



Viapath 2014
Advancing together

Quality Account

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Welcome – A message from our CEO

Chief Executive Officer Richard Jones welcomes you to the Viapath Quality Accounts for 2014

I am proud to introduce the Viapath Quality Account for 2014. This is now the second year we have shared our Quality Account publicly as a demonstration of Viapath's commitment to quality and transparency.

The national context to the publication of this Quality Account is the reaffirmation of the need to put patient quality at the centre of all NHS services in the light of the publication of the report of the Public Inquiry into the Mid Staffordshire NHS Foundation Trust chaired by Robert Francis QC. This was followed by the report of the Pathology Quality Assurance Review chaired by Dr Ian Barnes after an incident at Sherwood Forest Hospitals where problems with Pathology quality assurance negatively impacted on a number of cancer patients.

Viapath shares Dr Barnes' commitment to a 'relentless focus on improvement, which champions the patient as a user and operates in a reflective and open manner, so that it can improve not only its own performance, but share its learning to benefit the rest of the NHS.'



Richard Jones
Chief Executive Officer

Welcome – A message from our CEO

Viapath's core values are innovation, expertise and collaboration. These drive the purpose of our laboratories to enable better outcomes for patients. Quality Assurance is central to this purpose and we aim to reflect it in our processes, professional practises and more importantly our culture.

This Quality Account sets out in detail the strategy for quality assurance in Viapath and the outcomes we delivered in 2014. We are using our adoption of ISO15189 as a framework for quality improvement.

I am pleased to say our results demonstrate that we are performing well overall and that on many key measures we have delivered solid improvement compared with 2013. I would like to thank everyone at Viapath for the professionalism and dedication that has made this possible. I look forward to building on this success in the future whilst always remaining focussed on the patients we serve.



Richard Jones
Chief Executive Officer



What is a Quality Account?

Our Quality Account is published each year as part of the movement across the NHS and healthcare to be open and transparent about the quality of services we provide to the public. It has two functions, which are to:

- Summarise our performance and improvements against the quality priorities and standards we set ourselves for 2014, and
- Outline our quality priorities and objectives we set ourselves for 2015.

What are Pathology services and what do we do?

Nearly every patient who uses the NHS has contact with Pathology services, through hospitals, GP surgeries and other care environments. Clinicians, doctors, nurses, midwives and phlebotomists, who are specially trained to take blood, send samples of body tissue such as blood or samples of skin for analysis by our highly trained laboratory employees. We also employ other highly skilled employees such as Information Technology professionals who manage the infrastructure and flow of data to, within and from the laboratories. Results are

Pathology is at the heart of modern healthcare, involved in over 70% of all diagnoses.

Pathologists and scientists are involved in preventing, diagnosing, treating and monitoring diseases to keep people as healthy as possible.

Pathologists are involved in the diagnosis of disorders affecting every organ of the body, and from before birth to after death.*

* Definition from the Royal College of Pathologists



Pathology in the Laboratory

Welcome – Introduction & Overview

returned to the clinician who can then discuss them with the patient to plan their care.

If you want to know more about Pathology, please visit the Royal College of Pathologists website at: www.ilovepathology.org/what-is-pathology

Viapath has 63 laboratories on our sites, which provide the broadest range of highly specialist and routine Pathology services in the UK. We analyse about 30,000 samples each day. In addition, we also provide mortuary services and phlebotomy to some of our Partner hospitals and GP's.

Our Priorities



Advancing
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Quality Account
2014

Our Medical Director Dr Jonathan Edgeworth looks back over 2014 and presents the priorities for 2015.

Our Priorities

‘The publication of our first Quality Account last year was an important step forward for Viapath, then GSTS, in becoming a trusted and innovative independent Pathology organisation.’

Our first Quality Account signalled our commitment to place quality at the heart of our business as a definition of what we do and how we act. Although unlike NHS hospitals we are not obliged to prepare a Quality Account, it demonstrates that our processes are firmly aligned with the NHS governance framework. Indeed as a two-thirds NHS owned organisation, located in NHS hospitals and overwhelmingly servicing NHS patients, we share the same values as a wholly owned public sector service.

At the same time we are proud to have integrated private sector capability. This enables us to draw on talent, energy and ideas from across society to be more creative in how we improve and develop our people and our services. We recognise that quality is not just about what we do today, but how we adapt to new scientific advances for the benefit of tomorrow’s patients. Consequently, we have invested in an Innovation Academy, Innovation Fund and a Scientific Learning and Development Fund that foster both Research and Development and scientific career development to ensure



Dr Jonathan Edgeworth in the Laboratory

Our Priorities

we remain at the forefront of scientific advances. You can read more about progress in these areas from our Scientific Directors, Professor Roy Sherwood and Dr. Dominic Harrington, on page 15.

Finally, I am delighted to introduce Liz Adair, our Head of Quality who joined Viapath in June 2014. Liz was a nurse and NHS manager for many years and brings a particular focus on listening and responding to the needs of patients, highlighting that a quality service must span the whole pathway from sample request and collection to generation of results that enable doctors to make decisions that make a difference for patients. Liz has led the production of this 2014 Quality Account and in doing so has endeavoured to make Pathology quality accessible to clinicians, commissioners, customers and patients alike. It begins with an overview of how we deliver Quality in some detail so people looking in can better understand what we do. We will not need to repeat this in subsequent years, but will identify significant changes in the future with reference back to this 2014 Account. I hope you find it useful and informative and welcome any comments you might have that will help us improve content for next year.



Dr Jonathan Edgeworth
Medical Director



Our Priorities

At Viapath we define Quality as: The right result on the right specimen from the right patient that is accurate, timely, properly interpreted and clinically useful every time, as part of a positive service experience for patients and customers alike.

We used Lord Darzi's** definition of high quality care, which states that Care will be of a high standard if it is:

- Safe
- Effective
- with a Positive Patient Experience

You can read more about our Quality stories for 2014 and the progress we have made on pages 31 - 41.



In the Laboratory

Our Priorities

Our safety

Our 2014 Priority

To raise awareness of patient and employee incident reporting, with a reduction in serious incidents.

By doing the following

- Reduce incidents of harm to employees and patients.
- Further develop a culture & process for reporting laboratory errors and events, to drive quality improvement.
- Achieve a significant improvement in GSTS (rebranded as Viapath May 2014) Health & Safety Performance rating.

Our Progress

Our employees have been actively encouraged to report incidents or issues and we have seen an upward trend in reporting. This is positive, because we are alerted early if there are issues and can intervene quickly to take action.

Our Priorities

Our effectiveness

Our 2014 Priority

To implement a Quality Management System (QMS) which reaches ISO15189 standards.

