

RCPA Serology QAP Customer Satisfaction Survey - 2010

An online Customer Satisfaction Questionnaire was open to all RCPA Serology QAP (SQAP) participants (n=790) in March 2010 to assess Serology QAP performance and to provide guidelines for future improvements.

119 (15%) participants responded and their ratings and comments are presented below.

Responses to additional comments have been included from the SQAP, however if further information is required please contact us serology@rcpaqap.com.au

RCPA Serology QAP response to this Customer Satisfaction Survey.

Overall, we were pleased with the responses but will continue to work on the areas where there is dissatisfaction.

The most rewarding aspect of this survey for SQAP staff is that participants are pleased with developments that we have implemented. Our participants are important to us and are the reason for the existence of the QA program. We continuously strive to provide a high quality QA program and provide a supportive customer service.

The greatest frustration for the SQAP is the number of people who request features that already exist. We send email alerts for every survey, provide information in our newsletter, publish a yearly Participation Booklet and provide information on Enrolment Forms and in the yearly Enrolment Information Booklet that is issued by the Enrolment Office each year. Despite all of this, there are participants who are unaware of the many features that we have worked hard to develop.

The Serology QAP extends thanks to participants who took the time to respond. We are introducing a Point of Care Module in 2011 in response to participant requests and currently investigating some of the suggestions in this survey.

We encourage and appreciate your feedback.

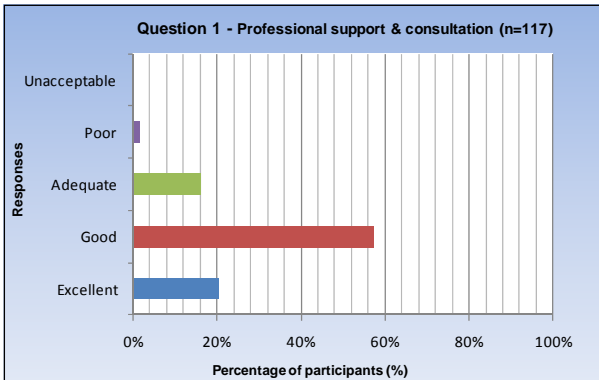
Best wishes from the RCPA Serology QAP Team

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Quality Objectives

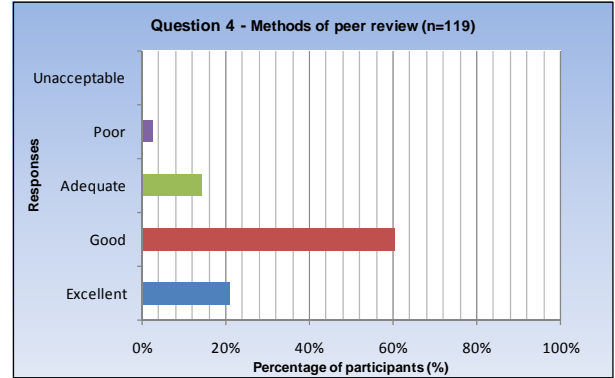
Please rate the following aspects of our work.

Q.1) Does the Serology QAP provide professional support and consultation?



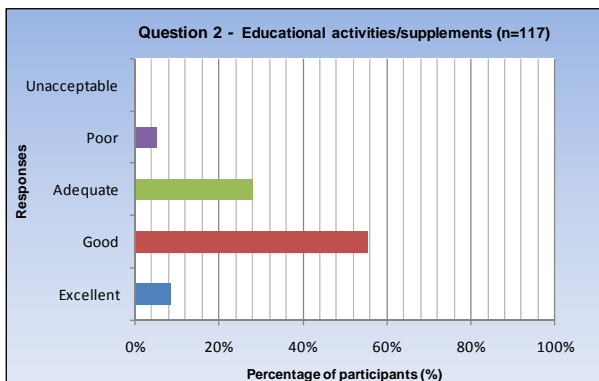
[In 2007-08; 58% participants rated 8-10 (range 1-10)]

Q.4) How would you rate our methods of peer review?



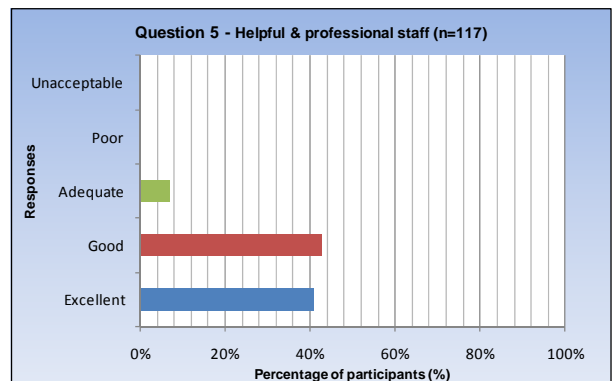
[In 2007-08; 50% participants rated 8-10 (range 1-10)]

Q.2) Does the Serology QAP provide sufficient educational activities/supplements?



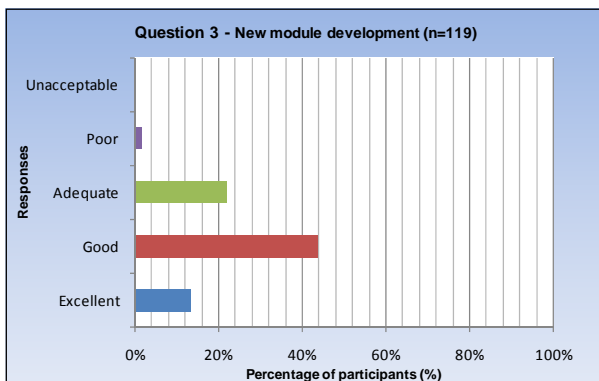
[In 2007-08; 83% participants rated Yes (answer Y/N)]

Q.5) When contacting the Serology QAP office do you find the staff helpful and professional?



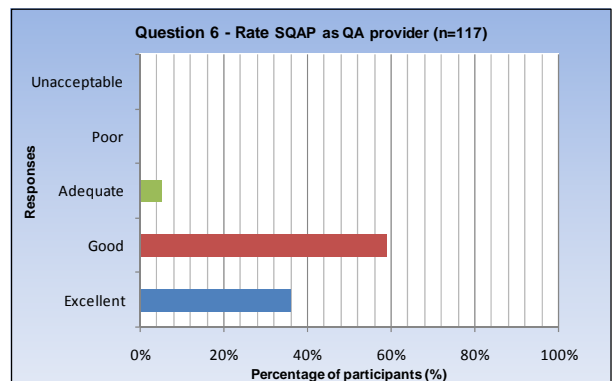
[In 2007-08; 90% participants rated Yes (answer Y/N)]

Q.3) Are new modules developed to meet your requirements?



[In 2007-08; 78% participants rated Yes (answer Y/N)]

Q.6) Generally, how would you rate the Serology QAP as a Quality Assurance Provider?



