

ANNUAL REPORT

2022/2023

Table of Contents

EXECUTIVE SUMMARY	3
EPA OVERVIEW	5
About us	5
Our Hospital Sites.....	5
Our services.....	6
EPA Senior Leadership Team:	7
Our Values- PRIDE	10
Our stakeholders	12
National Antenatal Screening programs	12
SUMMARY OF ACTIVITY & KPI's	13
Key Performance Indicators (KPI's)	13
EPA High level Risks in 2023	14
Incidents & Feedback.....	14
EPA Complaints	14
Monitoring of Incidents & Error logs	15
PEOPLE STRATEGY	16
TRAINING & DEVELOPMENT	17
Developing our staff.....	17
EPA holds training status for:	17
Mandatory Training and Appraisal.....	17
Continuous professional development (CPD)	17
EPA Training achievements	18
Staff Competency Assessment.....	18
Promotional Activities and Other developments	19
Future of EPA training	19
ACCREDITATION.....	20
Accreditation Status for All Departments as of September 2023.....	20
CUSTOMER SURVEY & FEEDBACK	20
User surveys	20
Other user feedback	21
Compliments	21

STAFF FEEDBACK AND SUGGESTIONS	22
Summary of EPA ACHIEVEMENTS 2022- 2023	23
ANDROLOGY ACHIEVEMENTS	23
ANALYTICAL SPECIALIST CHEMISTRY (ASC) ACHIEVEMENTS	23
BLOOD TRANSFUSION ACHIEVEMENTS	23
CLINICAL BIOCHEMISTRY ACHIEVEMENTS.....	23
HAEMATOLOGY ACHIEVEMENTS	23
IMMUNOLOGY ACHIEVEMENTS	24
JPUH BLOOD SCIENCE ACHIEVEMENTS	24
MICROBIOLOGY ACHIEVEMENTS.....	24
PHLEBOTOMY ACHIEVEMENTS	25
QEHKL ACHIEVEMENTS.....	25
QUALITY TEAM ACHIEVEMENTS	25
RECEPTION STAFF ACHIEVEMENTS	26
Some awards/recognition	26
EPA CHALLENGES & OBJECTIVES 2023- 2024.....	27
EPA’S OBJECTIVES.....	28
PATHOLOGY IT	28
CONCLUSION & ACKNOWLEDGEMENT.....	29

EXECUTIVE SUMMARY

Eastern Pathology Alliance (EPA) has had a very busy and challenging year with some notable successes, maintaining accreditation, and some ongoing challenges.

Following the Covid-19 pandemic, our laboratories have seen a significant increase in workload (over 30 million tests last year) as clinical services ramp up to tackle backlogs - managing this increase in workload within existing resources has placed a strain on our services and most importantly on our staff.

Whilst we are now hopeful that the high risks associated with Virology and Medical Microbiology will be removed within the next year following successful recruitment drives, there are still issues with shortage of clinical and BMS staff in Immunology, and blood sciences work at JPUH, NNUH and QEH, and over-reliance on locums. The knock-on effect of this work has put a strain on staff to complete quality work, this was reflected in the UKAS assessments in Blood Transfusion.

EPA will be ten years old in February 2024 with limited increases in staffing but a massive increase in workload. With the increase in workload, we need to ensure that each test is needed (i.e. Diagnostic Stewardship) this is difficult, as there are limited staff to do this work.

A huge number of UKAS assessments have occurred, often there have been prolonged delays in responses from UKAS which has placed significant strain on the quality team. Discussions are ongoing with UKAS to consolidate assessments as much as possible to make them more manageable. I would like to thank our Quality Manager, Diane Murley and the team for all of their efforts in achieving such a good result given the difficult circumstances.

This year has seen our first Immunology STP student, with infection sciences to follow in 2024. The next year should also mean EPA has a full-time Immunology Consultant.

There has been a number of changes in the year, I would like to thank Dr Reham Soliman for her work as Head of Microbiology and to Carol Harvey as Network Blood Transfusion Manager, I welcome Dr Davis Nwaka as the new Service Director for Microbiology, and Eleanor Byworth as Network Blood Transfusion Manager.

This year also has seen changes at JPUH and QEH in management, and we would like to thank the previous team for their contribution to EPA and wish their successors respectively a successful time.

I would like to thank Dr Lisa Cooke for her many years of hard work as Chair of Clinical Governance and welcome Dr Emily Leach as the new Clinical Governance Chair. Also, a big thank you to Dr Allison Chipchase who continues to support this role as Deputy Chair. I am grateful to them all for the immense work they do in Clinical Governance across EPA on my behalf. Also thank you to Dr Ash Kaul, Consultant

Urologist for his contribution as Clinical Lead for Andrology, a role that we couldn't fill for a significant period of time. Ash has done a fantastic job in directing the development of the service and supporting the staff. Ash is moving on to a different job, he will be greatly missed.

In the network there has been a big change with the formal creation of East Coast Pathology network (ECPN), which is now recognised by the national NHSE Pathology team, and supported by the EPA board. EPA staff are involved with shaping ECPN, with Dr Davis Nwaka as overall clinical lead for ECPN, and Dr Emily Leach as the lead for clinical biochemistry. We look forward to working with colleagues at East Suffolk and North Essex NHS Foundation Trust (ESNEFT) and West Suffolk NHS Foundation Trust in a collaborative manner.

This is my final Annual Management Review (AMR) as Chief of Service as I am due to complete my second tenure in spring 2024. I would therefore like to use this opportunity to thank all our 420 multi-disciplinary staff across EPA for your incredible support over the past six years. With EPA turning ten years in February 2024 there will no doubt continue to be changes, some positive (better LIMS, quality champions and a business manager for example), and some challenging. We are ranked the 6th largest of the 29 Pathology Network in England by NHS England.

I am confident that we have a strong foundation, and that we will continue to deliver a high-quality clinical and diagnostic service to our population of over one million people in Norfolk and Waveney.

