

Pathology issues affecting SEL GPs

8 Nov 2023

Top Issue No. 1 – Results sent not associated with a patient at a practice

Description	Status Update
<p>GPs were reporting receiving results for a person that is not associated with their practice.</p> <p>GPs were rejecting this result in EMIS. However, this rejection does not trigger a workflow that notifies Synnovis. Nor does it provide the GPs with a pop-up that advises that the rejection does not trigger a workflow, as it does when a letter is rejected.</p> <p>This is a clinical safety risk as results may not be reaching the patient's GP.</p>	<p>There have been a limited number of reports on this issue.</p> <p>If this occurs in the future (for pathology tests only), please notify Synnovis prior to rejecting the result tquest@synnovis.co.uk .Investigation will occur of each reported case.</p> <p>The ICB has requested an extract of rejected tests from EMIS which is due this week. This file will be provided to Synnovis so that the results can be sent to the ordering GP.</p>

Top Issue No. 2 – Keystone result transmission delay



Description	Status Update
<p>A new issue within the infrastructure of the server at GSTT caused a delay in the distribution of result reports from 18:00 on Saturday 4 November. This was resolved at 14:00 on the 7 November.</p>	<p>The issue resulted due to a space issue on the servers which prevented files being received. The GSTT infrastructure did not raise an alert of the issue causing the transmissions to stop at 6pm on Saturday.</p> <p>This issue was resolved at 2pm on 7 November and the backlog has now been worked through.</p> <p>Comms was shared directly with practices via Synnovis on 8 November.</p>

Top Issue No. 3 – Unmatched GP

Description	Status Update
<p>GPs are receiving results that are not mapped to them as a provider.</p> <p>This requires the GPs to undertake additional steps to map the results to themselves.</p> <p>This is not a clinical safety issue, but one of efficiency.</p>	<p>275 GPs were identified as not included in the Epic system. These have been uploaded. It is not expected this will fully resolve the problem. Now sending more than three quarters to a named GP.</p> <p>To fully resolve the problem, further investigation is underway.</p> <ul style="list-style-type: none">• if they are mapping to a single clinician, the GP practice may have accidentally mapped all results to a single clinician in EMIS Web. The ICB service desk can support with resolving this, so if this is occurring, please raise a ticket.• Investigation is underway of the remaining issues where they are coming through as unmapped, including a review of orders being returned to unknown GPs. All of the ones so far have had a mapping to an individual in EMIS Web that requires updating by practices. Synnovis have a list of unknown GPs to proactively identify whether this is an issue. Beaker is investigating. <p>Synnovis have a list of unknown GPs to proactively identify whether this is an issue and Beaker is investigating. More than $\frac{3}{4}$ are now being sent with a named GP.</p>

Additional issues

Description	Status Update
Some GPs are reporting receiving duplicate results.	To resolve an earlier issue, some results from 9-15 October had to be replayed. However, some practices are still reporting receiving duplicate results. This is being investigated by Synnovis. Could be same result received twice or could be a reperformance of a test for a clinically valid reason. This is being investigated and early reasons have been identified. These are being addressed and will be communicated shortly.
Characters in some tests not appearing as expected. Eg Microscopy results such as ?+?	This is being investigated by EMIS Web as it appears to be due to the decoding of characters. They've confirmed it is an EMIS issue that is being investigated. Additionally, there is confusion about the values provided with micro results and the interpretation of those value. This is being investigated with EMIS.
AKI warnings – many coming through even though no clinical action required	Resolved: Fix has been put through for 0 AKI results. 1/2/3 will still come through. As a separate report not as part of the renal profile.
Number of results	Conversations are underway to see if there are any other options to the results being sent individually rather than as a cohort of associated tests. A review of how this is working in other UK Epic implementations will take place. Work with Epic team is underway on potential options for practices to consider.
Review	No longer available in tQuest and no consultation on its removal. Bromley practices will be contacted.

Resolved – Pathology results coding fixes

Description	Status Update
<p>Some pathology results are coming in as uncoded or the coding has changed.</p> <p>The ones requiring high priority attention were identified as:</p> <ul style="list-style-type: none">- HBA1C- eGFR- CA125	<p>RESOLVED: HBA1C, CA125 and eGFR are mapped.</p> <p>Note: There have been changes to the way the eGFR test is performed, which may mean it is not appropriate to map against the previous codes. This is a clinical decision and is being reviewed by Synnovis and clinicians.</p> <p>If results for other tests are coming through as unmapped, please raise a ticket with Synnovis, who will investigate and resolve. tquest@synnovis.co.uk</p> <p>It has also been raised that the PSA code has changed and the narrative with HBA1C is no longer provided. This is being investigated.</p> <p>Work is underway to establish a mechanism to agree to requests for optimisation for GPs across SEL. There is work underway to standardise the catalogue.</p>

Resolved - flagging of urgent or abnormal results

Description	Status Update
Some abnormal or urgent results were not being flagged as such – e.g. FIT tests	RESOLVED Flags for abnormal FIT tests have been implemented.

Resolved - Keystone result transmission delay

Description	Status Update
<p>There were intermittent delays to keystone results transmission.</p> <p>This was resulting in GPs receiving large volumes of tests in one batch, making it difficult to process results in a timely manner.</p> <p>This was identified as a clinical safety risk.</p>	<p>RESOLVED</p> <p>Investigation has occurred and fixes applied. Monitoring arrangements have been put in place so that any delays to transmission can be proactively identified. EMIS are also investigating whether other proactive actions are required to prevent recurrence. The issue will continue to be monitored by Synnovis and EMIS.</p>