

Greater Manchester Pathology Network – Meeting Notes/Report

LAB 2 LAB Project Board Meeting
Monday 8th March 2010 9.30am-10.30am
John Bray Suite, Holiday Inn Central Park, 888 Oldham Road, Manchester, M40 2BS

In attendance			Apologies	
Philip Bell	PB	Salford Royal NHS Foundation Trust	Howard Gray	NHS Stockport
Owen Johnson	NB	X Lab Systems	Keith Hyde	GM Pathology Network
Laura Kidd	LK	GM Pathology Network	Neil Jenkinson	GM Pathology Network
Nigel Martin	NM	UHSM NHS Foundation Trust	Rachel Pearson	GM Pathology Network
Dave Money	DM	Assistant Project Manager		
Drew Morgan	DMg	X Lab Systems		
Greg Rayner	GR	Salford Royal NHS Foundation Trust		
David Slater	DS	Project Manager		
Jeff Seneviratne	JS	(Chair) GM Pathology Network		
Allan Wilcox	AW	WWL NHS Foundation Trust		

Discussion Points

- **Welcome and Introductions** – JS welcomed all members no introductions were needed.
- **Minutes of the meeting held on 16th November 2009** – The minutes were agreed as a correct record.
- **Matters Arising** – JS felt that items 4 – 9 on the agenda will be covered under the Project Managers report..
- **Project – live sites** – DS explained that SHH to MMMP for Chlamydia has been up and running for several months now. Initially the route was hampered by operational and data issues but these have since been resolved. DS explained that the initial problems did make the project team reassess the way the project was run and changes have been made to ensure the same problems do not re emerge. DS also feels that the changes have enabled the Chlamydia route between Trafford and MMMP to be set up much quicker. So far there have been very positive comments from the lab staff using the system. Currently testing is progressing between TGH and SHH for chemistry, these are low volume tests and it is hoped the route will go live soon.
- **Project – pilot testing** – DM is to visit Trafford and Salford regarding setting up of test routes. All iSoft sites now have L2L software installed in both the live and test accounts once testing is successful the sites can go live. UHSM are experiencing access issues with their Firewall.
- **X-lab software & staged payments review** – The original contract with X-lab has staged payments. Stage 1 was a 10% payment which has been paid. Stage 2 was a 20% payment also now paid. Now that 4 labs are “technically live” the stage 3 payment has been made. The remaining 50% of funding needs to be transferred over to the next financial year.
- **Interfaces** – DS gave updates as follows:
- **iSOFT** – Laboratories were given £11,500 payable in two halves. The first 50% upon installation of software and the remaining 50% upon the discipline going live. With most Trusts the 50% due for payment upon go live needs to be flagged up and moved across to the next financial year or it will be lost. DS will ask John Caffrey Project Manager at iSoft to prepare an upto date position on invoicing that DS can circulate to the group for clarification. The group acknowledged that SHH have paid their 100%.
- DS envisaged that as the test routes go live the lab staff will see the system benefits and initiate the set up of other test routes.
- Annual maintenance payments of £1,600 to iSoft are due imminently. Also as of April 2010 the annual payments to The Health Informatics Service (or X-lab services) will begin.
- **Clinisys** – DS reported that the L2L software has been incorporated into Labcentre version 1.7 now installed at Pennine, Wigan and Bolton. To set up is very easy a simple conduit is required. An initial meeting has taken place between MRI Immunology and Pennine to discuss which initial test route to use and then a project team will get together and agree reference ranges and units. At a recent meeting attended by Pennine, MRI, Wigan and Bolton Clinisys gave a system demonstration.
- DS explained to the group that a potential issue has been discovered in the Clinisys system. DS explained that when specimens are put through the iSoft system a reference and a shipment number are produced and inputted into X-lab. The shipment number is then used as the unique identifier. The Clinisys system is similar to Ward Order Comms and this means that the lab number from the originating lab is used as an order number by Clinisys and the orders retained in a holding file until the specimen arrives. The problem with this is if 2 or more labs use the same number sequence the request for sample A will go into the system and if later the same day a request goes in for sample B it will overwrite the sample A request. This could lead to the incorrect test being carried out on sample A and the results being sent back to the requester of sample B. DS suggested at the following PAG 5 meeting he asks all labs in GM to provide their current number set up in a bid to solve this issue before it actually arises. The group discussed the possibility of X-lab providing a prefix but it was felt that as the prefix will not appear on the actual sample in the lab it will be seen to not match and cause more problems. The group also discussed that using a prefix so that both request A and B will stay in the system may not be the answer as some barcodes read alpha characters and others do not.
- The group felt it was important to first identify if a fix is needed and how large or small is the risk? How likely is it that 2 samples with the same number will be in the holding file at the same time?
- Another issue highlighted by this is amended reports. If a report is sent through and completed and then a second report is generated how will the lab staff know a second report is there? For example if it is realised that a batch of tests are faulty and repeat testing is

carried out on the samples or if additional information is discovered and needs to be passed onto the sending lab. JS stated that we need to distinguish between the two types of amended report and that some form of security is needed in the system to resolve the above mentioned issues. It was discussed that perhaps X-lab could trap amended reports within the system or find a way to make lab numbers unique. OJ commented that there are immediate and long term risks to be considered also the risk caused by the potential adoption of a paperless office. Confidence that numbers are all unique is paramount. Reconfiguration of lab services across GM could produce a bigger risk. The group agreed the best way forward was to identify the risk and get X-lab and Clinisys to talk together and resolve it.

- At this point it was mentioned that Pennine had logged a call to the IT helpdesk for a VPN on 02/02/10 and they are still waiting for a response. DS agreed to chase on behalf of Pennine.
- **Technidata** – Negotiations are still ongoing.
- **GMCHMD** – This is a standing agenda item and has not been discussed today.
- **Issues** – The major issue has already been discussed and refers back to the use of the patients NHS number as a standard. JS suggested that X-lab trap and send an alert about samples in the system without an NHS number. OJ explained that X-lab are working with Connecting for Health and soon should be in a position to validate NHS numbers against patient demographics. The group had a general discussion around NHS numbers but it was clarified that the current system will accept samples without an NHS number.
- DM asked that the minutes reflect that the initial problem with greater than and less than signs on results has now been resolved by X-lab.
- **Risks** – The risk register was available for viewing.
- **Any Other Business** –
- OJ informed the group that in the recent DH Pathology Programme Update 2009 under IT Developments several projects X-lab have worked on are mentioned including the National Laboratory Medicine Catalogue (NLMC), GP Order Comms and Lab2Lab. The report states that the potential of Lab2Lab is widely recognised....but actually neither X-lab nor the GM Pathology Network are given any credit. The GP Order Comms system and Lab2Lab are considered a package to be rolled out nationally. The group agreed that both X-lab and GMPN should be receiving more credit for their achievement and it was decided that OJ should raise with Rick Jones and JS should raise with Gifford Batstone at the next Pathology Futures Group at the end of this month.
- **IBMS CPD** – Certificates were available.

Actions

- DM is to visit Trafford and Salford regarding setting up of test routes
- DS to ask John Caffrey for upto date position on invoicing
- DS to circulate invoice position for clarification
- All members to ensure money is bound over to next financial year within their Trusts.
- Group to identify and resolve numbering issue
- DS to chase IT helpdesk re: VPN request from Pennine

Recommendations to Pathology Network Board

- None

Date and Time of Next Meeting

- Monday 10th May 2010, 9.30am-11.30am, One Central Park, Northampton Road, Manchester, M40 5BP