Dr Ngozi Elumogo,

EPA Chief of Service

EPA OVERVIEW

About us



cal Biochemistry, Immunology, microbiology services to the three veney ICS. The alliance formed NHS Foundation Trust (NNUH), st (JPUH) and Queen Elizabeth back in 2014, was one of the part of the wider East Coast

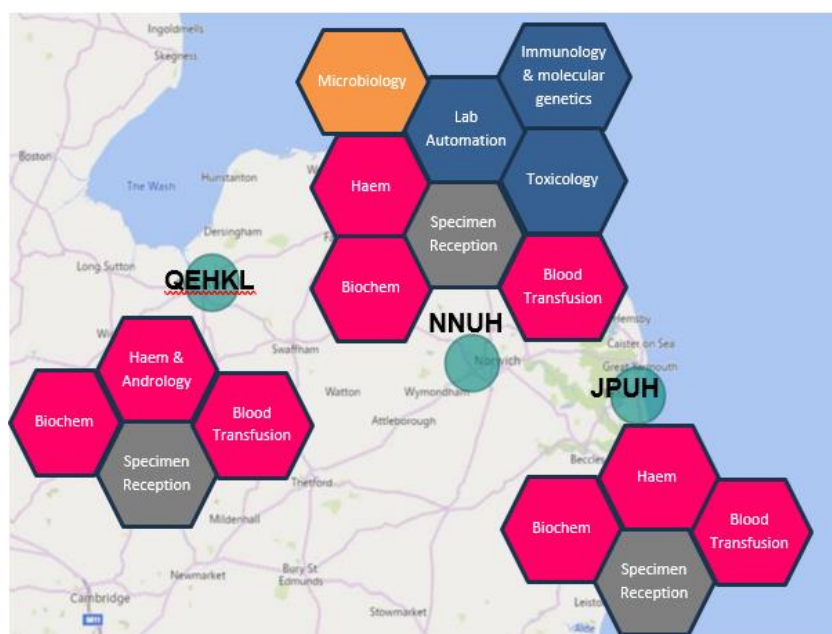
Pathology Network (ECPN), collaborating with East Suffolk and North Essex NHS Foundation Trust (ESNEFT) and West Suffolk NHS Foundation Trust (WST).

Most pathology activity within EPA is carried out at NNUH based laboratories (the 'hub'), whilst the laboratories at JPUH and QEHLK provide Essential Service Laboratories ('hot labs') to serve the acute needs of the hosting hospital.

Figure 1: EPA Configuration

Our Hospital Sites

Norfolk & Norwich University Hospital (NNUH)



NNUH provides acute hospital care for a tertiary catchment area of up to 1 million people.

James Paget University Hospital (JPUH)



JPUH provides a full range of districts general hospital services for population of Great Yarmouth, Lowestoft and the surrounding areas.

Queen Elizabeth University Hospital (QEHL)



QEHL serves a population of approximately 260,000 residing mostly in West Norfolk but with some overlap into the counties of Cambridgeshire and Lincolnshire.

Our services

EPA webpage- <https://www.easternpathologyalliance.nhs.uk/>

EPA Senior Leadership Team



Dr Ngozi Elumogo- EPA Chief of Service/ Clinical Director

I am a Consultant Clinical Microbiologist who has worked in various senior clinical leadership and research roles as a substantive NHS Consultant over the past 23 years in Norfolk & Waveney. I was Infection Control doctor and Director of Infection Prevention and Control (DIPC) for 17 years across two hospitals – James Paget Hospital and Norfolk and Norwich University Hospital (NNUH). As Pathology Incident (COVID) Director for Norfolk & Waveney during the COVID19 pandemic, I led the implementation of the government's NHS COVID testing strategy for our county.

I am also a Senior Research Fellow in Translational Medicine at the Quadram Institute Bioscience, Norwich (QIB), where I collaborate with research scientist colleagues. My main research interests are the study of gut microbiota in health and disease, and the use of Faecal Microbiota Transplantation (FMT) in treatment of recurrent *Clostridioides difficile* infection (CDI), and in clinical trials for various diseases associated with disruption of healthy gut microbiota (dysbiosis).

I also contribute my expertise to the wider field of global health as a volunteer, working with Cambridge Global Health Partnership to improve laboratory diagnosis, antimicrobial stewardship and infection prevention and control in developing countries.

I was Chief of Service (Clinical Director) for Eastern Pathology Alliance, and Laboratory Medicine from 2018 to March 2024, and provided leadership and direction for our Pathology network over these years, a role which I found both challenging, rewarding and enjoyable.

It is in that capacity that I am delighted to commend this annual report (2022/23) to you.

EPA Clinical Leads

Dr Hamish Lyall



Dr Lyall is the lead haematologist for NNUHFT haematology laboratory. He has over 15 years of experience working as a consultant haematologist. His principle clinical practice is in the field of non-malignant haematology with subspecialty interest including immune haematology disorders, obstetric haematology and thrombosis and haemostasis.

Dr Javier Gomez



I am the Chemical Pathologist consultant, and Service Director for EPA Clinical Biochemistry and Immunology. As Service Lead I have responsibility for providing overall clinical leadership for EPA Clinical Biochemistry and Immunology. I have delegated responsibility from the Chief of Service for patient safety and quality, staff management, service delivery, service improvement, financial control, delivery of cost improvement and the integrated performance of the team.

Dr Suzanne Docherty



I'm a Haematology Consultant and Blood Transfusion lead at NNUH, and also currently Deputy Chair of the East of England Regional Transfusion Committee. My primary role is to form a clinical interface between clinical teams around the Trust, in Primary Care and across the EPA with the blood transfusion service, help to develop our policies and drive developments in the service, and support laboratory staff and transfusion practitioners with clinical problems and incidents involving the transfusion service. I am also an enthusiastic teacher and trainer in blood transfusion, and hold update sessions from transfusion conferences with staff across the EPA.

Dr Davis Nwaka



With the climatic changes facing the world there is an increasing pressure caused by new and emerging infection in our community. We have a Microbiology department with modern testing platform and highly qualified personnel capable of detecting and managing various infection. Our staff are dedicated, hardworking and skilled to deliver the services required to manage infection in our community as well as collaborate with the UKHSA to prevent infections. I am proud to work as the Service Lead for Microbiology Department.

Dr Allison Chipchase



I am Dr Allison Chipchase, a Consultant Clinical Biochemist. I am the Clinical Lead for Antenatal Trisomy Screening in Norfolk, the Deputy Director of the SupraRegional Assay and Advice Service for Calcium and Bone Metabolism in the UK, the Clinical Lead for the Analytical and Specialist Chemistry (ASC) Endocrine section and the Clinical Lead for QEH Biochemistry. I am also the Regional Tutor for trainee Clinical Scientists in Biochemistry for the East of England.