[In 2007-08; 78% participants rated 8-10 (range 1-10)]

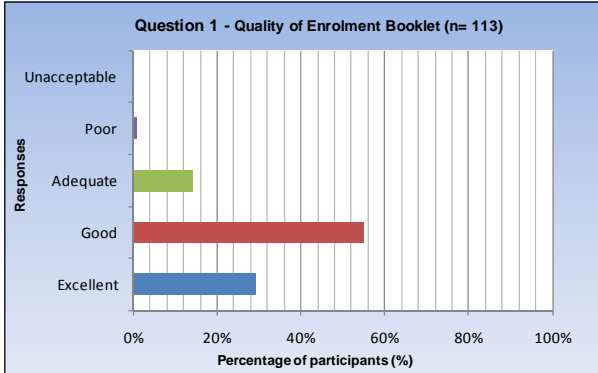
Q.7) If you have a poor rating to any of the above questions, please give details so that we can make improvements.

Comments – ratings ‘Poor’ for Questions 1-6	
I didn't know that the Serology QAP provide educational activities/supplements. Probably missed it in one of the newsletters. Unless it is implied in some of the module reports	
Little obvious education supplements are provided	
We only do the Infectious Mononucleosis survey and have never received an educational activity/supplement	
Insufficient educational activities for molecular. Also we are not in Australia.	
SQAP RESPONSE	Educational material is provided in each report in the ‘report reviewer comments’. The extent of this can vary with the survey, for example, the simplicity of the IM and RF surveys do not have commentary from report reviewers for each report, however educational material is provided with the blood film review for one survey in the year. The SQAP website also has fact sheets, references and newsletters which all provide educational material for participants. The reports for the Specimen Free module contain useful educational material.
More educational activities can be added. Participant survey report and assessment can be put together, so that more easy to read.	
SQAP RESPONSE	The Participant Assessment report is specific for each participant; the Survey Report is generic for all participants. As these reports are generally accessed at different times it would delay access to Participant Assessment report to have the reports together. The generic survey report also needs to be available for every participant under ‘Results by Disease’.
We have some tests that still doesn't have a QAP for them (Tetanus, Diphtheria, Yersinia, and then now the Salmonella Serology)	
SQAP RESPONSE	The Salmonella Serology module was ceased due to the difficulty in acquiring specimens and producing meaningful data to interpret. It is an ongoing challenge to acquire specimens for the other tests you mention however, we are keeping these in mind for the future. If you can assist with specimens for these tests please contact us.
Too lengthy and complicated to understand the review. Kindly make it easier and if possible issue our report separately mentioning whether our results are passed EQUAS or not.	
SQAP RESPONSE	The Participant Assessment report is concise, assesses your results individually and provides a score. It appears that you have not read the Serology Participation Booklet as this information is detailed on Pages 20-25. The SQAP endeavors to analyse your data in a meaningful way which can lead to lengthy GENERIC reports, however the idea is to include all of the information required to enable the participant to assess their own lab performance. Participant Assessment reports also aid in this process.
I find the reports by disease a bit unwieldy. The Assessment report is good and to the point but a report similar to the Chemical Pathology peer group histograms could offer more information, concisely for plotting the "value" data, noting the peer group median and 2 SD range.	
SQAP RESPONSE	Appendix A of this document contains a de-identified Assessment Report for you to view as it appears that you have only viewed part of the Assessment Report. The Participant Assessment reports include graphical and statistical analysis using robust statistics. Click on the red ball beside your result to open the section that provides analysis of your result. Dynamic graphs of ‘value’ data and median and 2IQR (equivalent to 2SD) are also available on the website immediately after the survey closes. Please contact the SQAP directly if you are having difficulties accessing this information. The ‘Results by Disease’ section contains all of the generic reports since 2000 for participant convenience. The search can be narrowed by selecting a ‘Disease Name’ and the ‘Year’ of interest.

Enrolments

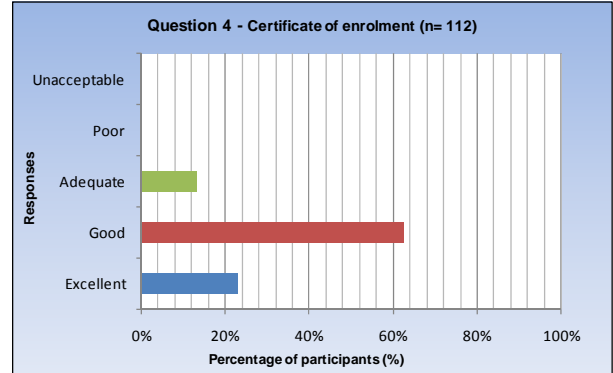
How do you rate the following functions of the Enrolment Office?

Q.1) How do you rate the quality of the Enrolment Booklet?



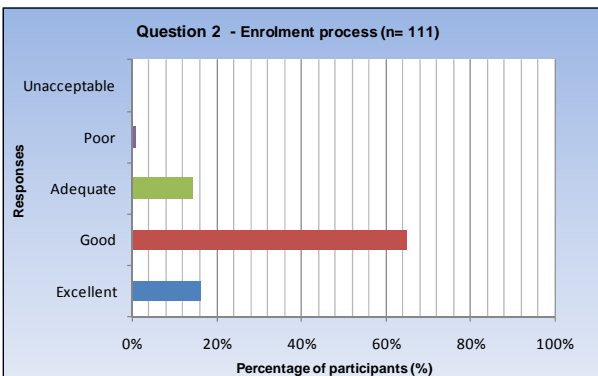
[In 2007-08; 66% participants rated 8-10 (range 1-10)]

Q.4) How do you rate the quality of the dispatch of the Certificate of Enrolment?



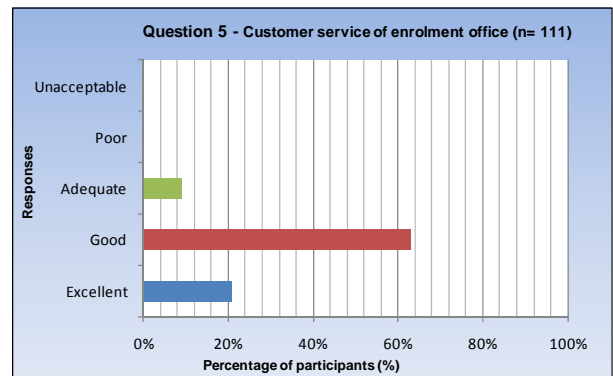
[In 2007-08; 78% participants rated 8-10 (range 1-10)]

Q.2) How do you rate the quality of the Enrolment process?



