Laboratory Medicine

User Survey Report for Sickle Cell and Thalassaemia Screening Laboratory User Survey 2021 (UHBW)

Document Reference: SC&ThalUsersurvey2021 Haematology Department

Introduction

The Haematology Department at University Hospitals Bristol 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 Haematology Laboratory Sickle Cell and Thalassaemia Screening service.

The Sickle Cell and Thalassaemia Screening Laboratory User Satisfaction survey was carried out by University Hospitals Bristol and Weston NHSFT (UHBW) for the Trust between 27th September 2020 and 12th December 20201

Objectives

The purpose of the survey was to assess the level of satisfaction of the Sickle Cell and Thalassaemia Screening Laboratory users by asking for responses to specific questions and statements. The information gained through this exercise enabled the laboratory management team 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.

Response to the Survey

This short survey was designed by the Lead Biomedical Scientist for the Screening Laboratory to elicit users' views about the Laboratory service at University Hospitals Bristol and Weston NHSFT (BRI site). Users of University Hospitals Bristol and Weston NHSFT Laboratory Services (UHBW) were encouraged to complete the online User Survey using Survey Monkey. The link to the survey was distributed to the Screening Midwives by the Community Midwifery Clerk. Although the questions final question focused on the BRI site, the survey was available to all the users in the Trust. Specific site feedback will be taken on board.

In total, 25 responses to the survey were received, self-identified as coming from the following groups:

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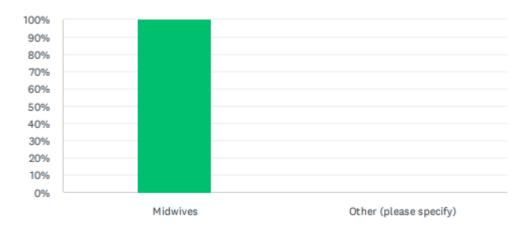
Laboratory Medicine

User Survey Report for Sickle Cell and Thalassaemia Screening Laboratory User Survey 2021 (UHBW)

Document Reference: SC&ThalUsersurvey2021

Haematology Department





Role	Responses
Midwives	25

Method Used

The Questionnaire

The questionnaire was comprised of the following:

- 1. Users were asked to rate (from strongly agree to strongly disagree) the following statements about the service:
- "I can trust the laboratory to provide results/reports when I need them"
- "I am satisfied with the quality of professional advice that I receive from the laboratory"
- "I am satisfied with the quality of reports that I receive from the laboratory"
- "I am satisfied with the level of detail contained in the Family Origin Questionnaire (FOQ) request in ICE"
- "Professional advice is readily available from the laboratory when needed"
- "I am confident that urgent/unexpected results will be promptly communicated"
- "I am satisfied with the communication pathways between the laboratory and its users"
- "I would recommend the laboratory service to a colleague"
- 2. Users were asked to respond to the following questions:
- How might the laboratory Sickle Cell and Thalassaemia screening service be improved?
- How might the electronic Family Origin Questionnaire be improved?
- How might the results delivery service be improved?

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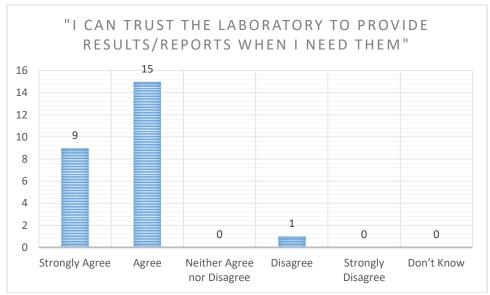
University Hospitals Bristol and Weston NHS Foundation Trust User Survey Report for Sickle Cell and Thalassaemia Screening Laboratory User Survey 2021 (UHBW) Document Reference: SC&ThalUsersurvey2021 Haematology Department

3. The closing statement to users asked for any other comments they wish to make about the service provided by the Haematology laboratory at UHBW (BRI site) . (This was an optional question).