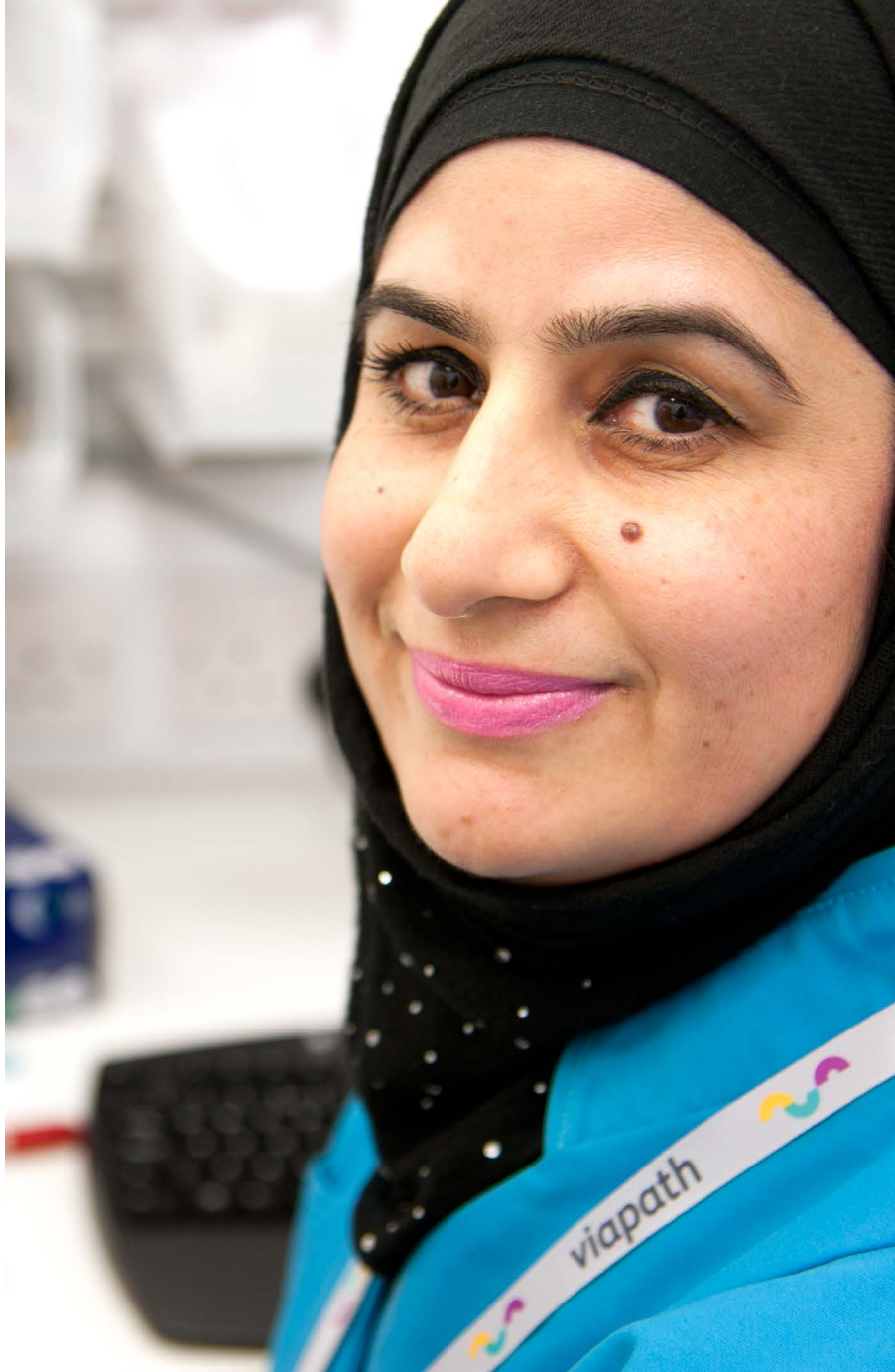
By doing the following

- Implement a single Quality Management System (QMS), for all that we do.

Our Progress

All of our laboratories that were either undergoing a planned CPA surveillance visit, or assessed for CPA as part of the ISO15189 accreditation assessment, retained their CPA accreditation. We continue to roll out the use of an electronic QMS across all sites.





Our Priorities

Our positive patient experiences

Our 2014 Priority

Real time measurement of patient and stakeholder experiences to support learning and progress.

By doing the following

- Achieve improvement in the areas of most concern to patients.
- Achieve improvement in phlebotomy patient survey results.
- Implement a regular customer survey across primary & secondary care.

Our Progress

The issue which concerned our patients and customers most were delays in getting samples to the laboratories, and for the results to be ready. For many patients this occurred in our phlebotomy services. We therefore did some urgent work to understand why, and increased our opening times and staffing. This has resulted in us consistently meeting our waiting times, and very positive feedback from our patients.

Innovation & Scientific Progress



Viapath's Scientific Directors Professor Roy Sherwood and Dr Dominic Harrington, present our innovation & scientific progress.

Innovation & Scientific Progress

‘Viapath strives to create an environment that is supportive of innovative and quality clinical science’

Innovation Academy

The Innovation Academy was founded in 2013 to promote innovation, quality and the professional development of our scientific employees. Within the academy, scientists lead four broad themes: Child Health; Keeping People Healthy; Infectious Diseases and Next Generation Diagnostics.

We use an ongoing programme of Innovation Academy symposia to disseminate and celebrate new ideas with the wider health care community. To encourage collaboration, the symposia are open to our employees, our users and to healthcare scientists from other organisations. The first four symposiums focused on ‘An Introduction to our Themes’, ‘Personalised Medicine – today’s reality not just a promise for tomorrow’, ‘Keeping People Healthy’ and ‘Next Generation Diagnostics’. You can listen to the fourth symposium at www.viapath.co.uk/innovation-academy articles, podcasts and blogs are also available.

The focus of our fifth symposium is ‘It’s Diagnosis, not diagnostics’. The symposium takes place in London on December 4th, 2015. If you would like to attend please



Innovation & Scientific Progress

contact us on InnovationAcademy@viapath.co.uk

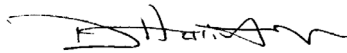
We recognise that some of our users find it difficult to attend symposiums. To address this, during 2015 the Innovation Academy will be hosting a 'Summer Series' of webinars featuring popular speakers from our first four symposiums. If you would like to register please contact us via email on InnovationAcademy@viapath.co.uk

Innovation Fund

The Innovation Fund was launched in January 2014 with applications sought for up to 20 projects to a maximum of £5,000 each. There were two application windows in 2014, January and June. The fund was designed to facilitate translational research with the hope this would lead to the introduction of new tests. 26 applications were received and 20 awards were made, totalling £78,000. Five of these were completed in time to be presented at the fourth Innovation Academy symposium in December 2014. They have started to transfer to the routine environment and generate an income stream which should help fund the 2015 scheme. Due to the overwhelming success of the 2014 Innovation Fund, the maximum award for each project has now been increased to £10,000.



Prof. Roy Sherwood
Scientific Director



Dr Dominic Harrington
Scientific Director



Quality Assessment



Head of Quality Liz Adair presents quality assessment at Viapath, where every employee in Viapath is at the front-line of ensuring we provide high quality care.

Quality Assessment

‘Clinical science is part of the fabric of Viapath. Our Healthcare Scientists push the boundaries of Pathology to improve patient care.’

Every employee in Viapath is at the frontline of ensuring we provide high quality care. Ultimately it is our Board and our Senior Leadership Team, which consists of our senior doctors, scientists and managers, who are responsible for ensuring that this is the case.

We use Lord Darzi’s definition of high quality care, which states that Care will be of a high standard if it is:

- Safe
- Effective
- with a Positive Patient Experience

This definition is used across all healthcare providers, and is reflected in the Pathology Quality Assurance Review (January 2014), chaired by Dr Ian Barnes. This review was prompted following serious patient care failings at Mid Staffordshire NHS Foundation Trust and the Francis Inquiry, and problems with Pathology quality assurance and governance processes at Sherwood Forest Hospitals NHS Trust.