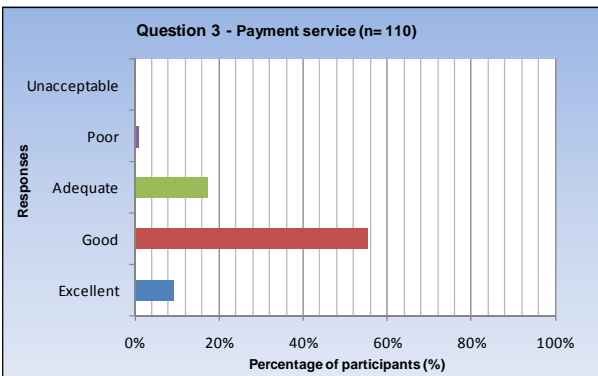
[In 2007-08; 73% participants rated 8-10 (range 1-10)]

Q.5) How do you rate the customer service of the Enrolment Office?



[In 2007-08; 73% participants rated 8-10 (range 1-10)]

Q.3) How do you rate the quality of the Payment Service?



[In 2007-08; 66% participants rated 8-10 (range 1-10)]

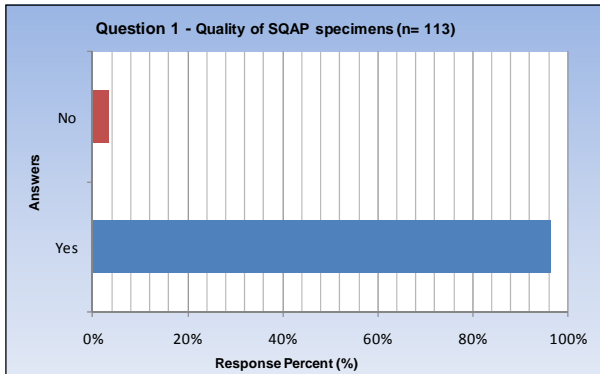


Q.6) If you have given a poor rating to any of the above questions, please give details so that we can make improvements.

Comments – ratings ‘Poor’ for Questions 1-5	
Previous years no problems. This year with the new system there was a long time between sending the enrolment and getting any information about when samples would arrive. All I want post enrolment is acknowledgment that it's been received.	
The invoices were not sent to all the designated people on the enrolment forms from my organisation and also took too long to be sent.	
Payment made by a different department	
New system teething problems affected the enrolment / payment functions this time.	
SQAP RESPONSE	The enrolment process for 2010 did experience some ‘teething’ problems due to the implementation of several new systems. The SQAP appreciates your feedback regarding the process, these comments will be passed onto the Enrolment Office and it is envisaged that enrolment for the 2011 programs will be much smoother and problem free.

Serology QAP Specimens & Modules

Q.1) Are you happy with the quality of serology and molecular QAP specimens?

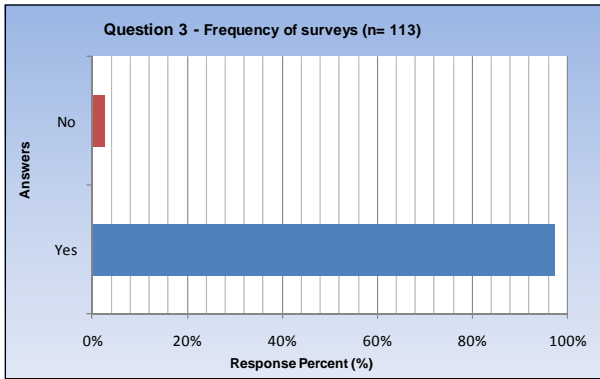


[In 2007-08; 93% participants rated Yes (answer Y/N)]

Q.2) If you have answered "NO" to question 1 please list,

Comments – 'If "NO" ' - for Question 1 (the quality of serology and molecular QAP specimens)	
Have experienced variable results on repeated testing which brings into question the integrity of the specimens.	
SQAP RESPONSE	It is essential that the specimens be stored and processed (including mixing and centrifugation) as per SQAP instructions to maintain specimen integrity. Are you storing specimens at -20°C in a freezer that does NOT have a defrost cycle? Please contact the SQAP regarding any issue relating to specimen degradation.
I am concerned about the HPV DNA samples. In the last survey only 6% of participants managed to score one of the samples correctly.	
SQAP RESPONSE	The SQAP has no record of only 6% of participants scoring a result correctly; overall performance has been excellent with HPV DNA. It is unclear which particular specimen you are referring to, however, the specimen preparation for the HPV is done by the WHO Reference Laboratory for HPV DNA. It is essential that the specimens are stored and processed as requested to ensure expected results are achieved.
If we follow our procedures for repeat testing, we often run out of sample so we need to abbreviate process & may only get single results.	
SQAP RESPONSE	Please contact us with details of the specimens where you require extra volume. We are currently planning and preparing specimens for 2011 and would appreciate knowing this information.
Very small sample size for the IM module	
SQAP RESPONSE	The SQAP issues 200uL for each IM specimen which is sufficient for the latex assays in use. Please use the feedback section if you laboratory requirements differ to assays in use.
Require larger sample volume to be able to perform testing as per normal practice (due to this laboratory being a Blood Service Lab)	
SQAP RESPONSE	We have always provided Blood Banks with extra volume for syphilis testing and we never receive feedback that a blood bank is short of specimen. The SQAP is aware that in some circumstances the Blood Banks do require additional sample volume; hence a greater volume is provided to these laboratories at no extra cost. If you have concerns regarding this please contact the SQAP.

Q.3) Are you happy with the frequency of Serology and Molecular QAP surveys?

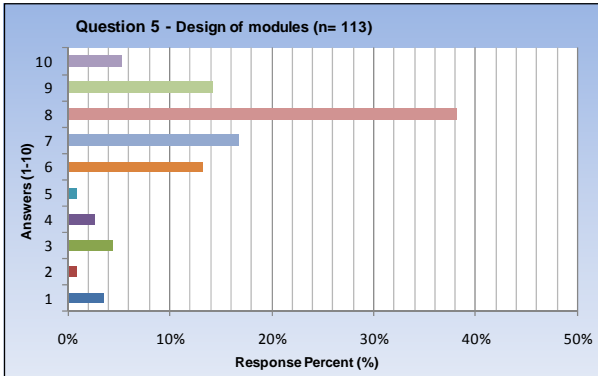


[In 2007-08; 92% participants rated Yes (answer Y/N)]

Q.4) If you have answered "NO" to question 3 please list,

Comments – 'If "NO" ' - for Question 3 (the frequency of serology and molecular QAP surveys)	
Some panels are tested too many times per year. ie HBsAg 3 times in antenatal and 6 times in Hepatitis.	
SQAP RESPONSE	In 2010, the SQAP introduced enrolment by analyte, therefore, if your laboratory does not require this amount of QA for HBsAg you do not need to enroll in the antenatal HBsAg if enrolled in Hepatitis. In 2011, HBsAg has been removed from the Antenatal module and will only be available through the Hepatitis module.
I would like to test just 2 times/year. Because I think that real time RT-PCR is expensive test. Especially, In lab limited with budget.	
SQAP RESPONSE	The SQAP is aware of the cost of Molecular testing, hence small specimens numbers per survey, however it is felt for complete annual coverage the 4 surveys are appropriate.
2 distributions/year is a bit too little	
Greater frequency of analysis for each analyte would be preferred, but we realise the difficulties in obtaining specimens.	
SQAP RESPONSE	Please read the participant feedback above. The SQAP always experiences difficulty obtaining specimens especially some of the rare analytes; the reason for 2 surveys per year for some analytes. If participants have suggestions for sourcing or are able to provide specimens please contact us.