Dr Emily Leach - Consultant Clinical Lead for NNUH Biochemistry Automation & JPUH Biochemistry. Clinical Governance Lead for EPA

Dr Lisa Cooke - QEHL Haematology Consultant Lead

Dr David Sparksman - JPUH Haematology Consultant Lead

EPA Management Team

Nigel Roberts- EPA Network Service Operations Manager

Eleanor Byworth- EPA Network Blood Transfusion Manager

Reenesh Prakash- EPA Network Microbiology Manager

Vyjayanthi Bilyard- EPA Network Blood Science Manager

Our Values- PRIDE

Every NHS organisation and service has a vision which it strives to achieve, along with a set of values which staff should embody and which should shape everything that we do. Our PRIDE values enable **all our staff and the patients we cater for to have the best experience.**

People-focused: We act with care, compassion and kindness and value each others' diverse needs.

Respect: We take an honest, open and ethical approach to anything we do.

Integrity: We take an honest, open and ethical approach to everything we do.

Dedication: We work as a team and support each other to maintain the highest professional standards.

Excellence: We continuously learn and improve to achieve the best outcomes for our patients and our hospital.

The PRIDE values influence all our working lives – for example, recruiting the best people, celebrating achievements, providing standards for how teams work together and for our development.

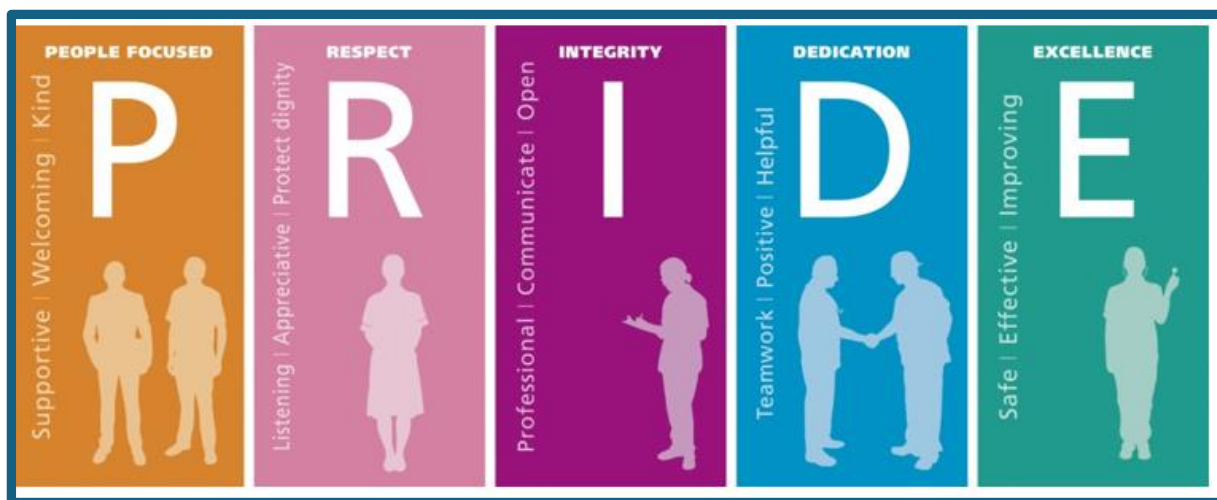


Figure 2: EPA PRIDE VALUES

As EPA Board consist of three independent trust, we are also guided by the JPUH & QEHLK trust core values.

JPUH-Courtesy and Respect, Attentively kind and helpful, Responsive communication, Effective and Professional