We have embedded the learning from the Pathology Review into our Priorities both for 2014 and 2015, recognising that



Liz Adair with the Viapath Quality Pledge

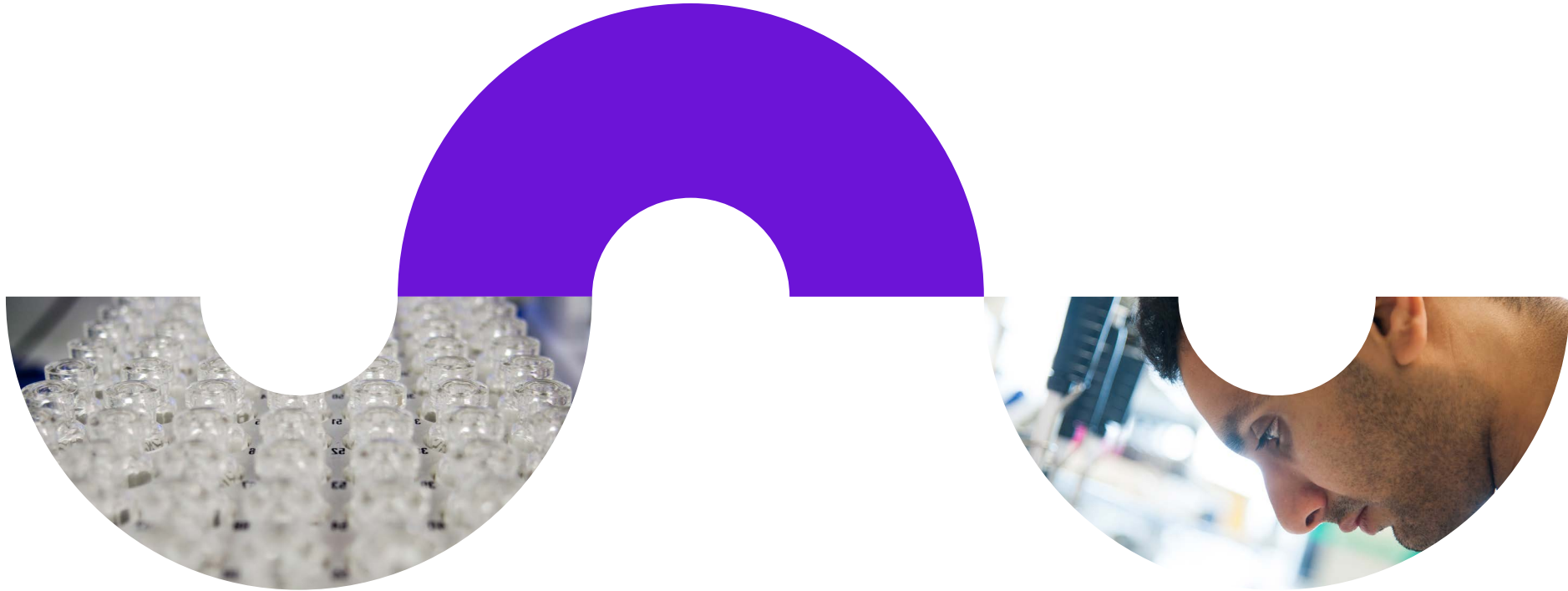
Quality Assessment

some changes will require time to embed fully. There are a number of inspectors and regulators who ensure that we are delivering high quality and safe Pathology services to our patients and the public.

The following pages show some of the key assurance and regulatory bodies who inspect Viapath.



Liz Adair
Head of Quality



Quality Assessment

Here are a number of inspectors and regulators who ensure that we are delivering high quality and safe Pathology services to our patients and the public.

CQC Care Quality Commission

The CQC is the regulator for all health and social care services in England, which includes Pathology. They inspect services to ensure they meet the Government's standards and rules for good, safe patient care. This includes ensuring we treat people in the way we all expect to be treated, in clean, safe buildings and how we manage our services and employees. You can find out more about the CQC on their website which is www.cqc.org.uk

MHRA Medicines & Healthcare products Regulatory Agency

The MHRA is the UK's regulator of medicines, medical devices and blood components for transfusion. The MHRA inspect our Blood Transfusion laboratories, to make sure that we are consistently working safely to ensure blood and its different components meet the MHRA standards of safety, quality and effectiveness. We work very closely with hospital clinicians (doctors, nurses, midwives) to ensure that patients receive safe blood transfusions each and every time. You can find out





In the Laboratory

Quality Assessment

more about the MHRA on their website which is www.gov.uk/government/organisations/medicines-and-healthcare-products-regulatory-agency.

UKAS United Kingdom Accreditation Service

Prior to October 2013, medical laboratories were assessed by the Clinical Pathology Accreditation (CPA) service. CPA was granted when the CPA standards were met. Laboratories worked on a four year inspection cycle, with Year two being an assessment surveillance visit and Year four a formal CPA accreditation visit and assessment.

CPA is now part of the United Kingdom Accreditation Service (UKAS). UKAS is the only national accreditation body recognised by the Government to assess medical laboratories against internationally agreed standards. If the standards are met then UKAS will grant the laboratory accreditation. UKAS are working through a period of transition with UK Pathology laboratories, as we all move from CPA to ISO15189 accreditation^{***}. This means that when our laboratories reach Year four of their assessment cycle, they will be assessed for both the old CPA standards and the

^{***} ISO 15189:2012, Medical Laboratories – particular requirements for quality, competence and the transition of CPA accredited External Quality Assurance Providers (EQA) to ISO IEC 17043:2010, Conformity Assessment – General requirements for proficiency testing.

Quality Assessment

new ISO15189. We envisage that Viapath laboratories will all have been assessed under the ISO15189 standards by the end of 2016. You can find out more about UKAS on their website which is www.ukas.com

UK National Screening Programmes

Our scientists, doctors and laboratories play an important role in the UK national screening programmes. Screening is a process of identifying healthy people who may have a latent disease or an increased risk of a disease in the future. They can then be offered information, further tests and appropriate early treatment to reduce the risk that the condition will progress to a point where it affects their health.

Examples of national screening programmes where Pathology plays a key role include:

- Newborn Blood Spot Screening
- Breast, cervical and bowel cancer screening
- Antenatal infectious disease screening

Screening programmes have a designated Director who is professionally accountable for all aspects of the laboratory service and must provide assurance that the screening programme is being delivered in a safe and effective manner. A key part of this role is to provide leadership in all aspects of Clinical Governance and maintain the focus on quality of service and patient safety. More information can be found on





In the Laboratory

Quality Assessment

the National Screening Committee (NSC) website
www.screening.nhs.uk/public

HTA Human Tissue Authority

The Human Tissue Authority (HTA) is a regulator set up in 2005. This followed events in the 1990s that revealed a culture in hospitals of removing and retaining human organs and tissue without consent. The HTA was created by Parliament and regulates organisations that remove, store and use human tissue for research, medical treatment, post-mortem examination, education and training, and public display. There are many different types of human cells and tissue, including skin, body parts, organs, and bone.

The HTA set standards and inspect our laboratories and mortuaries, to ensure that we use human tissue and organs safely, ethically and with proper consent. You can find out more about the HTA on their website which is www.hta.gov.uk