Q.5) How would you rate the design of the Serology and Molecular QAP modules?

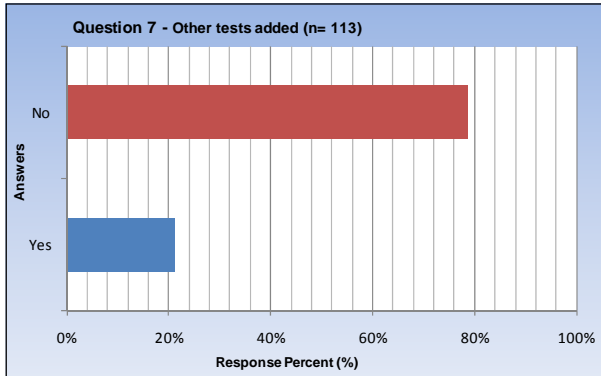


[In 2007-08; 64% participants rated 8-10 (range 1-10)]

Q.6) If you have given a rating below “6” for question 5, please give details,

Comments – ratings ‘below 6’ - for Question 5 (design of serology and molecular QAP modules)	
The final reports have to go to many sites, if just gather in one site is better.	
SQAP RESPONSE	It is unclear if you mean that Serology reports have to be distributed to many sites within your organisation OR if you mean that you have to access the reports from different sections of the Serology website. All reports (generic and personalised Assessment Reports) are both in the Member Login section of the website.
I found some of the groupings a bit confusing wasn't completely sure of what I was ordering, and thus getting.	
SQAP RESPONSE	For the 2010 enrolment modules were broken down into analytes, which meant participants could choose only the ones they required (this was changed due to participant feedback). To order simply tick the box beside the analyte that you require.
Graphical displays are too difficult to read. Maybe group colours together with circles by method.	
SQAP RESPONSE	We presume you are referring to the kit graphs for Rubella, if so, this is currently under investigation by our IT department.
The virtual microscopy component is difficult due to performance speed. (Probably not your issue, but ours.) Would prefer a DVD or CD with images.	
SQAP RESPONSE	The virtual microscopy component does work well if participants have the correct computer 'set-up'. The SQAP does offer a DVD copy for participants experiencing problems with this component of the survey. An email is sent to participants prior to survey open to choose this option.

Q.7) Are there any other tests that you would like added to the Serology and Molecular Program?



[In 2007-08; 19% participants rated Yes (answer Y/N)]

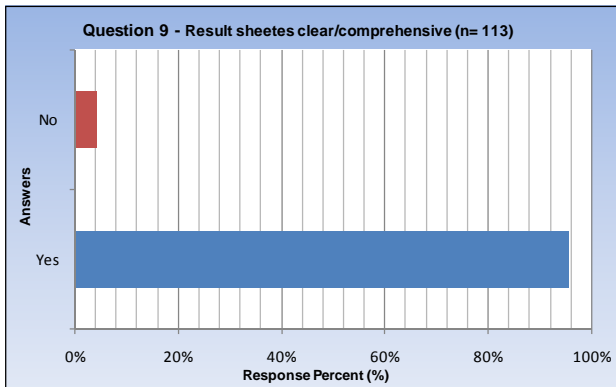
Q.8) If you have answered "YES" to question 7 please list,

Comments – 'If "YES" ' - for Question 7 (other tests added to serology and molecular QAP)	
	Dengue Serology
	HIV 1/2 Antibody
	Syphilis (ELISA)
SQAP RESPONSE	The SQAP already provides QA for these suggestions. Please refer to the Serology QAP Modules under 'Programs/Enrolment' on the website http://www.rcpaqap.com.au/serology/modules.cfm . Please contact the Enrolment Office (+61 2 8356 5827) if you would like to enrol in these modules. Please read the enrolment form.
	HPVDNA (HIGH RISK) Human Papillomavirus-Molecular
SQAP RESPONSE	The SQAP already has a Molecular HPV module, trialled in 2008 and introduced in 2009. Please contact the Enrolment Office you would like to enrol in this module (+61 2 8356 5827).
	Tularemia Serology, Parvovirus IgG and IgM Serology, HIV-1 Oral Fluid
SQAP RESPONSE	The SQAP already provides QA for Parvovirus. Please refer to the Serology QAP Modules under 'Programs/Enrolment' on the website http://www.rcpaqap.com.au/serology/modules.cfm . Please contact the Enrolment Office (+61 2 8356 5827) you would like to enrol in this module. The other suggestions will be considered.
	Chlamydia Trach. IgG
	Chlamydia trachomatis IgG testing as overseas quite a nos of GP still requesting for the IgG antibodies although we provided the Chlamydia trachomatis PCR as a alternative.
	RSV serology, Parainfluenza 1,2,3 serology, Adenovirus serology
	Norovirus, Rotavirus and Adenovirus Ag testing. HSV 1& 2 and VZV DFA
	BK virus; PCP, respiratory viruses eg parainfluenzae 1,2,3; RSV; rhinovirus; hMPV; adenovirus
	Norovirus
SQAP RESPONSE	The SQAP introduced Adenovirus as part of a trial survey in 2006 but found that it was difficult to acquire IgM positive specimens; if your lab can assist with this we are willing to run a survey. The SQAP are investigating the introduction of a Molecular Respiratory QA which could include RSV, rhinovirus, hMPV and Parainfluenza. DFA testing is usually performed on body fluids other than blood. At this stage the SQAP is unable to source specimens for this request.

Q.8) If you have answered "YES" to question 7 please list, (Cont'd)

CMV, EBV, BK virus load (molecular tests)	
SQAP RESPONSE	The RCPA Microbiology QAP offers a QA for qualitative CMV PCR. The SQAP is considering quantitative tests for these in the future.
Cardiolipin Antibody, QTB	
HHV6, C1 esterase inhibitor	
SQAP RESPONSE	Cardiolipin Antibody and C1 esterase inhibitor QA are offered via RCPA Immunology QAP, contact immunology@rcpaqap.com.au +61 8 8204 5100. The other suggestion will be considered.
Anti-Rabies and Anti-Tetanus	
Tetanus, diphtheria, yersinia	
Quantiferon TB gold, Cat scratch	
Tetanus and Diphtheria antibody testing (? sufficient participants)	
Please consider the inclusion of Bartonella serology or PCR based test program.	
SQAP RESPONSE	The SQAP is in the process of developing a QA for Quantiferon TB gold. The demand for the other markers listed above is quite small therefore the sourcing of specimens will be quite difficult, if your lab can assist with this we are willing to run a survey.
Cell Viability Test by Flow Cytometer	
SQAP RESPONSE	The SQAP does not offer any flow based Cytometry programs, however if you require further information please contact the following RCPA QA programs; Haematology haematology@rcpaqap.com.au ; Immunology immunology@rcpaqap.com.au or Transfusion transfusion@rcpaqap.com.au
Direct Antigen testing for RSV, Influenza A& B, and Streptococcus pneumoniae	
SQAP RESPONSE	Direct antigen testing is performed on urine, CSF, NPA and swabs this suggestion has been passed to the RCPA Microbiology QAP for consideration.
Strongyloides serology	
SQAP RESPONSE	Following a similar request in the Customer Satisfaction survey in 2007-08, the SQAP asked participants for interest in QA for Strongyloides serology. There was very little response. Acquisition of specimens also proved problematic, however if you can help with this please contact us.