QEHLK- Kindness, Fairness & Wellness

Our stakeholders

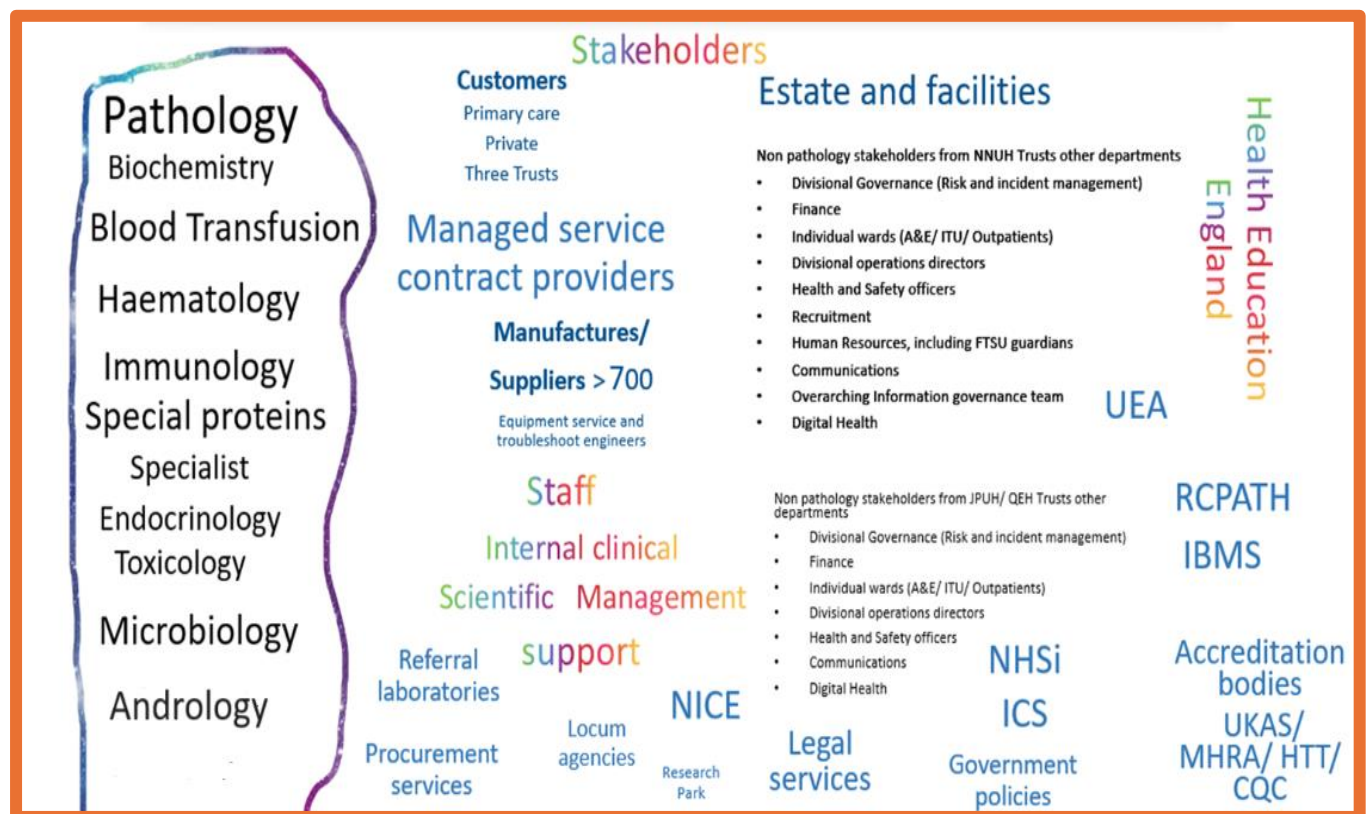


Figure 3: EPA Stakeholders

The above image demonstrates the complexity of stakeholder engagement.

National Antenatal Screening programs

EPA participates in a range of antenatal screening programs and the services have maintained above target key performance indicators (KPI) in majority of the programs.

- Infectious Diseases- This includes HIV, Hepatitis B, Syphilis which remains above the achievable standard of >99% with no incidents reported.
- Sickle Cell and Thalassaemia- The timeliness of this antenatal screening test has steadily been improving towards the achievable standard of >75%.
- Fetal anomaly trisomy screening - This includes screening for Down's, Edwards' and Patau's syndromes. We consistently remain above the achievable standard of >99.5% of our results issued within 3 working days.

SUMMARY OF ACTIVITY & KPI's

Since 2019 there has been a significant workload increase. This is highlighted in the table below.

Activity	Workload growth since 2019
Blood Sciences (GP Direct Access)	141%
Blood Sciences (Non-Direct Access)	127%
Microbiology	106%
Phlebotomy	106%

Table 1: EPA Activity

Key Performance Indicators (KPI's)

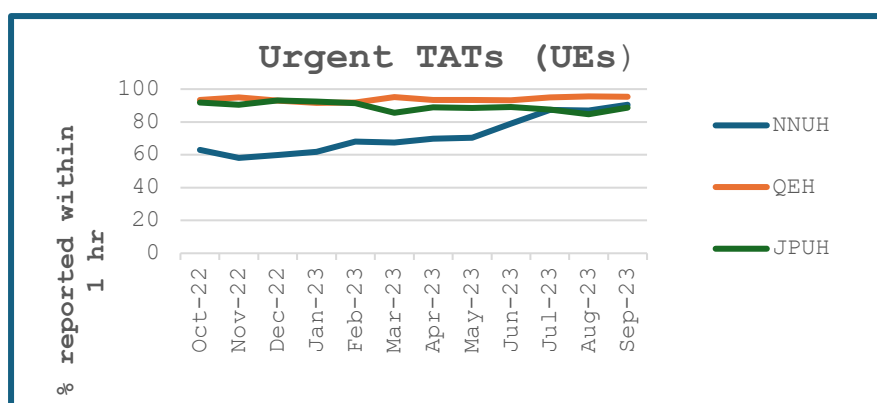


Figure 4: EPA Turnaround time (TAT) within 1 hr- Acute Chemistry October 22-September 23

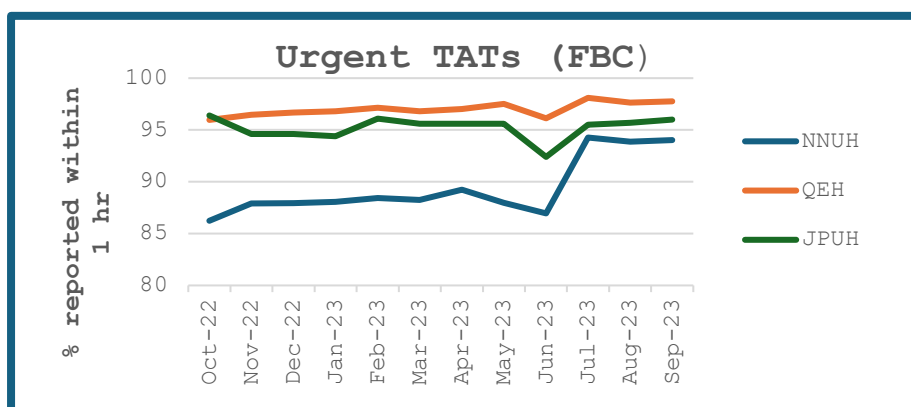


Figure 5: EPA Turnaround time (TAT) within 1 hr- Acute Haematology October 22-September 23

EPA High level Risks in 2023

The graph below shows the number of risks on the EPA risk register at the end management review period.