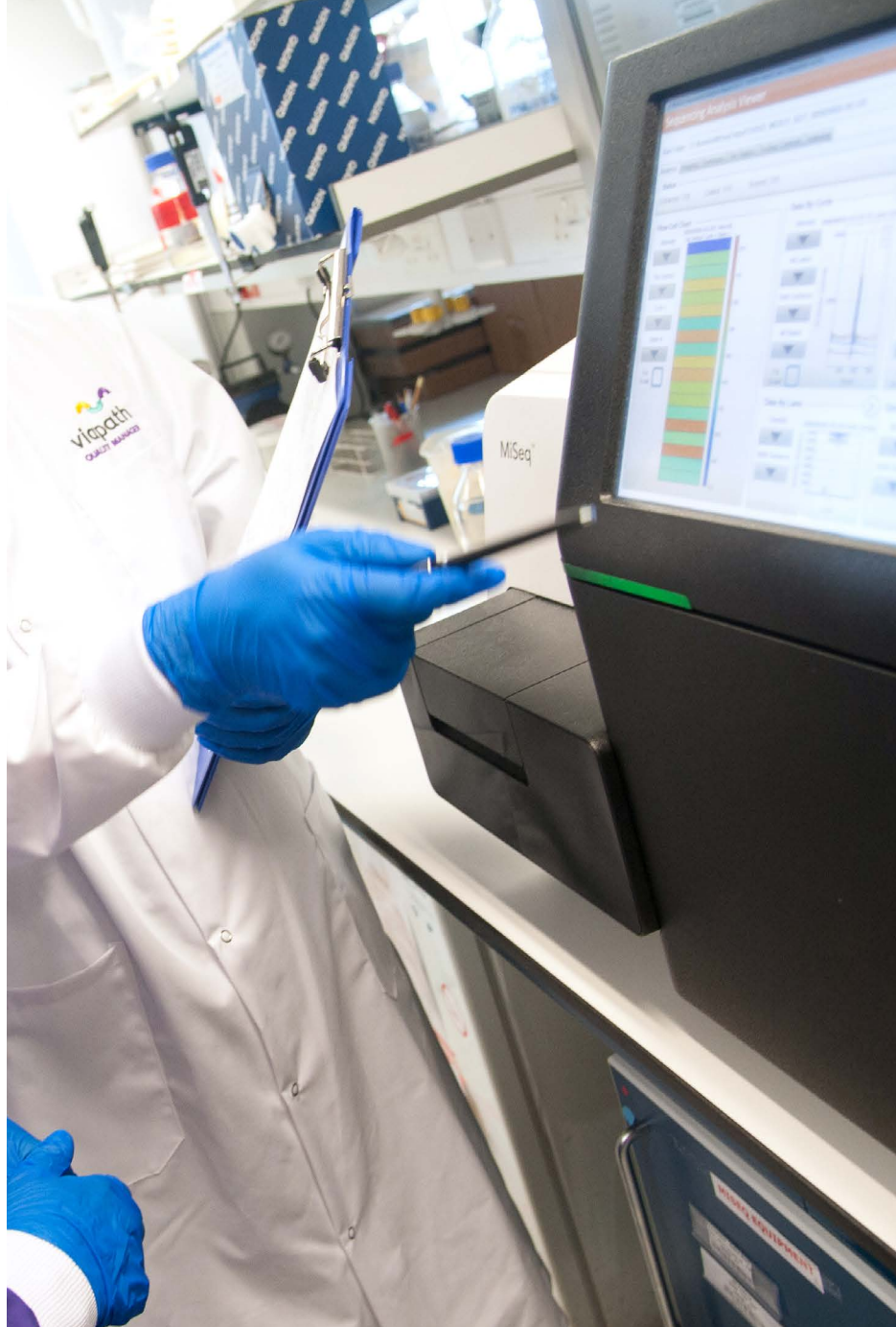
What is a Quality manager?

The Quality Manager is the Guardian of our Quality standards, to ensure that all our laboratories work safely at all times to deliver the highest possible standards. This senior role is similar to a nurse Matron on a hospital ward who is responsible for maintaining standards for their areas.

The Quality Manager generally looks after more than one laboratory and works closely with the senior scientists, doctors, and managers. Some Quality Managers have specialist roles such as for Blood Transfusion Services, others have a portfolio of specialist laboratories, and on our smaller sites there is one Quality Manager for all of the laboratories. Viapath has increased the number of Quality Managers to nine during 2014, with plans to increase further in early 2015.

The Quality Manager is an important member of the laboratory management team and will oversee the implementation, development and co-ordination of quality processes, which are described in the Quality Policy and Quality Manual which every laboratory has. Their role includes ensuring that professional standards and guidelines are in place for employees, involvement with clinical governance issues and audits, as well as providing advice and being a focus for all issues relating to quality in the laboratory.





Using computer software for QMS

Quality Assessment

What is a Quality Management System (QMS)?

The Quality Manager is accountable for ensuring that all aspects of quality within a Quality Management System (QMS) functions correctly. Enshrined within the QMS is a commitment to quality and continuous process improvement, with the patient at the centre of everything we do.

Viapath has a QMS which helps us deliver a quality service to the highest standards. The QMS defines the organisational structure, responsibilities, policies, procedures, processes, standards, and resources required to deliver quality standards. This is an ever-changing process as new tests are undertaken and the way our services are delivered evolves.

To help us consistently achieve the standards, we use well established computer software to help us to fulfil the requirements of the QMS.

Our Governance Framework



At Viapath, we encourage a culture where our services are improved by learning from mistakes, and our employees and patients are encouraged to identify areas for improvement.

Making sure that we maintain safe services and learn when things do not go to plan.

We undertake over 24 million tests a year, so delivering the highest quality Pathology services is highly complex. Scientists, clinicians and managers working in the laboratories are responsible for delivering high quality services on a day-to-day basis. It is the Viapath Board's responsibility to set the culture, which drives the processes and procedures that employees follow, to monitor quality and to escalate issues.

Our Board encourages a culture where our services are improved by learning from mistakes, and our employees and patients are encouraged to identify areas for improvement, and are not afraid to speak out.

Governance arrangements set out the Values, Behaviours, Structures and Processes that underpin a high quality service. They comprise of policies, procedures and meetings which are used to:

- Ensure that quality standards are achieved
- Ensure that we investigate and take action on sub-standard performance

‘Clinical governance is a system through which NHS organisations are accountable for continuously improving the quality of their services and safeguarding high standards of care by creating an environment in which excellence in clinical care will flourish.’

(Sally and Donaldson 1998, p.61)

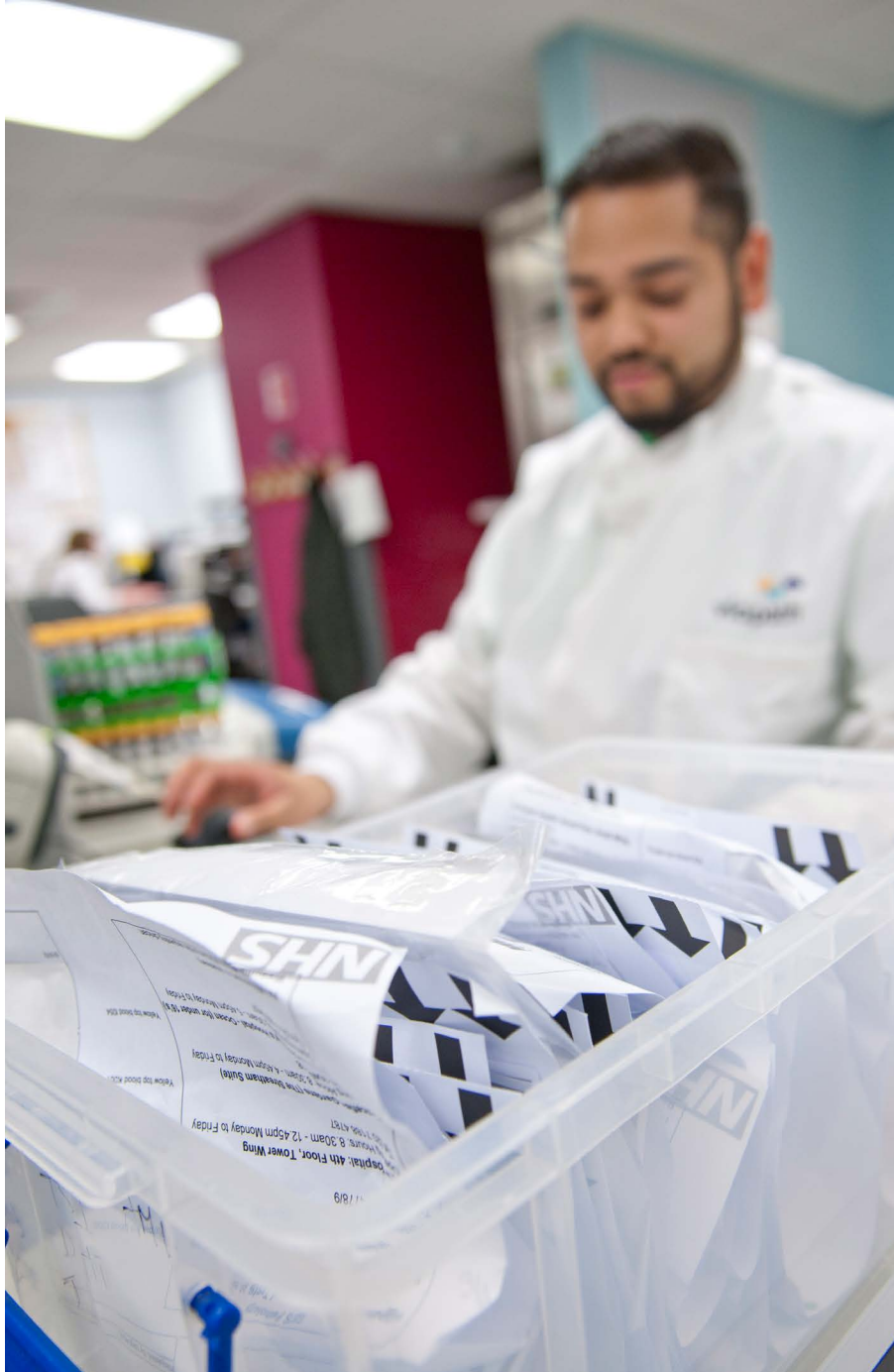


Our Governance Framework

- Plan and drive continuous improvement
- Identify, share and ensure the delivery of best practice
- Identify and manage risks to the quality of care and our services

