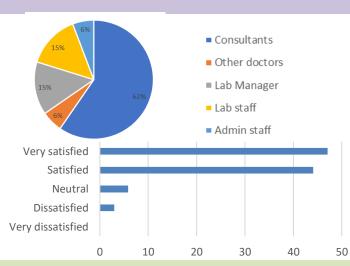


Response to user survey - 2023

Thank you to all users that responded to the survey. We had a relatively low response rate, with 34 responses submitted, but we greatly appreciate the time those of you that responded gave and hope we can use your feedback to continue to improve our service. The responses gave good coverage of senior and more junior medical staff, administrative and laboratory staff. There were no responses from nursing staff this year.

The vast majority of responders (91% this year as compared to 93% last year) are still satisfied or very satisfied (47%) with the HMDS service. We continue to work really hard to deliver a high-quality service despite huge challenges, particularly in respect to the changes in genomics delivery that have continued to put increased pressure on the HMDS service.



Requesting HMDS tests

The most common method of referring samples to HMDS remains the paper request forms, and this has risen from 68% of respondents in 2021 to 76% this year. HMDS cannot currently offer true electronic requesting and it may be that the hybrid system currently in place is contributing to the lack of engagement with this. This is one of the developments to our LIMS, HILIS, which we are keen to make but we have unfortunately been unable to prioritise that so far due to other demands. We are investigating other tools such as NPEx and this is something we are still planning to progress.

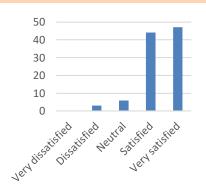
88% of responders were satisfied or very satisfied with the arrangements for sending samples to HMDS. 15% did report experiencing difficulties, down from 20% in the last survey, but these were related to issues with local transport or couriers. All users are able to register for a HILIS account and many use this to check on receipt of samples by HMDS. We would hope that the planned improvements to electronic requesting would also give the potential to be able to acknowledge receipt in real-time.

Only 35% of responders use the out of hours service but there remains a high level of satisfaction with this service, with 92% saying they were satisfied or very satisfied (50%) with this service.

97% of respondents said the HMDS test repertoire was appropriate for their needs. There were specific requests for additional assays, the majority of which were molecular. The genomics testing repertoire is now controlled nationally by the NHSE genomics test directory and HMDS are actively involved in promoting assays which are novel or have increased clinical utility for inclusion in the approved test list.

Turnaround times (TAT)

68% of responders were satisfied or very satisfied with the TAT achieved by HMDS which is a slight decrease from 75% at the last survey. There were, however, several comments stating that TATs had worsened over the past year and a significant number of comments about TATs for particular molecular test results. The past 12 months have been extremely challenging for HMDS from a staffing perspective, with the loss of several senior scientific staff and also a continued consolidation of genomics work from the wider GLH into HMDS. There remains a challenge with recruitment and training, but we are making significant progress with this and expect the situation to continue to improve. We would still ask that if you have a delay with a particular urgent request that it is brought to our attention so we can investigate where the process is falling short, and we are grateful for all your support as we continue to make improvements.



Report details

85% of responders were satisfied or very satisfied with the overall report provided by HMDS and the same proportion also found the clinical interpretations helpful and easy to understand. Comments were again made about the provision of more detail on prognostic significance. We would stress again, however, that molecular analysis is a particularly rapidly changing area in some diseases and prognostic significance of some abnormalities may also be therapy dependent, so the final interpretation needs input from the treating clinician. There were also concerns that diagnoses were not updated rapidly enough when new genomic data becomes available – this is something we are aware of and are already working to improve.

Communication with HMDS

92% of responders were satisfied or very satisfied with the assistance given when contacting HMDS (similar to previous surveys) and only a single respondent (3%) said they had difficulties contacting HMDS by phone.

In terms of preferred methods of communication, respondents again overwhelmingly stated that e-mail to clinical (80%) or lab teams (80%) was the preferred option.

For those respondents for which HMDS provides MDT support for their organisation, there was a high level of satisfaction with this provision, with 88% finding this useful or very useful.

Changes related to GLH

Awareness of the role of HMDS in the YNE GLH remained stable relative to the previous survey (60%) but respondents were in general not clear how this impacted on their own service and several requested further information. We plan to improve communication with users on this topic which will allow users to both better understand the implications for their own service and also be more aware of the changes and challenges happening within the HMDS genomics service currently.

Follow-up actions

Overall, this was another very positive survey of HMDS by the regular users of the service, particularly given the challenges over the past 12 months or so.

Review of the feedback has resulted in the following proposed actions, which should improve the service provided by HMDS for its users.

Issue:	Action:
Electronic requesting	HMDS to investigate improvements to HILIS and use of third- party applications which would allow true electronic requesting
Turn-around times	Continue with recruitment and training for new scientific posts within the lab. Develop a better process for monitoring of turn-around times, both for whole cases and for certain time critical tests, and a format to share that with users
GLH	Improve communication about the GLH and resulting changes to HMDS to all users

Thanks again

We appreciate the support and generally positive feedback that HMDS continues to get from users. We feel we have a good working relationship with many of our users but are keen to keep developing those further. We are happy to receive feedback about our service at any time so please do not hesitate to contact us if you think there is more that we can do.

Catherine Cargo Clinical Lead of HMDS Catherine.cargo@nhs.net Ruth de Tute Scientific Lead of HMDS rdetute@nhs.net