The laboratory target for user satisfaction is that for each statement a satisfactory response of > 90% must be achieved. We have defined a satisfactory response as either Strongly Agree, Agree, or Neither Agree nor Disagree. 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

Results

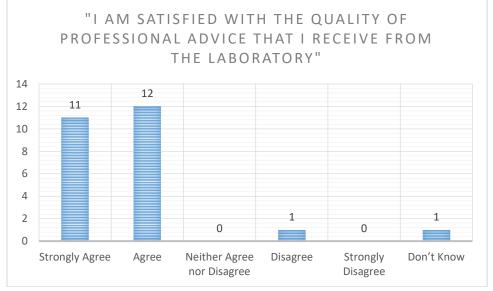
The following graphs illustrate the results of the responses for each of the statements:



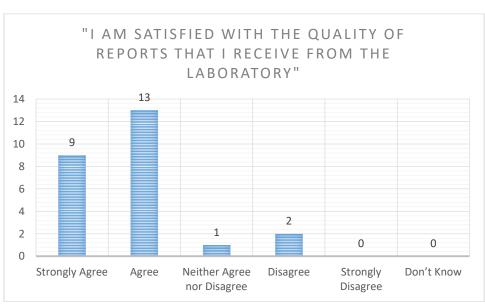
Answered: 25. Skipped: 0.

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Answered: 25. Skipped: 0.



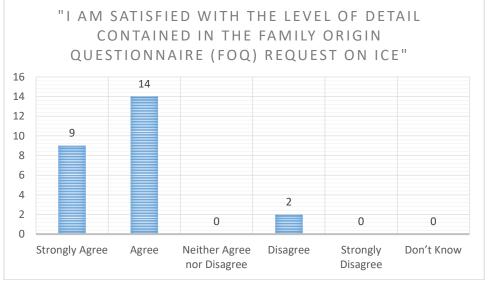
Answered: 25. Skipped: 0.

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Approved by: Donna Connolly **Active Date:** 20th December 2021

Page 4 of 14

Document Reference: SC&ThalUsersurvey2021 Haematology Department



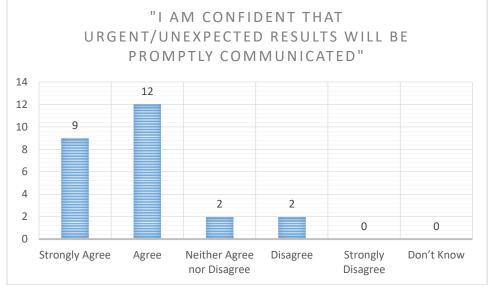
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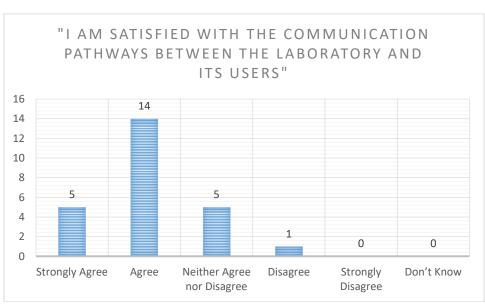
Answered: 25. Skipped: 0.

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Document Reference: SC&ThalUsersurvey2021 Haematology Department



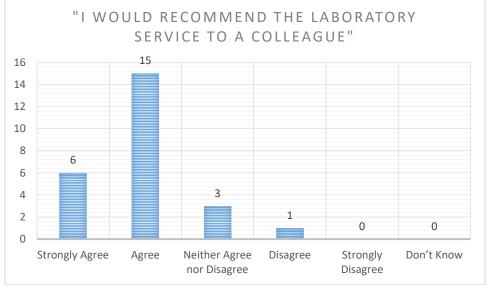
Answered: 25. Skipped: 0.



Answered: 25. Skipped: 0.

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Document Reference: SC&ThalUsersurvey2021 Haematology Department



Answered: 25. Skipped: 0.

Summary Table of Percentage User Satisfaction

The laboratory target for user satisfaction is that for each statement a satisfactory response of > 90% must be achieved.

Statement	Percentage Satisfied (Strongly Agree to Neither Agree nor Disagree)	Percentage Dissatisfied (Disagree to Strongly Disagree)	Don't Know	Assessment against Satisfaction Target
"I can trust the laboratory to provide results/reports when I need them"	96%	4%	0%	ACHIEVED
"I am satisfied with the quality of professional advice that I receive from the laboratory"	92%	4%	4%	ACHIEVED
"I am satisfied with the quality of	92%	8%	0%	ACHIEVED