Q.9) Are the Result Sheet instructions clear and comprehensive?



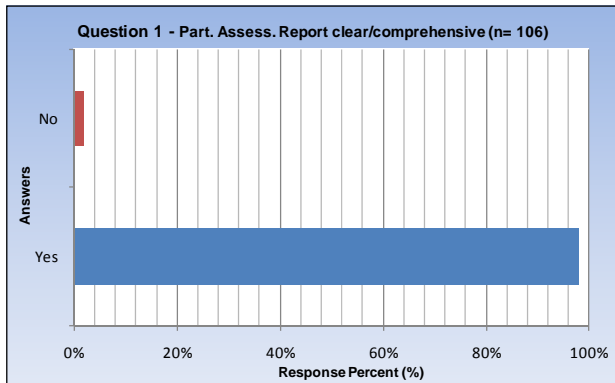
[In 2007-08; 96% participants rated Yes (answer Y/N)]

Q.10) If "NO" to question 9 - Why?

Comments – 'If "NO" ' - for Question 9 (result sheets clear & comprehensive)	
There always appears to be confusion amongst users as to the meaning of "cut-off", "positive" and "significant titre".	
SQAP RESPONSE	These terms are explained on each 'Result Sheet' and depend on the testing performed. For most assays the Cut-off value is the absolute value that designates the cut-off point below which is negative or equivocal and above or equal to is positive. For CFT testing the Cut-off value i.e. the absolute value that designates the cut-off point below which is Not Significant, and equal to or above is Significant. The analytical cut-off is often irrelevant for CF testing, therefore, the clinically significant cut-off value is requested; hence the terms 'significant' and 'not significant'
The swine flu result sheet is very confusing and repetitive. It would be better to have individual assay result sheets rather than target result sheets.	
SQAP RESPONSE	The direct data entry screens and result sheets for the pandemic H1N1 2009 (Swine) Influenza QAP have been based on the Avian Influenza module. It would be impossible to have individual assay result sheets as there are many different methods of testing. The SQAP tries to cater for all participant testing algorithms. If you are experiencing difficulty entering results please contact us.
If you are not an immunologist, then some of the info required is a bit confusing.	
SQAP RESPONSE	The SQAP is unsure what this participant is referring to on the result sheets; however the Participation Booklet supplied in the yearly folder is a handy reference for any queries. If anyone has difficulty with information required please contact us immediately.

Survey Reports

Q.1) *Is the Participant Assessment Report Presented in a manner that is clear and comprehensive?*

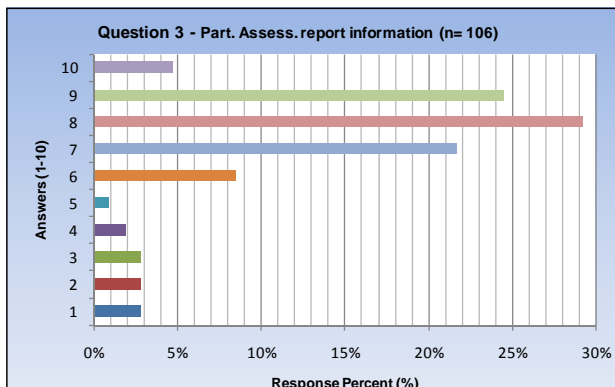


[In 2007-08; 88% participants rated Yes (answer Y/N)]

Q.2) *If "NO" - Why?*

Comments – ‘If “NO” ’ - for Question 1	
We don't get participant assessment reports for molecular.	
SQAP RESPONSE	Participant Assessment Reports are available for HPV DNA. The SQAP is in the process of developing Participant Assessment Reports for the remaining Molecular modules, however due to the nature of quantitative results and the multiple assays and expiry dates it is proving a little more involved to achieve an ideal report.

Q.3) *How would you rate the information provided in the Serology QAP Participant Assessment Report?*

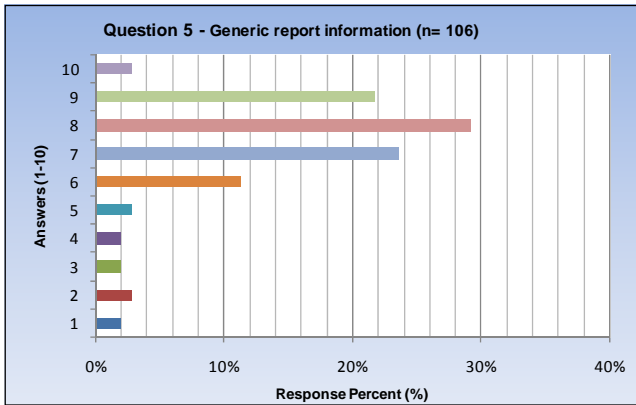


[In 2007-08; 61% participants rated 8-10 (range 1-10)]

Q.4) *If you have given a rating below "6" for the above question, please give details.*

Comments – ‘ratings ‘below 6’ - for Question 3	
We don't get participant assessment report for molecular.	
SQAP RESPONSE	Please refer to above answer.

Q.5) How would you rate the information provided in the Serology QAP generic (non personalised) Survey Report?

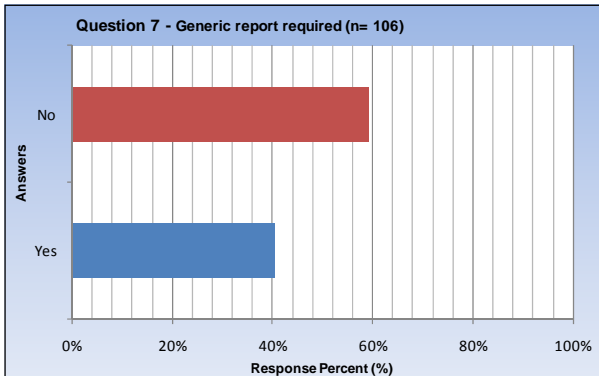


[In 2007-08; 50% participants rated 8-10 (range 1-10)]

Q.6) If you have given a rating below "6" for the above question, please give details.

