


Scotland and Northern Ireland EQA Scheme in General Histopathology

EQAO10 OFFICE MANUAL

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AUTHORISED BY	Dr Geraldine O'Dowd - Scheme Chairperson 

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1 RATIONALE

Should the scheme secretary be unavailable for any reason, it is imperative that there are written guidelines describing daily tasks for recognised deputies to follow.

2 OBTAINING CASE MATERIAL

Case material for assessment circulation and distribution to the management team members is bi-annual (**EQAO03**)

2.1 MANAGEMENT TEAM

A copy of the current management team (**EQA Form 14**) is controlled within Q-Pulse.

At the Management Team Meetings there are two new members who will have been invited onto the Management Committee (**EQA Letter 13**) and are asked to provide the assessment slides which are prepared in an accredited laboratory which is also participating satisfactory in an approved technical EQA Scheme. There should be a filed letter of acceptance in the top drawer of the filing cabinet from these members confirming this, along with a signed consent form. If not, chase this up. This is a copy of their acceptance letter to the Chairperson in response to inviting them to be on the Management Team.

After Management Team Meetings, usually held in September and February, send out an email of Assessment Slide Request Letter (**EQA Letter 04**) to both new members (who are Consultant Pathologists) asking them to provide 10 cases each with lab numbers, case histories and diagnoses and also give them a specified date of 4-6 weeks for delivery.

Also enclose previous circulation proformas to prevent repeat of previous cases (G: EQApathScheme/history of run diagnoses). Once received, type up a copy of all the Lab. No's received, (**EQA Form 20**), store in the relevant circulation folder at G: EQApathScheme/ and file a copy in locked filing cabinet where slides are kept.

Update the timetable (**EQA Form 23**) of various dates and doctors who are involved in the next round from Q-Pulse and leave this on office wall to refer to.

Once slides are received from both of the Management Team new members, give slides to Scheme Administrator to check for quality. The Administrator removes and marks slides not suitable with an X so don't use any that are marked.

Type up Assessment proforma (**EQA Form 3**) then label and pack up boxed sets of each 20 slides into labelled green boxes (Labels at: G:\EQApathscheme\EQA Scheme forms\AssessmentSlideBoxLabels), bubble wrap inside the box and then bubble wrap outside and then place in a padded envelope.

Organise recorded delivery slips and padded envelopes for each management Team member and record on Form delivery slip number and date posted.

Post out circulation boxes to all the Management Team members (pre-printed labels available in filing cabinet within scheme office) via recorded delivery. Keep a note of all the delivery numbers and where sent to and date, form available on **EQA Form 5**.

Email a letter (**EQA Letter 05**) and Assessment Proforma (**EQA Form 3**) once the slides have been posted and ask the Management Team to send their diagnoses back by a deadline date, which is usually 1 week after deadline date of the Clinical circulation. Record date slides are posted on the form and date returned.

Give regular reminders to the team via email until deadline date and chase up any non-returns. Once Management Team members send you their diagnosis and slides back, type up a list of all diagnoses using **EQA Form 02** on Q-Pulse and photocopy for all the Management Team members who attend the meeting (circulation folder).

Record receipt date of each Management Team's proforma and if slides are received or not on the Circulation Assessment Recorded Delivery form – **EQA Form 5** (If not received ask them to bring them to the Management Team meeting).

Management Team members will have their answers put forward to the clinical round and the secretary is responsible for transfer these over and sending each Management member their proforma to check before submitting for marking by markers to ensure accuracy.

Prior to the Management Team meeting have the list of collated Management teams diagnosis checked by either Scheme Administrator or QM. At the Management Team Meeting the management select 10 cases out of the 20 cases. These 10 cases are the clinical round and these are labelled A-J.

The 10 cases which are not selected are stored on the top shelf in large grey boxes of the locked filing cabinet (near stair) and marked with Assessment Unused slides. Sometimes these unused slides are suitable to be put forward for special educational cases for the next round so filing of these slides must be accurate.

2.2 Use of Label Printer

Labels for slides are printed from the PC situated outside the EQA office. Using your own log in the "Zebra" printer icon is available from the desk top. Double click the icon to open. The labels required may be available from the drop down list on screen, but if not then select "existing labels". Go to G: drive/pathdata/Labels1/EQA and select required label.