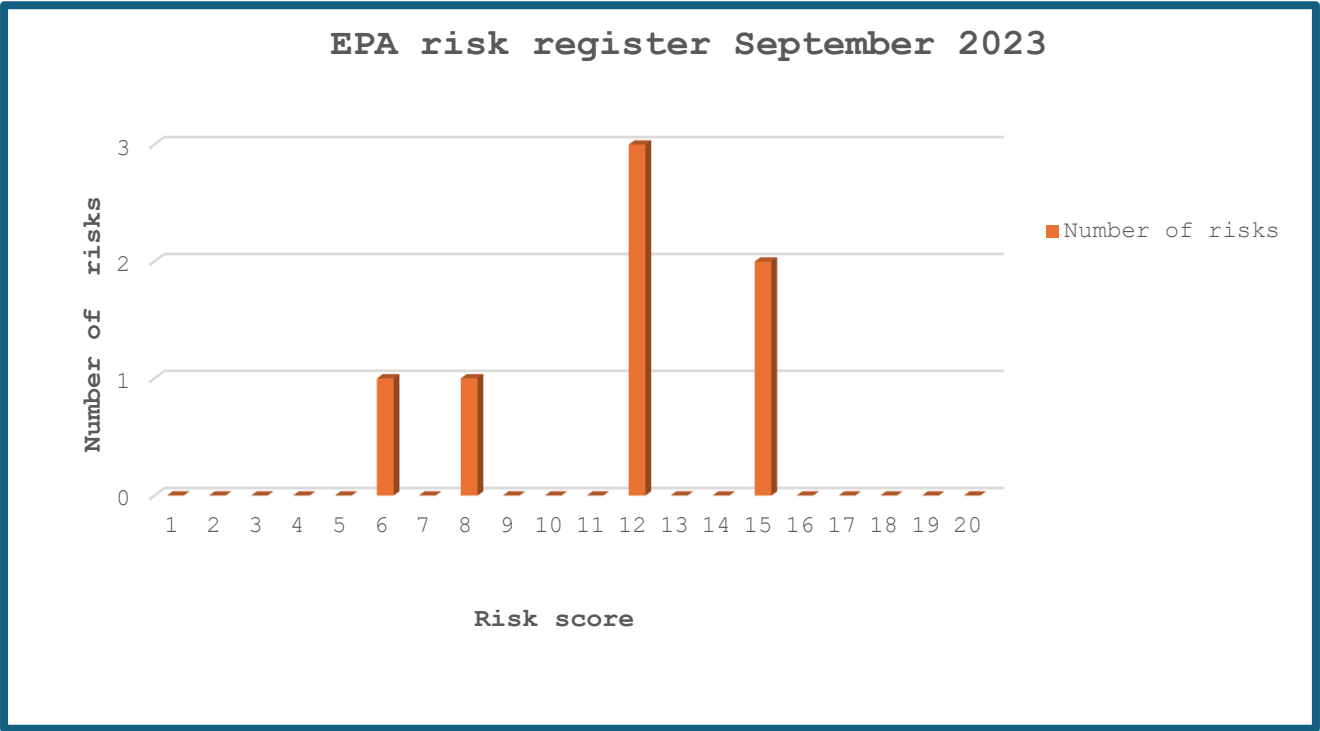


Figure 6: EPA Risk register September 2023

Incidents & Feedback

EPA Complaints

EPA Number of complaints 2021-2022	EPA Number of complaints 2022-2023
7	16

There was no clear trend to identify the increase in the number of complaints raised between the two review periods. The complaints raised in the review period were noted and acted upon.

Monitoring of Incidents & Error logs

Corrective Action & Preventative Action (CAPA) trending

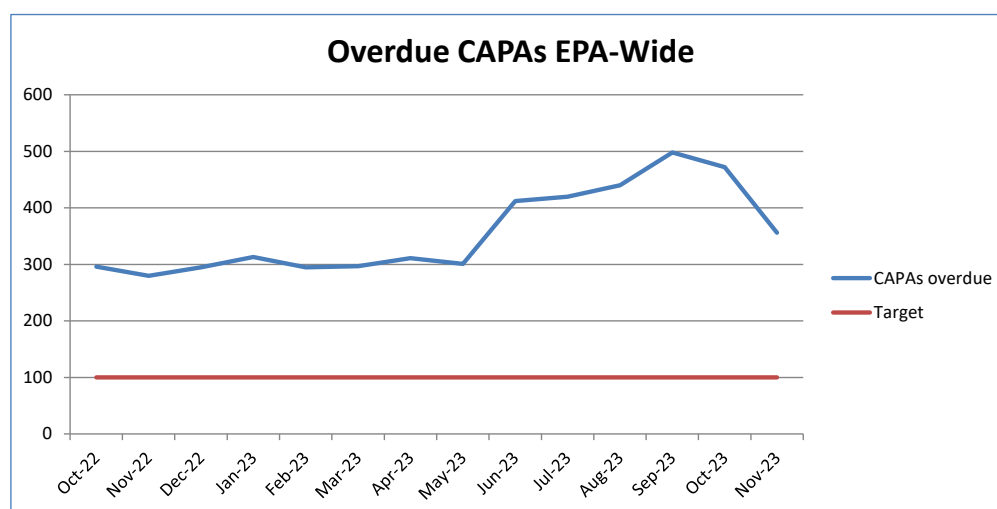


Figure 7: EPA Overdue CAPAs

The graph above shows the number of Overdue CAPAs across EPA as of 2023. The increase in Overdue CAPAs are due to a number of factors such as additional staff, additional equipment, increase in workload etc.

