowledgements

We appreciate the time taken by our users to complete the survey. We continue to seek other means of feedback where possible. We are continually reviewing the service we provide to our users and continually seeking to improve wherever possible, despite the growing financial and staffing challenges we face. We will take the feedback we have gained from this survey and use it to focus our efforts.

We are grateful to all those who took the time to respond to our user survey and we hope that we will be able to address the issues you have raised so that filling in the questionnaire was time well spent. We will be repeating the User survey in 2025, to re-assess our performance and monitor any improvement.

If you want feedback on the action plan, or you did not get an opportunity to complete the user survey and want to provide feedback regarding our services please contact our Quality Manager Natalia Casey Natalia.Casey@uhbw.nhs.uk who will be happy to respond to any feedback.

If you prefer, please contact the Head of Service Adrian Brown: adrian.brown@uhbw.nhs.uk