In 2014, we developed the Viapath Governance, Risk and Quality Framework to enable us to implement and continually monitor our governance arrangements.





In the Laboratory

Our Governance Framework

Our Governance, Risk and Quality Framework sets out how Governance is embedded and monitored by our Senior Leadership Team (SLT) of clinicians, scientists and managers.

It provides a mechanism of identifying when things are not progressing as expected. It provides information that allows trends, issues and incidents to be easily identified and the steps required to correct them and learn. The SLT is accountable to the Executive Team for all aspects of the Governance, Risk & Quality processes and systems. Our Viapath Governance Risk and Quality Framework details the structure and process for reporting, right from a local departmental team up to our Board.

Each department has their own local meetings, which link with the monthly Governance Risk and Quality (GRQ) meetings on each of our sites. These site meetings, attended by the senior scientists, doctors and managers, report to the monthly Viapath GRQ meeting which is chaired by our Medical Director. This monthly meeting includes other members of the Executive Team.

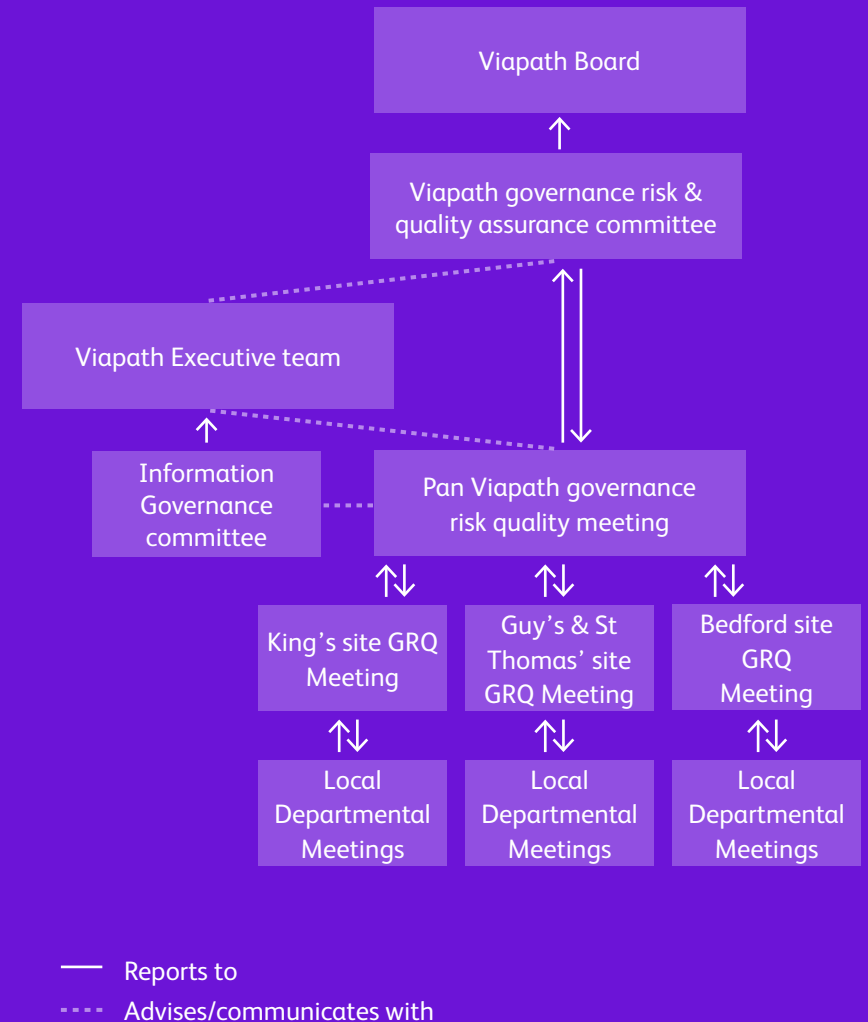
Our Governance Framework

Twice a year the Viapath Governance Risk and Quality Assurance Committee meets, which is chaired by our Chairman and accountable directly to our Board. Its role is to review, challenge and seek assurance that we are providing a safe service and acting upon risks and incidents, removing them where possible, and doing everything we can to limit the risk if it cannot be completely eliminated.

The Medical Directors from our Partners sit on the GRQ Assurance Committee together with our Chief Executive Officer, Medical Director and Chief Operating Officer.

The diagram on the right shows the Viapath Governance, Risk & Quality reporting structure & accountabilities.

Viapath Governance, Risk & Quality reporting structure & accountabilities diagram



Our Quality Objectives in 2014



Advancing
Together

Quality Account
2014

1. Safety
2. Effectiveness
3. Positive Patient Experiences

1. Safety

Our priorities from 2014

- Reduce incidents of harm to employees and patients.
- Achieve a significant improvement in GSTS (rebranded as Viapath May 2014) Health & Safety Performance rating.
- Further develop a culture & process for reporting laboratory errors and events, to drive quality improvement.

Our 2014 Priority

To raise awareness of patient and employee incident reporting with a reduction in serious incidents.

Aims & Objectives

- Reduce the incidents of harm to employees and patients.
- Further develop a culture and process for reporting laboratory errors and events, to drive quality improvement.
- Achieve a significant improvement in Health & Safety RoSPA rating.



Our Quality Objectives 2014 – Safety

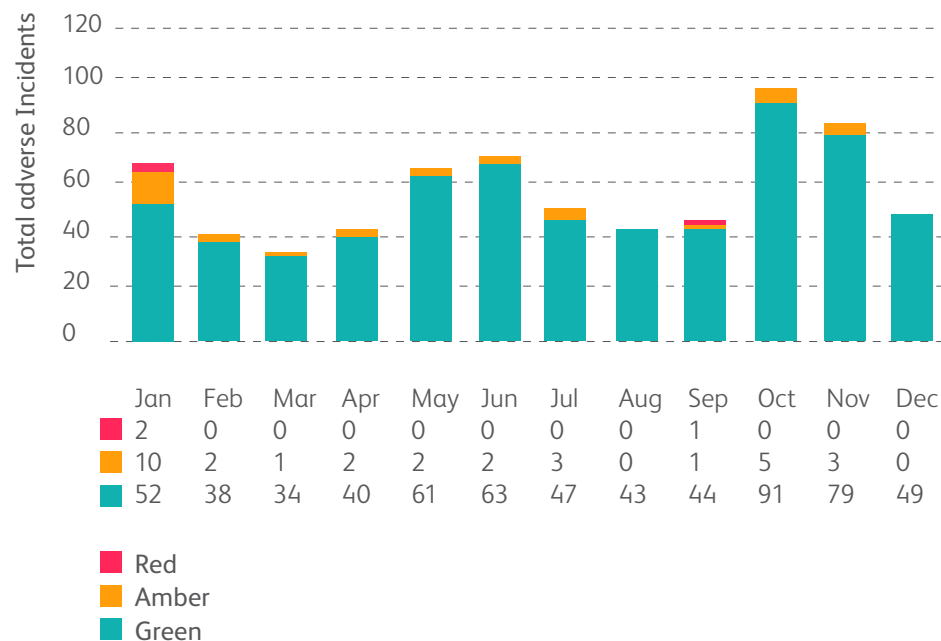
How did Viapath manage Risks, Incidents and Never Events?