There are 3 labels for our scheme available: Diagnostic run, educational run and assessment run.

For the diagnostic run, update template Circ. Number and leave ?? template as this will automatically print out A-J 30 sets of each. File, print (set up to print 300).

Go back, click in to template for E ?? and leave as ?? as this will automatically print out E1-E4 30 sets as set up to print 120.

Organise and update all paperwork required for the clinical circulation. Double check your cluster list with the Excel list of participants sent to you by the Data Manager to ensure they are the same and no one is missing for the lists. Transfer over the 10 cases selected at the Management team meeting to clinical proforma form in Q-Pulse. Email this to the Management Team if the Scheme Administrator is not around to be checked for accuracy.

3 CIRCULATION PROFORMA RETURNS

EQAO04 – guidance notes for markers

Take a photocopy of all proformas returned via fax or post, print off 2 copies of those that arrive via e-mail, write on date received and record on circulation return spreadsheet, provided by the Data Manager at the start of each round, and stored in the relevant circulation folder at: G:EQApathScheme/. Record if clinical and special education paper received and also record the date.

Look up participants' code on the Participant List spreadsheet supplied by the data manager and tick off the name from cluster list. Chase up any non-returns finding out if there is valid reason for non-return and record on the excel sheet any updates e.g. maternity leave, long term sick leave, withdrawal etc.

Once you have received all proformas, post them to markers (Management Team members who provided clinical material A-J) for marking. Include guidance notes for markers document (available in **EQAO04**) and opt out list document, (**EQA Form 17**).

Send an email to both markers with an attached spreadsheet listing codes of all papers which are being posted out. Ask that they both keep note of codes of cases they score a 2 or 3 as it saves time at Management Meeting. Post to first marker asking them to forward to second marker who then posts all marked papers on to the Data Manager. Ask markers to email you and Data Manager to record date all marked proformas are sent to the Data Manager.

*Mail recorded delivery and keep note of the recorded delivery slip number on the form available on Q-Pulse.

It is the same procedure for sending off Special education papers of recording postdate and recorded delivery number, but they do not require opt out or guidance notes documents.

Once clinical papers have been sent to the Data Manager, they should be checked for scoring and divided into two bundles with one bundle of 10 scores and another bundle of scores of 11 and over. 1 mark is given for correct, 2 marks is a minor error, unlikely to affect patient management and 3 is an error, which would affect patient management. Markers should use different coloured pens to differentiate who marked what score. In a case where there are two different scores, count the higher score.

The Data Manager will print out a provisional result of all papers and forward to the secretary to photocopy 12-14 sets of provisional results for Management Team Meeting, which is held approx. 3 weeks after deadline date.

NB. The Scheme Secretary issues reminders to each department three weeks prior to the closing date, (**EQAO04**) and to cluster secretaries / individual participants as necessary on up to two more occasions.

Throughout the 12 weeks of a circulation the secretary may have regular contact with cluster secretaries and participants with regard to progress. Record the codes of any non-participation both on the Participant spreadsheet and the non-returns form (**EQA Form 16**), either with no reason or valid reason (e.g. long term sick leave, maternity leave). The Data Manager will then utilise this information in producing the provisional results.

A copy of non-participation list is also required for Chairperson at Management Team Meeting.

All marked proformas must be returned to the EQA office as soon as possible after the final results have been distributed. This enables any queries or appeals against the scoring to be dealt with promptly.

4 DISTRIBUTION – CIRCULATION SLIDE AND PROFORMAS

Ref: EQAO03

4.1 Slides

The 10 selected cases from assessment round are labelled A-J and there are also 4 special education cases provided by the 2 Management Team members who have provided clinical material from previous round (markers). These are labelled E1-E4. Make sure you print labels before the Management Team Meetings so you have them ready for labelling the slides which are chosen to be distributed.

Each set of slides A-J and E1-E4 are put into the 22 cluster boxes and the Ninewells set is retained by the secretary.

Each hospital is grouped into clusters of participants' names. There are clusters 1-20 (**EQA Form 20**) and cluster 20 shares slides. The cluster number is written on each slide and a list of the cluster participants list is attached to the lid of the box. The box is bubble wrapped and put into a padded envelope, which is posted by recorded delivery. Keep a note of all clusters recorded delivery slip numbers and date posted on **EQA Form 06**.