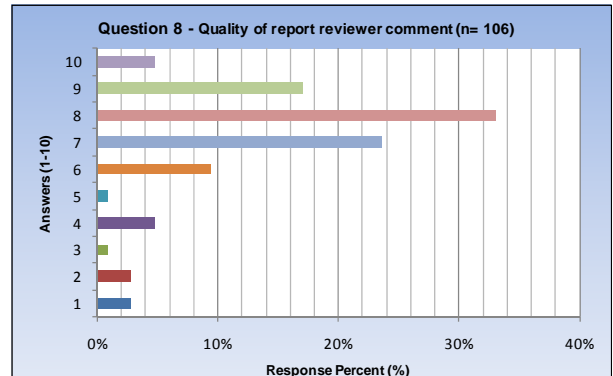
Comments – ‘ratings ‘below 6’ - for Question 5	
EXCESSIVE	
too bulky and tedious	
SQAP RESPONSE	The SQAP endeavors to analyse your data in a meaningful way which can lead to lengthy reports, however the idea is to include all of the information required to enable the participant to assess their own lab performance and compare to other assays and methods.

Q.7) Do you need to receive the generic (non personalised) Survey Report now that the Participant Assessment Report is available?



[In 2007-08; 50% participants rated Yes (answer Y/N)]

Q.8) How would you rate the quality of report reviewer discussions in the Serology QAP reports?

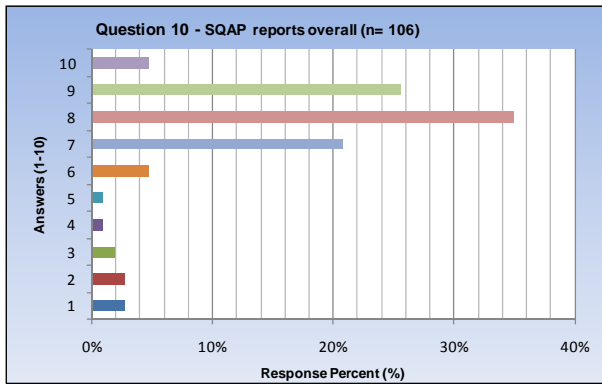


[In 2007-08; 54% participants rated 8-10 (range 1-10)]

Q.9) If you have given a rating below "6" to question 8, please give details.

Comments – ‘ratings ‘below 6’ - for Question 8	
There is no consistency among the reviewers. We know that they are different professionals, but from the RCPA standpoint, a consistency in the matter of how they are reviewing the comments results is appreciated and helpful for us users.	
SQAP RESPONSE	The SQAP does supply report reviewers with guidelines for writing discussion/comments for the SQAP results, however at times there is not a lot to add to the results other times there is much to add. If you are interested in elaborating on this comment please contact us. See Serology QAP forms on our website for guidelines provided to reviewers. http://www.rcpaqap.com.au/serology/forms.cfm

Q.10) How would you rate the quality of Serology QAP reports overall?



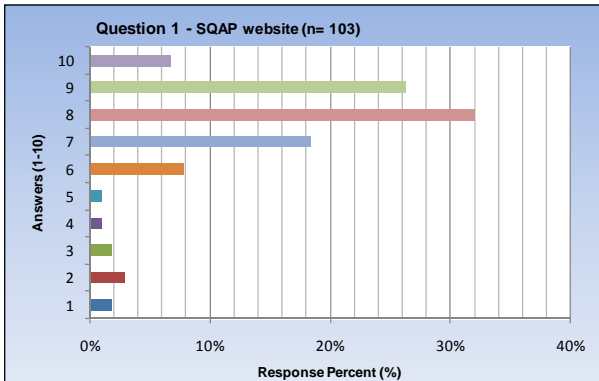
[In 2007-08; 68% participants rated 8-10 (range 1-10)]

Q.11) If you have given a rating below "6" for the above question, please give details

Comments – ‘ratings ‘below 6’ - for Question 10	
See earlier answer under methods of peer review	
SQAP RESPONSE	Please refer to above answer.

Serology QAP Website

Q.1) How would you rate the quality of Serology QAP website overall?

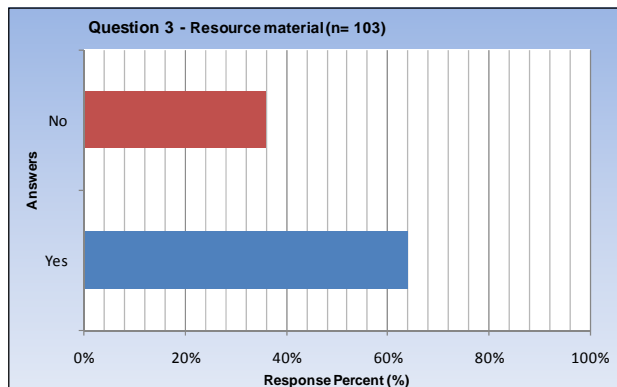


[In 2007-08; 80% participants rated 8-10 (range 1-10)]

Q.2) If you have given a rating below "6" for the above question, please give details.

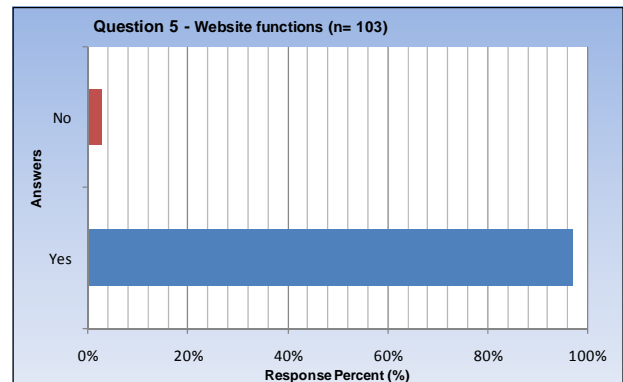
Comments – 'ratings 'below 6' - for Question 1	
We encounter problems in connecting to the website, it usually takes quite a long time.	
SQAP RESPONSE	Unfortunately this is probably due to your internal network and there is not much we can do. If the problem is excessive and difficult to work with then an option is 'mail' participation.

Q.3) Do you use any of the resource material (eg. References, Fact Sheets, Newsletters) that is available on the website?



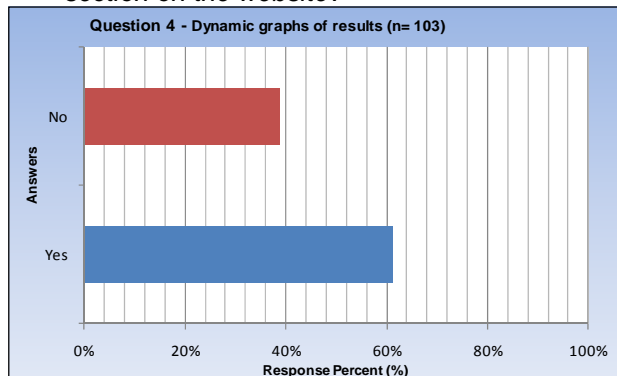
[In 2007-08; 65% participants rated Yes (answer Y/N)]

Q.5) Are you satisfied with all the website functions?