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University Hospitals Bristol and Weston NHS Foundation Trust User Survey Report for Sickle Cell and Thalassaemia Screening Laboratory User Survey 2021 (UHBW)				
Document Reference: SC&ThalUsers	-	(011211)	Haematolo	gy Department
reports that I receive from the laboratory"				
"I am satisfied with the level of detail contained in the Family Origin Questionnaire (FOQ) request in ICE"	92%	8%	0%	ACHIEVED
"Professional advice is readily available from the laboratory when needed"	92%	4%	4%	ACHIEVED
"I am confident that urgent/unexpected results will be promptly communicated"	92%	8%	0%	ACHIEVED
"I am satisfied with the communication pathways between the laboratory and its users"	96%	4%	0%	ACHIEVED
"I would recommend the laboratory service to a colleague"	96%	4%	0%	ACHIEVED

Users responded to the questions as follows:

How might the laboratory Sickle Cell and Thalassaemia screening service be improved?

10 Skipped.

15 Responses:

- 1. N/A
- 2. No recommendations
- 3. good service
- 4. nothing
- 5. already good service
- 6. Country of origin is often ambiguous and doesn't reference particular ethnic minorities.
- 7. highlight if still pending result
- 8. I am not sure
- 9. the only thing I feel that is not communicated well, or maybe not enough midwives are aware of is if a Ferritin blood sample needs to be taken as a result of sickle cell and thalassemia blood test and when this should be done.
- 10. have the same country options for women as for the men. Allow mixed ethnicities to be

Author: Alex MacPhie Edition No: 1

Laboratory Medicine

User Survey Report for Sickle Cell and Thalassaemia Screening Laboratory User Survey 2021 (UHBW)

Document Reference: SC&ThalUsersurvey2021

Haematology Department

highlighted more easily for both sexes

- 11. i think it works quite well, any errors are picked up timely and we are well supported by the screening team to assist
- 12. No comments
- 13. Unsure
- 14. Nil
- 15. Nil

How might the electronic Family Origin Questionnaire be improved?

8 Skipped.

17 Responses:

- 1. Option for not known for father of baby DOB
- 2. no recommenndations
- 3. the drop down menu for ethnicity is not clear, and multiple selections cannot generally be entered a hint as to how to do this should be on the page! thank you
- 4. nothing easy to use
- 5. unknown
- 6. for the previous fields not to become unsaved if you miss a question as you have to redo the whole form
- 7. I think it is currently fir for purpose
- 8. The FOQ on ICE takes a very long time to fill out. It would speed things up if the partner details were not required if WB
- 9. All boxes are mandatory, so if something is not written in every single box the form clears and everything has to be repeated, so if some of the boxes that are not essential could be made non mandatory that would save time
- 10. Same as above
- 11. Have better list of areas, a few times i have been unable to find the right origin for people
- 12. the regions are quite generalised and often difficult to get exactly to parents exact origin, quite often if mixed (more than 2
- 13. Make it clear on the last box that we have to add something otherwise information above will have to be re entered
- 14. As far as I'm aware, it is fine
- 15. Options for mixed Ethnic groups to be added
- 16. no improvement required
- 17. Nil

How might the results delivery service be improved?

13 Skipped.

12 Responses:

Author: Alex MacPhie Edition No: 1

Laboratory Medicine

User Survey Report for Sickle Cell and Thalassaemia Screening Laboratory User Survey 2021 (UHBW)

Document Reference: SC&ThalUsersurvey2021 Haematology Department

- 1. None
- 2. No
- 3. Results are sometimes not available on ICE when other booking blood results are available but generally it is good.
- 4. some results take too long to appear on system
- 5. I feel the labs communicate well
- 6. N/A
- 7. Results delivery is quick and easy to print off to document in patients notes.
- 8. we check them on ICE directly. this works well
- 9. i think it currently works well
- 10. They can't
- 11. Nil
- 12. FOB testing info in capitals to make it clear some have capitals and some dont

Please add any other comments you wish to make about the service provided by the Haematology laboratory at UHBW – BRI site.

18 Skipped.

7 Responses:

- 1. I have nothing to add.
- 2. Very good service
- 3. .
- 4. N/A
- 5. The lab are always very help when we phone and dont really know what we are talking about, never feel any judgement, everyones always happy to explain and help us.
- 6. None, don't tend to use BRI as samples go to WGH
- 7. Screening bloods for maternity patients for HIV AND HEP that are taken in Weston seem to take ages to report results

Laboratory Responses and Suggested Actions

How might the laboratory Sickle Cell and Thalassaemia screening service be improved?