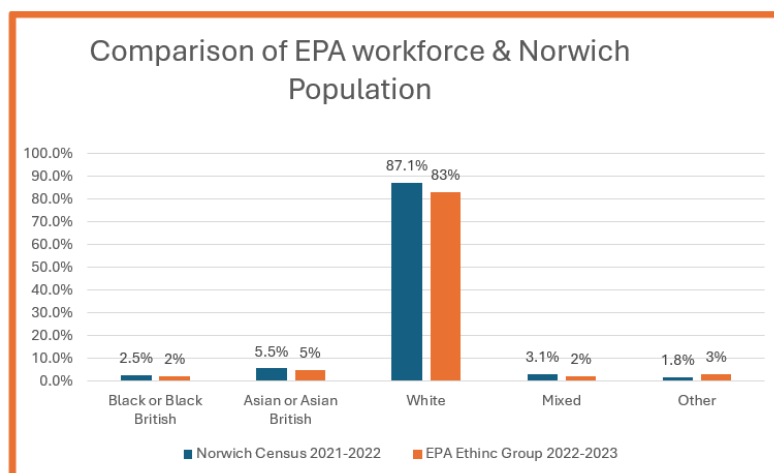
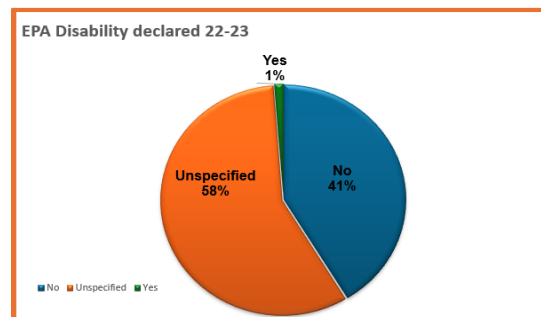
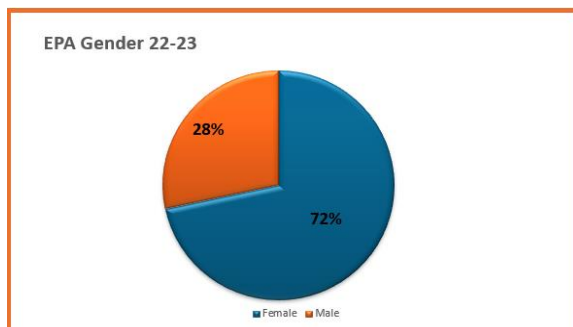
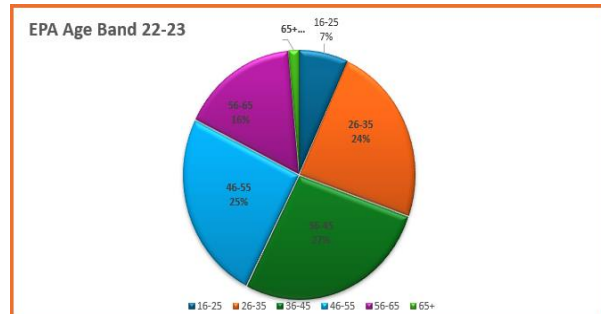
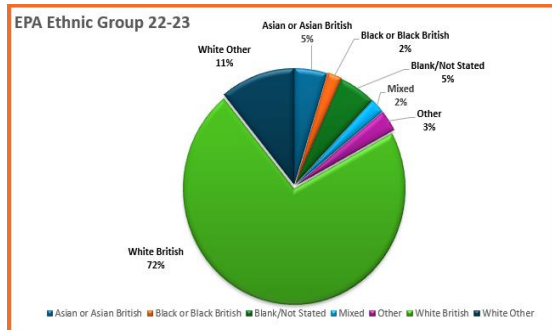
During the review period 1749 Corrective Actions/Preventive Actions (CAPAs) were raised in total compared with 1984 over the previous 12 months. 1402 of these can be considered 'reactive', i.e. nonconformities and observations, and a breakdown is shown in the table below.

Category	No. raised	No. closed
Internal audit findings	538	396
Error logs	437	317
EQA failures	237	202
External audit	146	136
Equipment breakdowns	52	34
Findings from Health & Safety inspections	9	8
User complaints	16	15
Total	1435	1108 (77%)
Total for 2021/22	1636	1179 (72%)

The overall number of CAPAs raised represents a 16% increase compared with the previous 12-month period. Notable changes are a 47% increase in error logs, an 86% increase in EQA issues, a 52% increase in equipment breakdowns and a 47% decrease in UKAS/MHRA findings.

PEOPLE STRATEGY

EPA PATHOLOGY WORKFORCE



EPA workforce reflects the demographic ratio of the current population of Norfolk & Norwich.

TRAINING & DEVELOPMENT

Developing our staff

EPA enables career progression by providing a range of academic qualifications for staff. Currently there are 115 members of staff enrolled in a range of courses. This ranges from Bachelor of Science (BScs), Master of Science (MScs) Master of Business Administration (MBA), Doctor of Philosophy (PhD), British Blood Transfusion Society (BBTS), Apprenticeships (Ranging L2-L7), Fellowship of the Royal College of Pathologist (FRCPath), IBMS Certificate of Extended Practice, Scientist Training Programme (STP), and Higher Specialist Scientific Training (HSST).

EPA holds training status for:

- Support workers' qualifications (Certificate of Achievement)
- Pre-registration training (Certificate of Competence)
- Placement Student training (PTP training manual and Certificate of Competence) – NNUH only.
- Post Registration training (Specialist Diploma & higher)
- Clinical Scientist (STP) in Chemistry, Immunology and Microbiology, and HSST programme in Chemistry.

Mandatory Training and Appraisal

EPA has met the trust target of >90%.

Continuous professional development (CPD)

On top of the formal academic courses, EPA offers a range of presentations, webinars and training courses that contributes to CPD. The webinars and virtual events offered have been attended by 379 members of staff this year.

EPA Training achievements

It has been another successful year of staff undertaking professional and academic training this year (Oct-22-Sep-23).

The following qualifications have been achieved since Oct 21- Sept-22:

- IBMS Registration portfolio (Certificate of Competence) – (including placement students) **18** members of staff.
- IBMS Specialist Diploma – **4** members of staff.
- IBMS Certificate of Achievement – **1** member of staff.
- IBMS certificate of Expert practice in Training – **2** members of staff.
- Master of Science MSc – **2** members of staff.
- Fellow of the Royal College of Pathologists FRCPath – **1** member of staff obtained part 1 and 1 part 2.
- Bachelor of Science BSc - **1** member of staff.

We have also had attritions, mainly due to staff leaving:

- Certificate of Competence -1 member of staff.
- Specialist Portfolio – 7 members of staff.
- Certificate of Achievement – 2 members of staff.
- MSc – 1 member of staff.
- Top-up module - 3 members of staff.

Staff Competency Assessment

The impact of increased workload has affected competency compliance. Nonetheless, it has remained steady throughout the year at 74.5%. We have plans in place to improve the competency to reach our target of 90%.

Promotional Activities and Other developments

Promotional activities have continued including the Pathology summer school.

We continue to offer lab tours to students and other professional groups, and we have been involved in a few career events (both remotely and physically).



EPA is also involved with various STEM projects.

EPA have registered with the IBMS about offering Harvey's Gang tours to children undergoing long term care in the hospital. EPA currently is in discussions with Children's Services, and we should run our first tour in 2024.

Future of EPA training

We are excited about moving forward with the various STEM projects.

Encourage more staff to undertake the training to become IBMS assessors.

The IBMS have launched a training grant available to networks to help staff development.

The IBMS are also encouraging linking up with other networks nationally to pull resources. Discussions with ECPN about potential ideas:

- Development of an ECPN learning/ educational website or internet site.
- CPD recording either as part of above or standalone.
- Develop training programmes for band 2-4.
- Virtual lab simulation.

ACCREDITATION

Laboratories are accredited by multiple accreditation services. The main accreditation services are, UKAS (United Kingdom Accreditation Services) & MHRA (Medicines and Healthcare products Regulatory Agency).