[In 2007-08; 90% participants rated Yes (answer Y/N)]

Q.4) Do you use the "Dynamic Graphs of Results" section on the website?



[In 2007-08; 27% participants rated Yes (answer Y/N)]

Q.6) If you have answered "NO" to any of the above Questions 3, 4 or 5, please give details (make reference to Q3, Q4 or Q5).

Comments – 'If "NO" ' - for Question 3,4,5	
Q3 - do not realise information was there - not well published	
We are only enrolled in the IM part of the Serology QAP program	
Q.4 no need to use them	
limited testing profile for our lab so not relevant	
Q4, We use the results sent out to us	
Q4 - I don't find this tool helpful in my current situation, it may be useful for some of the programs that we don't use	
Q4 - have not try using yet.	
We basically compare our results with the other laboratories.	
Q3. We only go to the website to print out the module that has opened, then later on, to enter and submit our results. We didn't know/haven't really explored the other features of the site.	
Q4. Didn't know it was there (only now, actually)	
Q5. I answered Yes, but when it comes to entering results, when choosing a comment, it will be nice if the comments are in a 'tick box' format, rather than pressing 'Ctrl' then choose. Just a thought.	
Do not aware the resource material info.	
Didn't know they were available	
Not sure what to say as I would need a reason to use the resources on the Website and I cannot think of a reason at the moment.	
Perhaps they are not needed.	
An easier and faster way to print all results when they are available for review	
Didn't know they exist.	
SQAP RESPONSE	Please read the RCPA Serology QAP 2010 Participation Booklet pg19-25 which outlines website features and dynamic graphs of results and other functions.
Looking at the Blood Film part of the IM Survey takes AGES. A DVD should be sent to all participants so they don't have to sue the on line version because it is very slow in our hospital environment	
SQAP RESPONSE	The SQAP does offer a DVD copy for participants experiencing problems with this component of the survey. This is well communicated with emails to all participants providing them with the option of a DVD. The virtual microscopy component does work well if participants have the correct computer 'set-up'. An email is sent to participants prior to the survey open date to select this option.

Participant Feedback

Q.1) What is the best aspect of the Serology QAP?

Comments
Electronic reports in downloadable formats
Online data entry
Range of analytes
assurance that we our work is as good as if not better than other labs
It's comprehensive.
THOROUGHNESS
The fact that it is all on line is great. Receiving email notifications to two email addresses is also ideal. It makes it all so easy.
Email notifications of upcoming events and when results are available, however sometimes can be bombarded with emails
very detail & comprehensive
Comprehensive range of markers available for analysis
ease of use
The Participant Assessments Reports
Being able to see which kits are in use.
monitor lab performance and assays used, highlight cut off issues and reproducibility
To hand in the QAP result.
Simplicity of reporting results. Promptness of scoring.
They are responding to new tests being used eg swine flu.
Comprehensive range of tests covered for our laboratory
Best Quality
It is easy to use and access
Good quality samples, cover all the tests we perform, easy to enter results on-line
To compare kit and analyst performance.
range of analytes
The report formats
Very easy to use website and rapid return of results.
Every aspect is best.
Sending out the email to remind participants of any opened module is very good.
comparison technique with other lab
It seems to come up with new programs often.
Records participation and performance for NATA. Allows comparison with other labs.
the website data entry and electronic reporting
Peer group comparison report.
Syphilis only has 4 surveys a year
Timely reminders via email
Similar to Participant Assessment Report - i.e. contains same information

Q.1) *What is the best aspect of the Serology QAP? (Cont'd)*

It is an indicator as to the laboratory's performance. It gives us a good feeling when things go well and to find a solution when some of the results submitted are not satisfactory. So far, our lab. has performed satisfactorily in all the QAP programmes in which we have participated.	
Easy to use, prompt and clear reports, helpful staff	
A good measure to see how well your laboratory testing is compared with other laboratories	
The various serological tests covered	
Samples arrive in good condition; reports are clear and well written.	
Everything available via Web site.	
Efficient and helpful when you contact them	
Prompt results and electronic data entry. Specimen free programme	
It is very user friendly	
Comprehensive test coverage and prompt reporting.	
Field of tests, reports are comprehensive.	
SQAP RESPONSE	Thank you for the responses. This section allows us to understand the aspects of the program that are important to participants.

Q.2) What is the worst aspect of the Serology QAP?

Comments	
printing reports off the website, having hard copies sent is easier to keep track of	
SQAP RESPONSE	You don't need to print the reports from the website; you can either save them or use the SQAP website for storage of reports. If you prefer hard copies of reports you can enroll as a 'mail participant', however it is quite easy to print the reports from the website, if you find it difficult please contact us.
Some panels are tested too many times per year, ie Hepatitis and HIV are tested 6 times per year.	
Frequency-seem to be doing surveys all the time	
Nothing significant - just a lot of surveys to monitor.	
Frequency of some analyses.	
Burden and cost of QAP. Still necessary though.	
SQAP RESPONSE	The SQAP surveys for HIV and Hepatitis consist of 2 specimens and 6 surveys, the idea is these two specimens can be integrated easily into your routine testing and give a 'snapshot' of performance throughout the year using different lot numbers and operators rather than running 10 specimens at the same time only a couple of times per year. The numbers of specimens were in response to participant feedback. Other analytes which feature in fewer surveys are usually due to difficulty obtaining specimens.
Results skewed by majority method or kit in use.	
SQAP RESPONSE	As the SQAP use 'consensus' results, this can be the case, however it is up to participants to assess the assay they are using. It is beyond the SQAP scope to comment on the performance of individual assays.
Anyone looking at the result scores will not be able to get an idea of the performance of the laboratory as such since only inter-laboratory comparisons are given. There should be a definite paragraph describing the performance of the particular lab, or may be like some QAP give scores like Certified, Provisionally certified, Not certified, etc. It would be very useful to participating laboratories to have a certificate of participation and performance given as a hard copy once a year.	
SQAP RESPONSE	It is beyond the scope of the SQAP to 'certify' laboratories, the role of the SQAP is to supply information required to enable the participant to assess their own lab performance. Participating laboratories do receive a Certificate of Enrolment on payment of fees and a Certificate of Participation following the conclusion of the year's surveys. A summary of your lab's performance can also be accessed via the Participant Assessment Report - Cumulative year to date scores.
It is annoying that some molecular tests are under the general QAP and some come under serology QAP.	
SQAP RESPONSE	As molecular testing has evolved so has the QA for these tests which means many of the QA programs have a molecular component. Generally these are divided according to the specimens required for testing.
sometimes navigation of the website can be a little confusing ie; which part of the site you need to visit to access what you want to do	
SQAP RESPONSE	Please use the 2010 Participation Booklet pg 19-25 to help with website navigation, if you need further information please contact us.
Does not let us enter late or amended results for any reason.	
SQAP RESPONSE	The testing period for Serology specimens is 18 days and Molecular is 25 days. Every participant is notified via email of open and closing dates and has these dates in the folder and participation booklet. The specimens should be incorporated into the routine testing so this time should be more than ample.