4.2 Paperwork

The cluster contacts are notified of dispatch by e-mail with an attached letter – **EQA Letter 16** and asked to notify the scheme secretary of their safe receipt. They are also sent an email of the circulation proformas both Clinical (**EQA Form 07**) and Special Educational (**EQA Form 22**).

All participants are also e-mailed to notify of the dispatch of slides, with the following attachments:

- A covering letter from the Scheme Chairperson providing the closing date for receipt of responses – **EQA Letter 06**
- The blank test circulation and special education doc. proformas with slide details (**EQA Forms 07 and 22**). These are the typed up case histories with space underneath for answers.

N.B. The blank test circulation proforma must be sent as a template (.dot file – not dot.x) and other word documents sent as a .doc file – not doc.x)

Three emails are sent – **EQA Letter 06** and proformas to all participants, cluster 20 mailing instructions to participants in cluster 20 and third email to all cluster contacts.

If any slides are damaged the secretary should be informed to forward a replacement. This is also logged on Q-Pulse as an incident (also notify Quality Manager)

Slides are kept by the cluster/department secretary for a period of one month after participants meeting (ACP). They are then sent back to EQA Secretary. If they are not sent back the secretary chases these up by email all participants in non-returned slides cluster. Record receipt of slides on **EQA Form 19** and keep hard copy in the black folder on 1st shelf right side of desk in Scheme Secretary office.

The slides are put into plastic covers and filed in the locked filing cabinet in a grey box outside Scheme Secretary's office. The grey box is clearly marked with circulation number.

Any slides which are not returned within this period the cluster contact is sent a reminder. After two reminders (phone/email), a letter is sent out by Scheme Administrator (**EQA Letter 12**). Copies of reminders of chase up of slides are kept in the slides returned black folder on first shelf in office, right hand side.

5 FILING

Filing cabinet in EQA office holds paperwork, which is currently used.

All stationery is kept in an additional locked cabinet in area outside office.

All slides returned are recorded on **EQA Form 19** "Returned Slides Log" which is kept in the black folder on right hand shelf of office and then filed in locked cabinet at bottom of steps in area (all paperwork has a footer to indicate which folder and file).

Along with filed slides the paperwork from each circulation, lists of laboratory numbers from each circulation and boxes of participants' proformas are filed. Unused Assessment slides are also kept in the locked cabinet.

5.1 Filing Cabinet (office)

All paperwork from current circulation round is filed in the top drawer of the office filing cabinet. Keep all paperwork from each circulation and at the end of the circulation file in the locked large cabinet in the outside area.

In second drawer of filing cabinet file all provisional and final results from each circulation along with list of names and separate code sheet.

Participant's attendance list and minutes in next compartment

Annual reports

NSD filing (who meet yearly)

UKAS filing

NQAAP filing

6 MANAGEMENT TEAM AND EXECUTIVE TEAM MEETINGS

Management Team Meetings are held twice yearly, usually March and September. The date of each meeting is set by the secretary and Data Manager.

Executive Team Meetings are held regularly throughout the year.

Scheme Secretary organises room & catering for the above meetings or issues invites for Teams meetings. Details of this can be found in filing cabinet below printer in Office. Include Buffet lunch in meeting room for Management Team Meetings. The secretary is responsible for taking the minutes of the meeting and updating the team of any correspondence /complaints etc. at the meeting.

Final minutes of both meetings are kept at: G:\EQApathscheme\Minutes. Template for the Executive meeting agenda is **EQA Letter 02**.

Template for the Executive meeting minute is **EQA letter 03**.

Template for the Management meeting agenda is **EQA Letter 14**.

Template for the Management meeting minute is **EQA Letter 15**.

Hard copies of all agendas and minutes are also filed in top drawer filing cabinet, Scheme Secretary's office.

Approx. 1 week before meeting email agenda and previous minutes to Management Team/Executive Team as required.

Management Meetings: Make up packs of agenda, minutes, Management assessment diagnoses, along with assessment proforma diagnosis, Circulation Clinical and Special Education Case diagnoses, provisional results, travel form and any other relevant paperwork for members of the Management who are attending the Meeting.

7 NEW PARTICIPANT AND WITHDRAWAL REQUEST

7.1 New Participant to the Scheme

Prospective participants are encouraged to join our scheme by sending them **EQA letter 17**.