Comment	Laboratory Response/Action
No recommendations	Thank you
Good service	
Nothing	
Already good service	
Country of origin is often ambiguous and	The family origin options within the electronic
doesn't reference particular minorities	FOQ are designed to be a direct copy of the NHS
	Sickle Cell and Thalassaemia Screening
	Programme Family Origin Questionnaire.
Highlight if still pending result	This is currently not a function available within

Author: Alex MacPhie Edition No: 1

Approved by: Donna Connolly **Active Date:** 20th December 2021

Page 10 of 14

University Hospitals Bristol and Weston NHS Foundation Trust Laboratory Medicine User Survey Report for Sickle Cell and Thalassaemia Screening Laboratory User			
Survey 2021 (UHBW)			
Document Reference: SC&ThalUsersurvey2021	Haematology Department		
	the ICE system. If there are delays then interim reports are reported to ensure the timeliness of reporting.		
I am not sure	Thank you		
The only thing I feel that is not communicated well, or maybe not enough midwives are aware of is if a Ferritin blood sample needs to be taken as a result of sickle cell and thalassemia blood test and when this should be done.	This is a comment which was added to comply with the screening guidelines and hopefully has been cascaded from the screening midwives.		
Have the same country options for women as for the men. Allow mixed ethnicities to be highlighted more easily for both sexes.	The family origin options within the electronic FOQ are designed to be a direct copy of the NHS Sickle Cell and Thalassaemia Screening Programme Family Origin Questionnaire. Multiple family origins are able to be selected from the list by clicking on the relevant lines required.		
I think it works quite well, any errors are picked up timely and we are well supported by the screening team to assist.	That is good to hear.		
No comments	Thank you.		
Unsure			
Nil			
Nil			

How might the electronic Family Origin Questionnaire be improved?

Comment	Laboratory Response/Action
Option for not known for father of baby DOB	The family origin options within the electronic FOQ are designed to be a direct copy of the NHS Sickle Cell and Thalassaemia Screening
	Programme Family Origin Questionnaire. Any
	other information can be entered in the further
	drop down boxes
No recommendations	Thank you.
The drop down menu for ethnicity is not clear, and multiple selections cannot generally be entered - a hint as to how to do this should be on the page! thank you	The family origin options within the electronic FOQ are designed to be a direct copy of the NHS Sickle Cell and Thalassaemia Screening Programme Family Origin Questionnaire. Multiple family origins are able to be selected from the list by clicking on the relevant lines required.
Nothing easy to use	That is good to hear.
Unknown	Thank you.
For the previous fields not to become unsaved if	Unfortunately this is a limitation of the ICE FOQ
you miss a question as you have to redo the	build and is unable to be changed.

Author: Alex MacPhie Edition No: 1
Approved by: Donna Connolly Active Date: 20th December 2021

Page 11 of 14

University Hospitals Bristol and Weston NHS Foundation Trust Laboratory Medicine User Survey Report for Sickle Cell and Thalassaemia Screening Laboratory User

Survey 2021 (UHBW)

Document Reference: SC&ThalUsersurvey2021	Haematology Department
whole form	
I think it is currently fir for purpose	Thank you.
The FOQ on ICE takes a very long time to fill out. It would speed things up if the partner details were not required if WB	Unfortunately this is a limitation of the ICE FOQ build and is unable to be changed – it is designed to mirror the NHS Sickle Cell and Thalassaemia Screening Programme Family Origin Questionnaire.
Same as above	See above
Have better list of areas, a few times i have been unable to find the right origin for people	The family origin options within the electronic FOQ are designed to be a direct copy of the NHS Sickle Cell and Thalassaemia Screening Programme Family Origin Questionnaire. If the option you are looking for is not available please select one of the "Any other" options and manually type in the family origin information.
The regions are quite generalised and often difficult to get exactly to parents exact origin, quite often if mixed (more than 2)	The family origin options within the electronic FOQ are designed to be a direct copy of the NHS Sickle Cell and Thalassaemia Screening Programme Family Origin Questionnaire. Multiple family origins are able to be selected from the list by clicking on the relevant lines required. If the option you are looking for is not available please select one of the "Any other" options and manually type in the family origin information.
Make it clear on the last box that we have to add something otherwise information above will have to be re entered	Unfortunately this is a limitation of the ICE FOQ build and is unable to be changed.
As far as I'm aware, it is fine	Thank you.
Options for mixed Ethnic groups to be added	The family origin options within the electronic FOQ are designed to be a direct copy of the NHS Sickle Cell and Thalassaemia Screening Programme Family Origin Questionnaire. Multiple family origins are able to be selected from the list by clicking on the relevant lines required. If the option you are looking for is not available please select one of the "Any other" options and manually type in the family origin information.
No improvement required	That is good to know.