During 2014, our employees have been actively encouraged to report incidents and issues which has resulted in an upward trend of reporting. Table one shows the number of incidents and the upward trend of reporting for 2014.

Viapath believe this is a positive trend because we are alerted early if there are issues and can intervene quickly to take action. This is supported by the observation that the increase is in green incidents, rather than more serious amber and red incidents. Green incidents can be an early alert of a potential more serious problem and therefore we are pleased that our employees are taking action and reporting quickly. We will continue to encourage this open approach to incident reporting.

The three Red incidents that occurred related to Information Technology, and were complex problems where there was a delay in moving result information from one system to another. We recognise that the Information Technology system on some of our sites is old and cannot cope well with transferring the ever increasing amounts of information between laboratories. This contributed to these red incidents.

Table 1 – Adverse Incidents Reported 2014 (all sites)



Our Quality Objectives 2014 – Safety

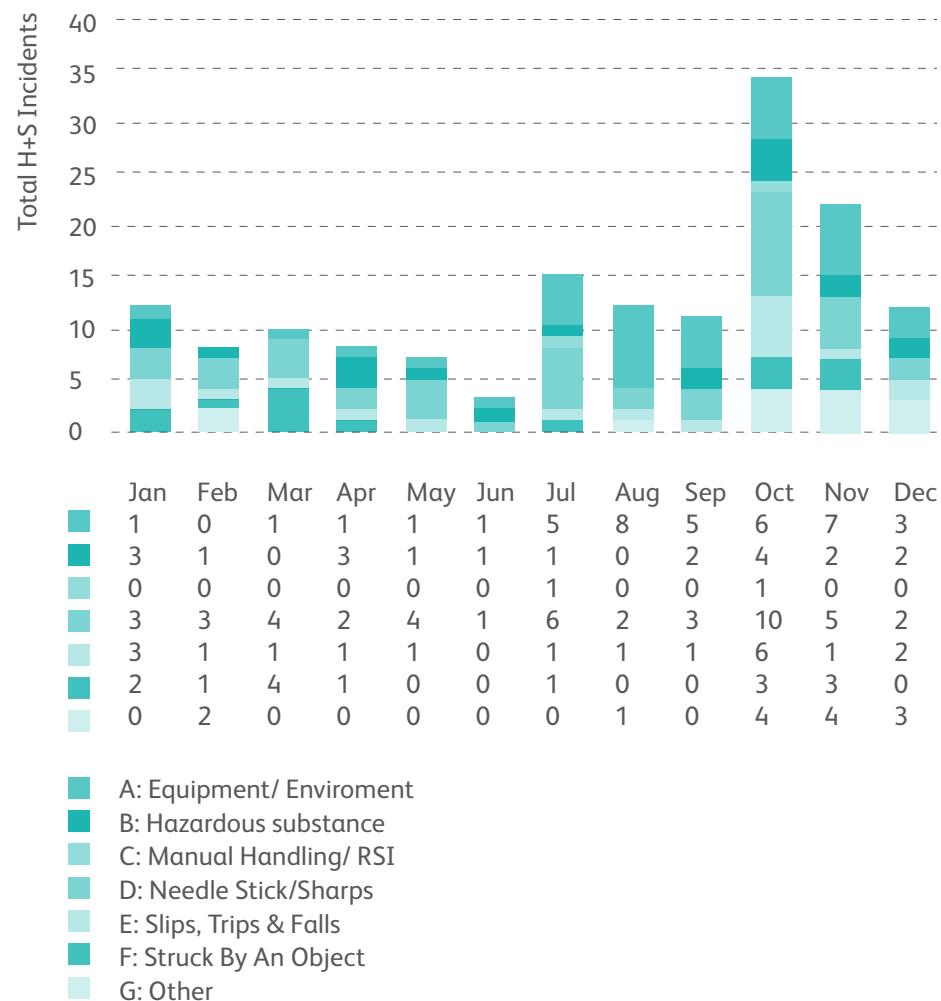
In recognition of the fundamental problem, Viapath is investing £11 million over a three year period, to install an enhanced Laboratory Information Management System (LIMS). This Project is on schedule for delivery by late 2016.

The largest number of Health and Safety incidents occurred to Viapath employees, from needle stick and sharp incidents in our phlebotomy services. There was a peak of incidents occurring in October 2014 and we investigated the cause. Consequently, we have ensured that safety devices, which greatly reduce the possibility of employees being injured as a result of taking blood, are available across our phlebotomy services and in our Partner Trusts. This introduction of Safe Devices was endorsed by the Health and Safety Executive (HSE) and has subsequently reduced the needle stick incidents which have occurred.

We have been working closely with our partner sites over 2014 on the two risk issues which are rated as Red on the Risk Registers:

- Improving the physical environment for some of our laboratories which are in old estate

Table 2 – Health & Safety Incident by Category 2014 (all sites)



Our Quality Objectives 2014 – Safety

- And rectifying the problems associated with complexity of multiple Information Technology systems.

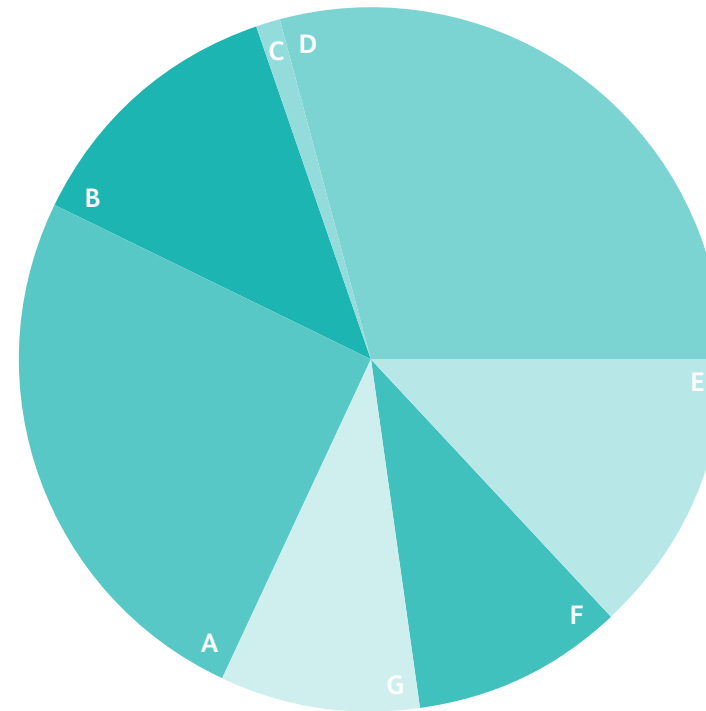
We had zero Never Events in 2014. A Never Event is a serious, largely preventable patient safety incident that should not occur if the available preventative measures have been implemented. In Pathology services an example would be if the laboratory had prepared the wrong blood transfusion for a patient.

Royal Society for the Prevention of Accidents Inspection (RoSPA)

In 2013, GSTS (as Viapath was then called), was inspected against the RoSPA award scheme and only reached Level One. It set a target of reaching Level Two (an increase of 18%) for the 2014 audit.

A considerable amount of work was undertaken at both a laboratory and cross-company level throughout 2014, and we were re-audited in November 2014. Viapath reached Level Three status, exceeding the target it had set for 2014. Work has already commenced to achieve Level Four in 2015 (there are Five levels in total, Level Five being the highest).