Accreditation Status for All Departments as of September 2023

Department	Accreditation status (YES or NO)	Next due
NNUH Biochemistry (Automation)	Yes	March 2024
NNUH Haematology	Yes	March 2024
NNUH Blood Transfusion	Yes	January 2024
NNUH Analytical Specialist Chemistry-Endocrinology	Yes	March 2024
NNUH Analytical Specialist Chemistry-Toxicology	No	January 2025
EPA Immunology	Yes	March 2024
EPA Microbiology	Yes	June 2024
JPUH Blood transfusion	Yes	January 2024
QEHKL Blood Science and Blood Transfusion	Yes	February 2024

Table 1: Showing Accreditation Status for all EPA Departments (Click on status to find the latest scope of accreditation)

Note: Application for accreditation for Analytical Specialist Chemistry is delayed due to the change in equipment. This means we can achieve accreditation with our new equipment.

CUSTOMER SURVEY & FEEDBACK

User surveys

User surveys are issued every 18 months. The last survey was done in October 2022. There were 41 responses to the survey. The comments raised were varied: 11 of them related to various aspects of using WebICE but no major service failures were raised. Due to low user response, EPA are looking to implement ongoing surveys with

suggestion boxes, posters and QR codes to improve user engagement. The next survey is due in 2024.

Other user feedback

The Complaints and Compliments and Contact Us pages on the EPA website (<https://www.easternpathologyalliance.nhs.uk/>) are available as a means of users providing feedback about the service. No feedback has been received.

Compliments

EPA received 12 compliments throughout the period between Oct 22-Sept 23, below are a few.



Figure 8: Thank you from a primary care patient in Great Massingham to Microbiology

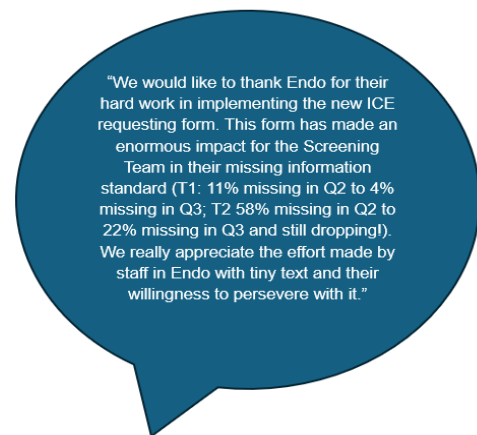


Figure 9: Antenatal Screening coordinator thanking Endocrinology



Figure 10: Thank you from Consultant in Anaesthesia and Intensive care to Blood Transfusion.

STAFF FEEDBACK AND SUGGESTIONS

96 staff suggestions were logged between October 2022 and September 2023 compared with 99 in the previous 12 months. In terms of departments these suggestions were aimed at, the numbers are as follows:

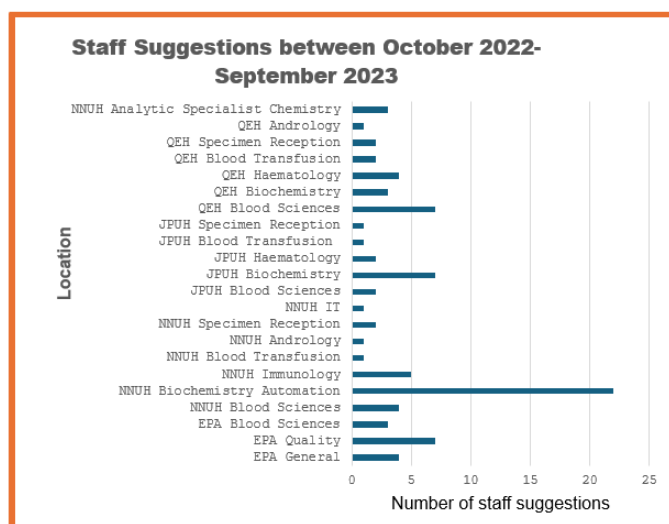


Figure 8: EPA Staff suggestions between October 2022-September 2023

By September 2023 sixty-two of these suggestions have been actioned, and the rest are in progress.

Summary of EPA ACHIEVEMENTS 2022- 2023

ANDROLOGY ACHIEVEMENTS

- Sample production room at NNUH and QEH implemented.
- Online appointment system, Dr Doctor implemented for andrology has improved booking appointments at the patients' convenience, opposed to the previous the 9-5 telephone service.
- JPUH and NNUH andrology services merged, improving quality compliance.
- New lab space identified at NNUH and used to allow increase in testing capacity.

ANALYTICAL SPECIALIST CHEMISTRY (ASC) ACHIEVEMENTS

- Endocrinology assays underwent another successful UKAS assessment.
- Upgrade of Maternal Serum Screening (MSS.) software (LifeCycle 4 to LifeCycle 7.5) to improve performance.

BLOOD TRANSFUSION ACHIEVEMENTS

- Implementation of new Grifols blood grouping analysers across all 3 sites. This was a significant project and achievement for blood transfusion.
- Implementation of a new blood fridge in interventional radiology (NCIR)

CLINICAL BIOCHEMISTRY ACHIEVEMENTS

- Maintain UKAS accreditation.
- Turnaround time target improved and now above 90%.

HAEMATOLOGY ACHIEVEMENTS

- Successful UKAS surveillance visit. Post assessment evidence submitted, awaiting formal approval in May 23 pending

- Additional tests added to the repertoire of accredited tests. (Extension to scope (ETS) UKAS items pending approval Sickle Cell Solubility and CareUS RDT)
- Coagulation tender awarded to Werfen. Significant cost savings achieved.

IMMUNOLOGY ACHIEVEMENTS

- Successful UKAS surveillance visit
- Installation of new Flow Cytometer – improve service provision.
- Immunofluorescence tender completed & Contractual agreement for a fifth Phadia – both pending installation.
- Scientist Training Programme (STP) within Immunology
- Continuation of demand management/lean processing resulting in significant cost and time savings
 - Currently just over £90k savings since January and around 1½ days/month time savings.

JPUH BLOOD SCIENCE ACHIEVEMENTS

- Inclusion of an additional band 7 senior BMS post to the establishment.
- EPA Haematology clinical lead appointment
- Multi-disciplinary training commenced.