Author: Alex MacPhie Edition No: 1

University Hospitals Bristol and Weston NHS Fou	ndation Trust Laboratory Medicine	
User Survey Report for Sickle Cell and Thalassaemia Screening Laboratory User		
Survey 2021 (UHBW)		
Document Reference: SC&ThalUsersurvey2021 Haematology Department		
Nil	Thank you.	

How might the results delivery service be improved?

Comment	Laboratory Response/Action
None	Thank you.
No	
Results are sometimes not available on ICE when other booking blood results are available but generally it is good.	The laboratory adheres to the 3 working day guideline for SCT A/N Haemoglobinopathy screening. As there are many other tests involved in the full screening please contact the Laboratory if the Haemoglobinopathy screening is not meeting this requirement.
Some results take too long to appear on system	Same as above.
I feel the labs communicate well	Thank you.
Results delivery is quick and easy to print off to document in patients notes.	Thank you.
We check them on ICE directly. This works well.	
They can't	
Nil	
FOB testing in capitals to make it clear – some have capitals and some don't.	The family origin options within the electronic FOQ are designed to be a direct copy of the NHS Sickle Cell and Thalassaemia Screening Programme Family Origin Questionnaire but the feedback is taken on-board.

Please add any other comments you wish to make about the service provided by the Haematology laboratory at UHBW – BRI site (responses available from WGH team).

Comment	Laboratory Response/Action
I have nothing to add	Thank you
Very good service	
The lab are always very help when we phone and dont really know what we are talking about, never feel any judgement, everyones always happy to explain and help us.	The Laboratory always strives to be as helpful as possible when contacted by any of our users and it is good to hear this feedback.
None, don't tend to use BRI as samples go to	Thank you.
WGH	
Screening bloods for maternity patients for HIV	Unfortunately the other screening bloods are

Author: Alex MacPhie Edition No: 1
Approved by: Donna Connolly Active Date: 20th December 2021

Page 13 of 14

University Hospitals Bristol and Weston NHS Foundation Trust	Laboratory Medicine	
User Survey Report for Sickle Cell and Thalassaemia Screening Laboratory User		
Survey 2021 (UHBW)		
Document Reference: SC&ThalUsersurvey2021	Haematology Department	

AND HEP that are taken in Weston seem to take	out of our control for Haeamtology (performed
ages to report results	at NBT) but will be feedback to the screening
	team.

Conclusion and Summary

The results of this Sickle Cell and Thalassaemia Screening user survey reflects the high quality service provided by Haematology laboratory across both sites of University Hospitals Bristol and Weston NHS Foundation Trust.

Using our target satisfaction criteria of >90% satisfactory response, it is clear that we continue to meet the needs of our users in the majority areas. The FOQ does continue to be problematic for some users. The FOQ section has been upgraded recently and aligned with the NHS Sickle Cell and Thalassaemia Screening Programme Family Origin Questionnaire as a direct copy. This will always still have some limitations e.g. multiple ethnicities, but options are available in the ICE system to accommodate this. The nature of the drop down boxes being compulsory is again a limitation of the ICE system. We appreciate that it can be time consuming and frustrating if the data is lost but the ICE FOQ has to accommodate the requirements of the NHS Sickle Cell and Thalassaemia Screening Programme Family Origin Questionnaire.

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 challenge. 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 Sickle Cell and Thalassaemia Screening User survey in 2022, to reassess our performance and monitor any improvement.

If you want to 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 the Blood Sciences Automation Laboratory Manager Alex MacPhie alexander.macphie@uhbw.nhs.uk who will be happy to respond to any feedback.

If you prefer, please contact the Head of Service Elizabeth Worsam <u>Elizabeth.worsam@uhbw.nhs.uk</u>

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