Table 3 – Health & Safety Incident by Category 2014 (all sites)



- A: Equipment/ Environment
- B: Hazardous substance
- C: Manual Handling/ RSI
- D: Needle Stick/Sharps
- E: Slips, Trips & Falls
- F: Struck By An Object
- G: Other

2. Effectiveness

Our priorities from 2014

- Implement a single Quality Management System (QMS) for all that we do.

Our 2014 Priority

To implement a Quality Management System (QMS) which reaches ISO15189 standards.

Aims & Objectives

- Implementation of a single Quality Management System for all that we do.





In the Laboratory

Our Quality Objectives 2014 – Effectiveness

How we did with our Regulator and Accreditation Inspections

ISO15189/CPA

All of our laboratories that were either undergoing a planned CPA surveillance visit, or assessed for CPA as part of the ISO15189 accreditation, retained their CPA accreditation. The list of tests and the equipment accreditation can be seen on our website or on the UKAS website.

www.viopath.co.uk

We have laboratories on all of our sites which are undertaking the ISO15189 accreditation assessment, and as each achieves accreditation it will be announced on our website.

In addition, our Cellular Pathology laboratory at Bedford Hospital, underwent successful CPA accreditation at the beginning of 2014, which was the first time for over a decade this laboratory had been CPA accredited. All our laboratories have CPA accreditation, with the exception of the Haematology laboratory at Bedford Hospital. This is because Bedford Hospital has not been able to consistently appoint a Haematology consultant to lead the laboratory over the past few years. We are confident once this happens

Our Quality Objectives 2014 – Effectiveness

the service will be in a strong position to apply for accreditation.

CQC

All Viapath sites have a CQC Registered Manager and are on the CQC register for meeting the CQC National standards. We had no planned or unannounced visits in 2014. These are the hospital sites where we were inspected:

- **Bedford Hospital** Last CQC report published 16th January 2013
- **Guy’s Hospital** Last CQC report published 11th April 2013
- **King’s College Hospital** Last CQC report published 29th March 2013
- **St Thomas’ Hospital** Last CQC report published 11th April 2013

Viapath has not yet been inspected under the new CQC inspection standards. You can find out more and see our reports on the CQC website: www.cqc.org.uk.

HTA

The HTA undertook an inspection of the mortuary at Kings College Hospital, Denmark Hill, London, towards the end of 2014 and had only one minor finding which has been rectified.



3. Positive Patient Experience

Our priorities from 2014

- Achieve improvement in the areas of most concern to patients.
- Achieve improvement in phlebotomy patients survey results.

Our 2014 Priority

Real time measurement of patient and stakeholder experiences to support learning and progress.

Aim/objectives

- Implementation of a single Quality Management System for all that we do.
- Implement a regular customer survey across primary & secondary care.



Our Quality Objectives 2014 – Positive Patient Experience

What did our customers and patients tell us we weren't getting right?

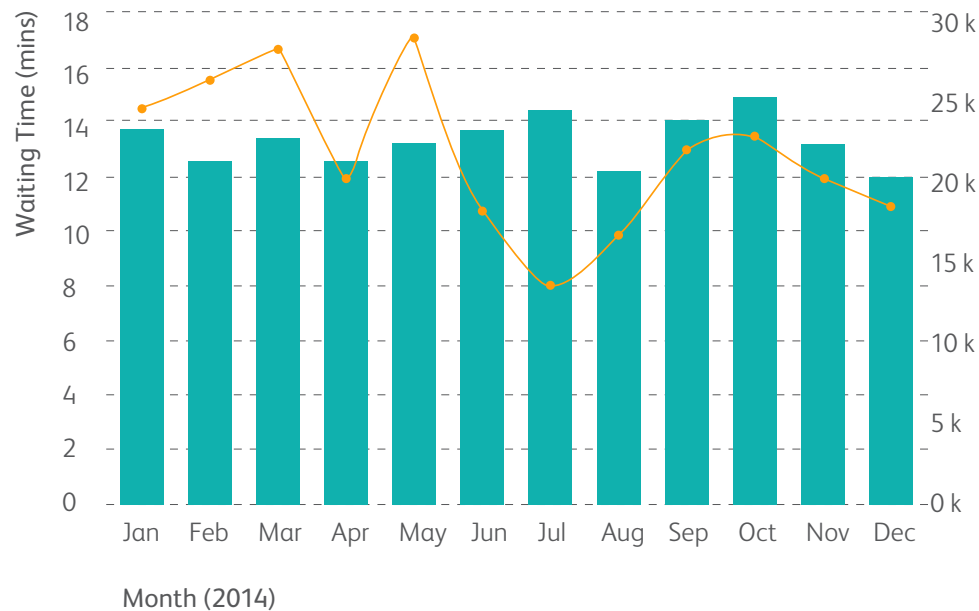
The issue which caused most concern from our customers which includes doctors, nurses and patients, were delays in getting samples to the laboratories and for the results to be ready. For many patients this occurred in our phlebotomy services.

We therefore undertook some urgent work in the Spring of 2014, to understand why this was the case and increased our opening times and staffing to rectify the delay.

Since then we have consistently met the waiting times which our Partners want us to achieve and we have had very positive feedback from our patients who are grateful for the wait reduction.

We recognise that we still have complex shared issues with our Partners and are working hard with colleagues in the Intensive Care Unit (ITU) and Emergency Departments to see how we can improve and prevent delays in specimen transport. A new Service Improvement Team was set up in October 2014 and has focused on these key areas. They have already helped improve the

Table 4 – Phlebotomy waiting times 2014



■ Total Patients Bled
—●— Combined Waiting Time

Our Quality Objectives 2014 – Positive Patient Experience

process and flow through our Central Specimen Reception areas.

Our Patient & Customer services

We undertook our first Viapath customer survey in May 2014, where helpful comments were made about delays and our response times. We have therefore increased our customer service team, and in September 2014, we launched customer service training for every new member of staff and for all our frontline employees who speak with patients and clinicians regularly. The customer survey will be repeated in early 2015.

In November 2014, we held our first Staff Customer Awards where individuals and teams were recognised for excellent customer care.

In 2015, we will review our current customer and patient services. This is to ensure we are responding to and resolving very quickly all issues and complaints whoever they are from, so we can improve in this important area.

‘Our Patient Participation Group Meeting discussed the new service at King’s phlebotomy and I would like to feedback to you that they are full of praise for the new system and the improved access and waiting time.’



Our Employees



We have over 1000 highly skilled employees,
so what they say is extremely important to us.