MICROBIOLOGY ACHIEVEMENTS

- 3 successful IBMS CoC completions to grow our BMS 5 pool.
- Level 6 apprentices have achieved fantastic results in the last year.
- Scientist Training Programme (STP) within Microbiology
- Virology – HEV RNA, HIV-1 RNA, PJ DNA, Liaison
- Bacteriology – National blood culture audit – this looked at bleed to load times, Blood fill volume, the use of double bottles and reporting time for NICU.
- Bleed to load were 100% within 4 hours, fill volume is erratic and requires additional work across all three sites. Reporting times for negative NICU is automatic at 36hrs (100%).

PHLEBOTOMY ACHIEVEMENTS

- Introduced Dr Doctor online appointment system, this have improved accessibility for patients and reduced the number of telephone calls received by the department.
- Reviewed and installed new ward allocation system to improve support and efficiency on NNUHFT wards.
- Undertaken competency review and training with clinical skills to improve infection control compliance.
- Introduced lab tours for phlebotomist to improve understanding of whole testing process to improve moral and knowledge.

QEHKL ACHIEVEMENTS

- Successfully passed 1st surveillance UKAS visit Feb 2023
- 2nd surveillance visit from UKAS was a success – assessors were very impressed with progress we have made.
- New Chief appointed Aug '23
- Reduced number of bank and agency staff and lowered significantly Premium Pay bill Oct '23

QUALITY TEAM ACHIEVEMENTS

- User website- continued development over 2023, including the addition of communication and FAQ pages.
- Review of suppliers (goods, services and EQA) and referral labs- remains high- 93%
- Initial gap analysis for transition to ISO15189:2022 completed- changes to be implemented with immediate effect.

RECEPTION STAFF ACHIEVEMENTS

- Retention of staff has been difficult due to the entry level NHS banding. However, during the past year, staff retention remain high throughout with only 1 member of staff leaving the department.
- We have a few staff members who are doing the healthcare Scientist and Biomedical Scientist apprenticeship programs. As a result, pathway from support worker to registered BMS has made **Biomedical Support Worker** posts more attractive and should help with future workforce planning throughout the laboratory.
- The various test code glossaries were consolidated into a single EPA-wide glossary (EPA-GENM-004) in April 2023. This involved reviewing tests available to users.

Some awards/recognition



November 2022: Julie Kahler, Personal Assistant in Clinical Biochemistry won a highly commended PRIDE Award for her commitment to high quality services and the wellbeing of her team.



November 2022: At the NNUH Staff awards in November Michelle Frost (Analytical Specialist Chemistry) won the Silver Award in the Clinical Support Staff Member of the Year category, and the Anti-Spiking Team won the Gold Award in the Healthcare Science Innovation category for the Anti-Spiking Campaign.



July 2023: PRIDE award for a successful UKAS assessment for Microbiology.

EPA CHALLENGES & OBJECTIVES 2023- 2024

Despite the many EPA's achievements in service provision, quality, staffing and new equipment installation, it experienced a number of challenges in all departments during the 2022-23 financial year

The key high-level challenges include under-capacity of equipment and equipment breakdowns & outages, non-completion of quality activities in time, limited budget and national staff shortages. The lack of a single computer system has hindered network working, and with the age of the main blood sciences computer has added to our risks.

Of these challenges, limited resources and staffing shortages were, and still are, the most troublesome as we moved into 2023-24.

EPA'S OBJECTIVES

The aim for 2023 was to have clearly defined Quality Objectives that were achievable and SMART. In previous years many of the quality objectives were aspirational rather than being well planned and as a result, many were not completed.

The key high-level objectives include Maintaining UKAS accreditation and Review new ISO standards, ISO15189:2022 to ensure ongoing compliance for UKAS accreditation, Recruit more staff to address staffing issues, Increase number of OOH competent staff, upgrade/implement equipment and improve on quality management tasks.

RESEARCH AND INNOVATION

A new Chief Biomedical Scientist post was created for the EPA Research and Development. Since employing, Michelle Frost, unrecovered funding from R&D projects has been identified and in progress of recovering costs and improving income position.

National Institute for Health and Care Research (NIHR) changes and hospital targets to substantially increase trials and R&D activity in the NNUH Trust in line with NHS improvement (NHSI) and NIHR targets.

A total of 74 active R & D studies involving EPA has gone live within the past 12 months.

More research opportunities have been extended/offered to all suitable qualified EPA staff.

PATHOLOGY IT

It remains the long-term ambition of EPA to have a single Laboratory Information Management System (LIMS), to this end EPA is working with the three acute trusts over a long-term strategy for Pathology IT.

Manual transcription of results is recognised as a source of error and increases workload. Progress has been made in obtaining NPEx, through the labtrak upgrade at NNUH. Work is ongoing with QEHL to fully roll out electronic requesting.

The issue with IT is being addressed by the upgrade of the server at NNUH for blood sciences and plans being developed by the three trusts.

CONCLUSION

There is huge pride in what we have achieved, the number of tests processed, over 35 million in the year, and the large increases, over 30% workload increase in requesting from primary care, which has been achieved without an increase in staff levels.

Throughout this challenge to EPA, we have maintained our accreditation, and added new tests to our repertoire. This is increasingly difficult, but the professionalism of staff has shown through.

EPA has been working as part of East Coast Pathology Network (ECPN) this offers opportunities to look to shared learning, mutual support and further cost savings. We have worked together to deliver a joint coagulation tender. Furthermore, we are looking at opportunities in immunology and maternal screen services.

As the workload grows there needs to be increased development of staff, we are near the time when our first apprentices qualify which will add to the pool of qualified staff. We have our first STP student in immunology, which is the first step in maintaining the clinical service in immunology. We have also applied for our first STP student in microbiology to start in 2024/25.

Overall this year has been a challenge, the management of EPA would like to thank the staff that have worked extra to maintain our service, meaning we have an excellent service to patients in spite of the challenges we have faced.

Acknowledgement:

Profound appreciation to all EPA staff who have contributed directly or indirectly to this first Annual report of Eastern Pathology Alliance. I would also like to specially thank Vyjayanthi Bilyard (VJ), EPA Network Blood Sciences Manager and Steven Udo, Senior Biomedical Scientist, Blood sciences for all their incredible hand work in preparing this report.