On receiving a new participant request via letter or email, send out **EQA Letter 01**, along with **EQAO01** and **EQAO02**. New participants are asked to read the SOP's which are accessed on website (<http://www.pathology.scot.nhs.uk/resources/pathologists-ega/>) and to sign and return the consent form attached to the letter.

Inform Data Manager of new participant requesting a new participant code (4 digit number), once consent form has been sent back to secretary. Once the code has been received it is forwarded to the new participant stating the importance of not revealing their code to anyone. Update cluster list (**EQA Form 10**) and distribution list in folders and include new participant in email list. Also add name and code to list in locked safe on top of filing cabinet.

The new participant is also asked which circulation they would like to start at depending on at what stage they request to join the Scheme; it is sometimes the next round.

Inform Data Manager as to which round the new participant is starting.

7.2 Participant Withdrawal from the Scheme

On notification of participant withdrawal, inform Data Manager and update all relevant files, (distribution list, cluster list, code/name list in locked safe/email). Send a letter via email thanking them for their past participation and wishing good luck (**EQA Letter 18**).

If the participant withdrawal is waiting on circulation results, don't delete email or contact in cluster email until after final results are posted and results are forwarded to correct address.

7.3 Change of Participants Address

Participants sometimes move to different hospitals. Update distribution email group and cluster list form (**EQA Form 10**) and inform Data Manager of change of address so that he can update database and labels.

7.4 Participant Opt-out Notifications

Participants may notify the scheme that they wish to opt-out of certain sub-specialty groups. On receipt of such a request, notify the scheme administrator and check that the participant is not making the

request retrospectively, i.e. after receiving the slides for the current circulation. Then respond to the participant including the following paragraph from **EQAO02**:

“If the participant does not routinely report certain categories of surgical pathology cases (e.g. gynaecological cases) then this must be notified to the Scheme Secretary for approval by the Scheme Administrator on joining the Scheme and such cases will be scored as if a correct answer was given. After joining the scheme, any change of circumstance with respect to categories not reported must be notified in writing to the Scheme Secretary for approval by the Scheme Administrator as soon as possible.

No more than three sub specialties will be accepted for exclusion and this should affect the marking of no more than three of the diagnostic cases in any individual run, therefore at least seven diagnoses must be given on each return. If no indication of “opting out” is given on the answer sheet then the diagnosis given will be marked and that mark included in the results.

Retrospective notice of certain types of cases not to be reported in the circulation will not be acceptable.”

8 LETTERS SENT TO PARTICIPANTS FROM CHAIRPERSON

At the end of each circulation there might be cause for the Chairperson to write to a participant. To ensure confidentiality the Secretary and Data Manager check the codes of any participants triggering action at the end of each circulation.

The secretary inserts the participant code on the relevant letter (either **EQA Letter 09** or **Letter 10**) and looks up the participants' name. The code is also checked by Scheme Chairperson (he/she is identified to the Chairperson by code only). The participant name is checked by code again by the Data Manager and Scheme Secretary before posting out to participants. File a second copy of any letters sent in the locked safe on top of filing cabinet in office and record in the log sheet.

9 POSTING PROVISIONAL AND FINAL RESULTS TO PARTICIPANTS

9.1 Email Provisional Results

Email a copy of provisional results to all participants (this document is provided by the Data Manager) along with Letter from Chairperson (**EQA Letter 07**) and diagnoses and clinical histories from the management meeting minutes.

9.2 Posting Final Results

Post out Final Results and individual CPD certificates. The certificates are sent in a PDF file to the office, where they are printed off by Secretary). These are personalised with participant code and the code and name sheet are in locked cabinet in scheme office. Check also with Participants meeting attendance list and circ. Code list which has date of receipt of clinical and special educational proformas.

Email letter, to all participants, from Scheme Administrator (**EQA Letter 08** from Q-Pulse) along with agreed diagnoses in the minutes from the Participants meeting.

* If possible an audit is carried out during this procedure by the Quality Manager.

NB Each final results paper has an individual code. Look up code for participants name, look up name label.

10 ORDERING STATIONERY

Stationery is ordered through Pecos (staff must be Pecos trained). Pecos is accessed from Staffnet. Click on Business systems, Pecos. Our Transfer Code is 7161.

