Description	Target / Threshold	Apr-21	May-21	Jun-21	Jul-21	Aug-21	Sep-21	Oct-21	Nov-21	Dec-21	Jan-22	Feb-22	Mar-22
Number of Serious Incident assigned to pathology		0	0	0	0	0	0	0	0	0	0	0	0
Number of outstanding Datix reports	0	1	1	0	0	0	0	1	1	1	0	0	0
over 30 days old Number of RIDDORs reported	0	0	0	0	0	0	0	0	0	0	0	0	0
Staff sickness rate	3.96%	3.10%	2.81%	2.92%	3.03%	2.76%	1.76%	2.36%	4.55%	4.72%	2.56%	4.75%	6.02%
Staff turn over	14.4%	0.70%	1.40%	0.7%	1.4%	0.7%	2.1%	0.7%	0.0%	1.5%	0.0%	3.7%	5.7%
Overall Activity	Monitoring	941411	945356	1190192	1173586	1054410	822897	1074883	1214795	1097106	1166698	1159269	1353610
Headline risk for Pathology service	Monitoring				L			comms		_	L		
Services currently meets statutory requirements - MHRA	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Services currently meets statutory requirements - HTA	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Services currently meets statutory requirements - HFEA	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Services currently meets statutory requirements - HSE	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Services currently meets statutory requirements - DHSC POCT guidelines	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
% Turnaround time (Within 1 hr) - Acute Chemistry - Potassium	95%	91.0%	90.0%	87.0%	93.0%	91.0%	91.0%	89.0%	89.0%	90.0%	90.0%	91.0%	86.0%
% Turnaround time (Within 6 hrs) - Routine Chemistry - Potassium	95%	94.6%	94.9%	93.6%	95.0%	95.4%	97.4%	96.4%	95.0%	95.2%	95.4%	95.9%	94.6%
% Turnaround time (Withi 1 hr) - Acute Haematology - FBC	95%	93.6%	95.2%	95.0%	94.1%	93.7%	94.7%	94.9%	95.8%	94.6%	95.0%	94.5%	94.0%
% Turnaround time)Within 6hrs) - Routine Haematology - FBC	95%	99.3%	99.3%	99.1%	99.6%	99.4%	99.6%	99.7%	99.6%	99.7%	99.7%	99.8%	99.6%
% Diagnostic Histopathology - within 7	90%	63.0%	84.0%	71.0%	73.0%	81.0%	70.0%	68.0%	75.0%	64.0%	76.0%	75.0%	63.0%
% Diagnostic Histopathology - within 10 days	98%	79.0%	96.0%	87.0%	83.0%	93.0%	85.0%	83.0%	87.0%	80.0%	87.0%	90.0%	78.0%
Local patient pathways, agreed with requestors, shall include anticipated turnaround times for all laboratory investigations	95%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%
% TAT within 15 hrs of COVID-19 real time RT-PCR	95%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%

List Investigations not covered by ISO (Total Investigation available and reported)	0		10	10	10	10	10	10	10	10	10	10	10	10
List Investigations not covered by ISO (Total Investigation referred to third party)	0		26	26	26	26	26	26	26	26	26	26	26	26
All investigations should be covered by EQA scheme.	100%		95.0%	95.0%	95.0%	95.0%	95.0%	95.0%	95.0%	95.0%	95.0%	95.0%	95.0%	95.0%
Number of NICE Guidance - Commissioned and funded and actions has not been completed	0		0	0	0	0	0	0	0	0	0	0	0	0
Number of safety notice received >21 days and not yet implemented	0		0	0	0	0	0	0	0	0	0	0	0	0
% of transport delays recorded as non- conformances	≤1%		0.0%	0.0%	0.0%	0.4%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Staff annual Appraisal Rates	100%	_	85.5%	80.4%	70.6%	68.4%	69.6%	67.7%	65.5%	73.3%	80.1%	81.9%	78.7%	75.9%
ocum and bank staff to substantive ratio	5.5%	_	1.3%	1.3%	1.3%	2.3%	2.3%	2.3%	0.8%	0.8%	0.8%	0.8%	0.8%	0.8%
All senior staff - Annual appraisal	100%		94.0%	94.0%	94.0%	94.0%	94.0%	94.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%
Proportion of staff in formal training	5%		4.2%	4.2%	4.2%	5.00%	5.00%	5.00%	5.00%	5.00%	5.00%	5.00%	5.00%	5.00%
Proportion of staff undergoing training/education programmes	>5%		8.0%	8.0%	8.0%	8.0%	8.0%	8.0%	8.0%	8.0%	8.0%	8.0%	8.0%	8.0%
Friends and Family survey rate - Completed and published	One per year		Trust	Trust	Trust	Trust	Trust	Trust	Trust	Trust	Trust	Trust	Trust	Trust
Service user satisfaction survey rate - Completed and published	One per year		Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Attendance at identified MDT Meetings	100%		100%	100%	100%	100%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%
Pathology Staff Survey - Completed and published	One per year		1	1	1	1	1	1	1	1	1	1	1	1
Number of business review meetings held in the last quarter with primary pathology provider where is it not provided by the trust.	One per quarter		1	0	1	0	1	1	1	1	1	1	1	1
Number of business review meetings held in the last quarter with diagnostic suppliers	One per quarter		1	1	1	1	1	1	1	1	1	1	1	1
% of Equipment contracts in effect that are over original term agreement.	0%		0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%

Pathology Quality Assurance Dashboard 2021-22

The laboratory shall actively engage in demand optimisation, design both to reduce the number of unnecessary tests and to help ensure that appropriate tests are used	In date Policy	
Laboratories shall demonstrate commitment to sustained innovation in their services through continuous quality improvement (CQI), which may include conducting formal academic research and evaluating novel approaches aimed at improving	Tolley	In date Policy
The proportion of inpatient results required for discharge available at time of need		Future
Average number of blood draws per patient episode. % of blood culture bottles that meet the minimum fill level of 20ml	Monitoring 100%	Future Future

KEY

Datix - a web-based system that is used for the reporting and

RIDDOR - Reporting of Injuries, Diseases and Dangerous

MHRA - Medicines and Healthcare products Regulatory

HTA - Human Tissue Authority

HFEA - Human Fertilisation and Embryology Authority

HSE - Health and Safety Executive

DHSC - Department of Health and Social Care

POCT - Point-of-care testing

FBC - full blood count

RT-PCR - Reverse transcription polymerase chain reaction

ISO - International Organization for Standardization

EQA - external quality assessment

NICE - National Institute for Health and Care Excellence

MDT - Multidisciplinary Team