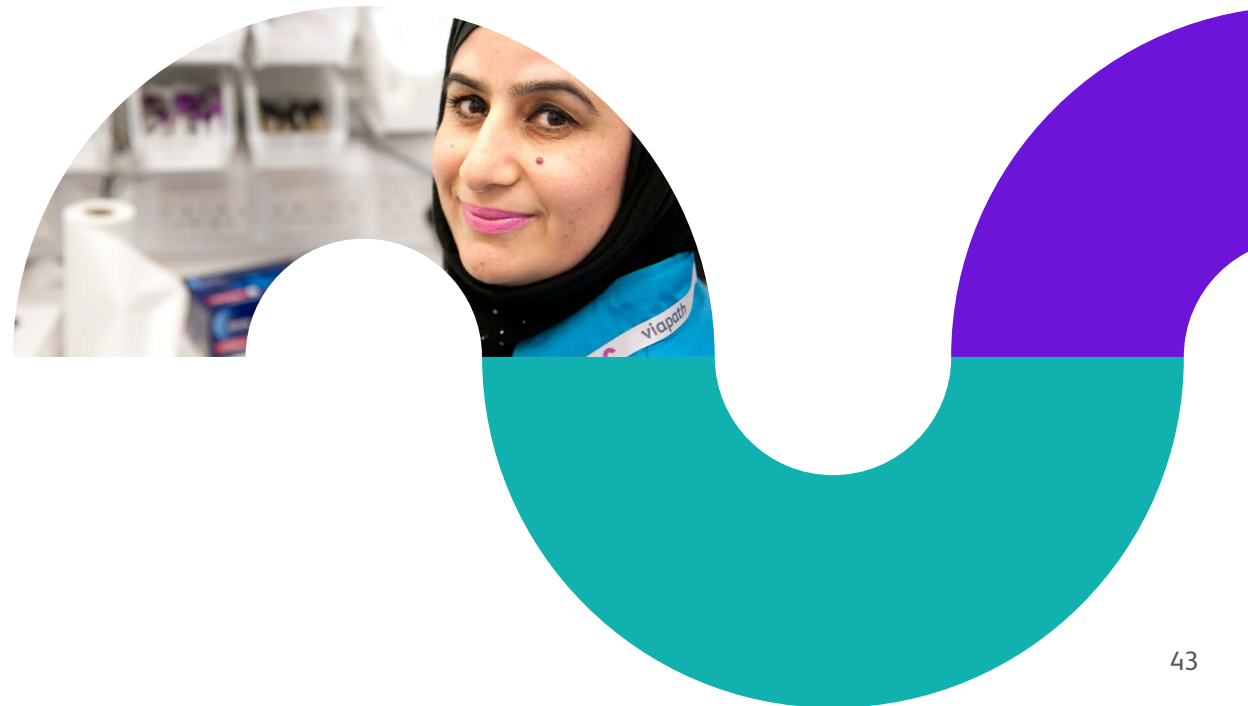
Our Employees

What our employees told us and what we did

We have over 1000 highly skilled employees, so what they say is extremely important to us. We were told that our communication could be better, so in 2014 we had more Road-shows with the Executive Team and senior managers visiting our teams on all our sites.

We also improved the format of our internal employee e-newsletter 'Our News' and Project Updates, and many of our teams are working on how they can improve communication every day. Our laboratory teams have a daily meeting or 'Huddle' where the previous day is reviewed and important quality issues are raised – for example staffing levels; any incidents which occurred and the plan going forward.

Our employee survey took place in February 2014 and repeated in March 2015 to gain more insight and feedback.



Our Employees

Here are a selection of the themes which employees told us about, and what we have done in 2014 from their feedback.

<p>Leadership visibility</p>	<ul style="list-style-type: none"> – Executive team roadshows, Laboratory tour – More consultation with the Executive team on important topics 	<p>More Career Development</p>	<ul style="list-style-type: none"> – 10 % of our workforce utilised the Scientific Learning and Development Fund – More training offered including Customer Service training (120 people so far) and Health & Safety (109 delegates)
<p>More Equipment and Resources</p>	<ul style="list-style-type: none"> – £7million invested into the laboratories - Innovation Fund supported 20 projects from our scientists 	<p>More Recognition</p>	<ul style="list-style-type: none"> – Viapath Customer Awards introduced – Improved monthly Acclaim Award prize and process – More staff recognised in “This Week’s Stars”
<p>Our Information Technology needs to improve</p>	<ul style="list-style-type: none"> – Laboratory Information Management System (LIMS) Programme commenced – Investment in our electronic Quality Management System and equipment temperature monitoring 24/7 	<p>Review our Reward Package</p>	<ul style="list-style-type: none"> – Employee proposition workshops involving a cross section of our people – Holiday entitlement and performance related pay reviewed
<p>Improve our Estates & Processes</p>	<ul style="list-style-type: none"> – Tearoom refurbishments across all sites completed and Estates Strategy development underway – Service Improvement Team set up 	<p>More celebration of important issues</p>	<ul style="list-style-type: none"> – Celebration of World Quality Day and first Viapath Quality Pledge challenge – Staff support for charities – for example Jeans for Genes, Ebola – Brand launch in May 2014

Our Events



Taking positive action to support important issues.

Our Events

Viapath Celebration – supporting important issues

National Pathology Week

We celebrated National Pathology Week at the beginning of November, at Bedford the teams entertained and educated around 50 young students in the important role Pathology plays in healthcare and research. The students were given an introductory talk from Gary Nicholson, General Manager, tours of the laboratories and took part in a quiz and interactive sessions, including phlebotomy mannequins! It's been so successful we have already had a couple of young attendees apply for work experience and been invited to school recruitment fairs.

At St Thomas' Hospital we held an event to celebrate International Pathology Day, supported and attended by the Royal College of Pathology. Our Viapath branded stand was inundated all day with people wanting to try on protective clothing.

Caption of International Pathology Day:

‘Viapath’s event for International Pathology Day aimed to de-mystify pathology and recruit some future scientists along the way!’



Viapath news stall at National Pathology Week & Viapath teaching school children about pathology

Our Events

World Quality Week and the launch of the Viapath Quality Pledge on World Quality Day 13th November 2014

As part of our action for World Quality Day on 13 November 2014, we voted on a Quality Pledge for the whole of Viapath to adopt and ‘live’ every day. The challenge was to assemble a number of parts to a Quality Pledge, which we all signed up to for 2015. The parts were scattered around our sites in London and Bedford and our teams transported them all to Francis house, our HQ, to be assembled – without using any motorised transport! This initiative was set up and led by our Future Leaders Group.

The 2014 Viapath Pledge states that:

‘We pledge to continually improve our service by listening to our customers, colleagues and patients – and taking positive action as the result of each interaction.’



Our Quality Objectives 2015

We have used Lord Darzi's definition of high quality care which states that Care will be of a high standard if it is: Safe, Effective and with a Positive Patient Experience to prioritise our Quality objectives and standards for 2015.



To ensure that our quality standards are met, we have set new objectives for 2015

Safety

- We will ensure that our Governance, Risk and Quality Framework is in place and embedded across the Company.
- We are increasing accountability and visibility across all our laboratories and will embed the Viapath Governance, Risk and Quality Framework. Our Quality Managers will have easily recognisable laboratory coats and Quality Assurance site visits will commence across all sites.
- We will continue to listen to and act on clinical customer complex problems, working in partnership to resolve them. This will include raising awareness of potential issues and incidents promptly.

Effectiveness

- All our laboratories undergoing inspection are expected to continue their accreditation and regulator status. Those which are undertaking ISO15189/CPA accreditation visits will be working hard to have ISO15189 accreditation granted as part of their four year inspection cycle.
- We will complete the roll out for all the laboratories (Viapath Analytics) and corporate services (Viapath Support Services and Viapath Group), to use an electronic Quality Management System for managing all aspects of Quality including how we manage our core documents and policies.

Positive Patient Experience

- Our Patient and Customer services will be reviewed and a strategy developed, in order to enhance our responsiveness and learning from issues and complaints.
- We will be ensuring that Quality sits at the centre of business development and how we “on-board” new customers to the “Viapath way” of achieving highest quality services and care.



Joint statement from the Medical Directors of our NHS Partner Trusts

Viapath has become a trusted and competent independent pathology provider, that has embedded best practice both from our hospitals and the wider NHS. Viapath has shown a strong commitment to training, research and development, and is an ardent supporter of innovation, with a clear focus on improving patient outcomes.

The Viapath 2014 Quality Accounts demonstrate a significant step forward in their journey to modernise pathology services, using a transparent approach built on effective governance structures. The Quality Story for 2014 and its progress, accurately reflects the many daily contacts we and our patients have with clinical, scientific and managerial staff from Viapath.

Dr Ian Abbs
Medical Director
Guy's & St Thomas' NHS
Foundation Trust

Mr Michael Marrinan FRCS, Ed
Executive Medical Director
King's College Hospital NHS
Foundation Trust

Liz Adair Head of Quality with Quality Managers



At Viapath we define quality as:
The right result on the right specimen from the right patient that is accurate, timely, properly interpreted and clinically useful every time, as part of a positive service experience for patients and customers alike.

Contact

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