Once an order received, go back into Pecos to receipt order.

11 ADDITIONAL INFORMATION/DUTIES

11.1 Organise Timetable

After Management Team Meeting the scheme secretary makes a timetable of deadline dates for receipt of the next Assessment Circulation slides and receipt of the next Special Education slides for next round (sometimes there are cases submitted at Assessment round which are re used as special educational slides).

The secretary also sends **EQA Letter 04** to the management team members providing the cases for the next round and takes note of the date slides received. This timetable is kept on the office wall on pin board.

11.2 Management Team Meetings

There are 2 Management Team Meetings per year at which the provisional scoring is decided and the scheme secretary takes the minute. These are followed by the participants own meetings, which are currently incorporated within the local ACP meetings and are usually held on the first Thursday in March and October.

The final scoring is decided at these meetings, with members of the management team being responsible for the final decisions. Scheme Secretary organises room (unifi.dundee.ac.uk) and catering (catering.tayside.nhs.net) for the above meetings. Details of this can be found in filing cabinet below printer in Office. Include Buffet lunch in meeting room for Management Team Meetings.

The ACP secretary arranges the ACP meetings and will send timetable to be emailed to all participants. Scheme Chairperson will email the minute to be sent to all participants via email by Scheme secretary. (Scheme Secretary is not required to attend these meetings).

11.3 Executive Team Meetings

There are also regular Executive Team Meetings attended by Scheme Secretary, Quality Manager, Chairperson, Data Manager and Administrator. Scheme Secretary records minutes at these meetings and any actions required (make sure you order coffee/tea etc.).

11.4 Audits

Regular audits are conducted by the Quality Manager and the Scheme Secretary. These are recorded on software within Q-Pulse.

11.5 UKAS visits

There are annual Accreditation visits, usually in April. An assessor will organise a date of this meeting with Exec. Team and usually sit with the Quality Manager and secretary and ask for evidence/proof that procedures are being followed by asking various questions on how the Scheme is run and how duties are carried out.

Organise a room (usually in Pathology Dept.) Order coffee/tea and working lunch for days of the assessment visit.

UKAS fees require to be paid and they will send the appropriate invoice. This is organised via PECOS and the secretary raises a requisition, with attached invoice, which will be approved by Manager. This will give a PO number which has to be emailed to UKAS. The secretary has to go back into Pecos to receipt in order for UKAS to receive payment.

11.6 NSD Meetings

The NSD review meetings are annual. The Scheme Secretary is responsible for ensuring all the Exec. Team and Finance manager are notified of this meeting. The secretary does not take minutes at these meetings but must attend (usually take notebook for own notes). The secretary will distribute agenda and relevant documents sent to her from NSD to the Exec. Team and the Finance representative. NSD should have received a copy of the annual report, which is sent by the Scheme Quality Manager. Make a few copies of this report and information relating to the report so as to assist with answering questions which may arise. Secretary organises room but catering is not usually required.

11.7 Room Bookings

All information on room bookings, catering and financial codes are in left hand side of desk filing cabinet 6th drawer. To book the MDT Room phone secretaries in the main office.

11.8 Travel Expenses

Travel expenses for attendance at all meetings are reimbursed. Send a memo (EQA Form 24) which will require all management Teams names and bank details. A signature is required from Manager (keep a copy) to Cash Office, Financial Services, Maryfield, Mains Loan, Dundee. Keep a copy of this memo in file.

11.9 Cluster Secretarial Honorary Payment

Once yearly all cluster secretaries who liaise, distribute and monitor circulations with EQA Scheme Secretary are given an honorary cheque (usually around June). Collate names and bank details from all and send a memo (**EQA Letter 19**) requesting payment direct into their bank account. File hard copy in top drawer filing - Other expenses.

11.10 Lab Expenses

Each new Management Team Member supplying slides for each round are reimbursed £250 for lab expenses. Information is supplied in **EQA Letter 04** and once the new member supplies 10 cases for the assessment round the fee can be paid to their department.

If an invoice is received the secretary has to raise a purchase order and receipt once slides are received. This is done through Pecos. Payment for slides will be paid automatically once this has been completed. For further help/advice on how to complete this, contact Pecos helpdesk. Secretary for the Scheme is Pecos trained.