Q.2) What is the worst aspect of the Serology QAP? (Cont'd)

Final reviewer report very lengthy.	
storage and reading of many pages	
The QAP report format.	
Not a lot of consistency among the scientists doing the review for each assay.	
SQAP RESPONSE	The SQAP does supply report reviewers guidelines for writing discussion/comments for the SQAP results, however at times there is not a lot to add to the results other times there is much to add. If you are interested in elaborating on this comment please contact us.
Some specimens seemed to have degraded beyond detection levels.	
SQAP RESPONSE	It is essential that the specimens be stored and processed as per SQAP instructions to reduce the risk of degradation. Please contact us regarding any issue relating to specimen degradation
The molecular module (B & C) data entry pages do not retain the information about volumes etc which means re-entering the same information each time.	
SQAP RESPONSE	The assay information should be retained for each survey, however volumes do need to be re-entered in case a change has been made. However, this is something we will consider.
Unclear instruction in some result entry function such as RPR Test.	
SQAP RESPONSE	Please refer to the Syphilis Result Sheet. If you require further information please contact us.
Sample size is inadequate for our laboratory to perform testing as per current procedure	
SQAP RESPONSE	The SQAP endeavors to supply an adequate amount of specimen for testing using the current methods. Please notify us of the specific analyte so we can adjust for 2011.
The comments for test interpretation are not always appropriate in all situations. You quite often have to choose comments that are not totally appropriate for the results	
SQAP RESPONSE	All of the interpretative comments have been discussed at length with report reviewers and experts in the field. Unfortunately the SQAP cannot cater for every laboratory comment so we ask you choose the most appropriate comment so we can collate the data in a meaningful way for comparison. If you have a specific situation please use the feedback section on the website.
Freight charge is very high.	
SQAP RESPONSE	Unfortunately there is little we can do to reduce the cost of freight especially with the Molecular modules which need to travel on dry ice and therefore are considered a dangerous good.
Virtual Microscopy	
Looking at the Blood Film for the IM survey is VERY slow and VERY unfriendly - photographs were faster	
SQAP RESPONSE	The virtual microscopy component does work well if participants have the correct computer 'set-up'. The SQAP does offer a DVD copy for participants experiencing problems with this component of the survey. An email is sent to participants prior to the survey open date to select this option.
Worksheets not so user-friendly and not simple enough.	
SQAP RESPONSE	All of the result sheets are set out in the same way with simple instructions for data entry. If you are having difficulty please contact us.
I cannot think of any, may be the payment.	
The fact that we use it for syphilis and Syphilis is not easy	

Q.3) Is there any extra feedback that you would like to provide to the Serology QAP? Please give details.

Comments	
need to have more modules concerning problem assays and diagnostic logistical problems, only one specimen free module this year is disappointing	
SQAP RESPONSE	There are 3 Specimen Free surveys this year containing 3 different scenarios each, concerning problem assays and diagnostic logistical problems. The SQAP introduced the Specimen Free module for this purpose.
Kindly provide hard copy of signed participation/performance certificates to participating laboratories for the year 2009.	
SQAP RESPONSE	The Enrolment Certificate for 2009 should have been received last year following payment of fees. The Participation Certificate for 2009 was posted in the red or blue folder at the end of 2009. Please contact the SQAP if you have not received these certificates.
If you ever want to provide some very basic interpretation for staff who are not too familiar with hep/HIV testing, it would be appreciated.	
SQAP RESPONSE	This is a good suggestion we will consider this in the future.
Please informed the Person in charge the date and time to deliver Specimen for RCPA Programs	
SQAP RESPONSE	The SQAP emails relevant participants via email contacts when specimens are to be dispatched from the office. In the email the expected time of arrival is indicated. At the busiest time of the year there are over 1000 packages leaving the SQAP office, it is essential that we rely on participants to monitor the postal system to ensure specimens are delivered; both eParcel and FedEx have a tracking system for packages.
Some specimens are diluted close to our test detection limits. Grading "negative" results from such cases as "incorrect", without considering our detection limits, seems rather harsh.	
SQAP RESPONSE	The SQAP uses 'consensus' results to assign a 'correct' result. If a laboratory's results are falling outside the 'consensus' it may be an indicator that optimum performance is not being achieved. The SQAP does consider detection limits (and cut-off values) and if used according to manufacturers recommendations. Please contact the SQAP if you would like to discuss a particular issue.
We could save costs by not having a new ring binder folder each year, could use same one for serology and molecular. Also would be better to have been able to use same lab number for serology & molecular. Shipping/couriering of paper work including not needed folder (overseas) must be expensive. Could all that be sent electronic to reduce costs of the programs?	
SQAP RESPONSE	The majority of participants handle many of the SQAP modules, so like a new folder to keep everything for each year. The folder includes important information that the SQAP would like participants to read, which we feel is more likely to happen if it is received in hard copy. The SQAP have had to issue separate participant numbers for the Serology and Molecular components as most labs have different contact people and delivery addresses for specimens. It is essential the specimens for Molecular are attended to immediately as they are on dry ice and need to checked and stored. The SQAP does offer reduced prices for the internet option for surveys.
The Infectious Mononucleosis photos on -line and on the DVD are very difficult to use. Probably more a problem with the IT at our end.	
SQAP RESPONSE	The virtual microscopy component does work well if participants have the correct computer 'set-up'. The SQAP does provide a DVD for participants experiencing problems with this component of the survey. An email is sent to participants prior to the survey open date to select this option.



Q.3) *Is there any extra feedback that you would like to provide to the Serology QAP? Please give details.(Cont'd)*

<p>It would be better to design the worksheets in a more user-friendly way, following comments hoped for improvement</p> <p>1. Too many worksheets to enter in RCPAQAP, could there be a warning sign if mandatory data not entered?</p> <p>2. For the transfusion serology survey A, could the method code defaulted to the latest entry and no need to re-enter every time?</p>	
<p>SQAP RESPONSE</p>	<p>1. There are a few alerts for mandatory data on the direct data entry screens, such as expiry date, however the SQAP does not want to make too many mandatory sections as this will slow up data entry and become frustrating. It is up to participants to ensure all of the relevant information is recorded.</p> <p>It appears that you are confusing the SQAP with other RCPA Programs as we do not have extensive worksheets and your second comment does not relate to the SQAP. We do have the method and kit details from the previous survey as a default.</p> <p>2. We will pass on the comment regarding Transfusion QA surveys.</p>
<p>Enrolment for 2010 was difficult and confusing - required a call to QAP office to clarify.</p>	
<p>SQAP RESPONSE</p>	<p>The enrolment process last year did experience some 'teething' problems and the SQAP appreciates your feedback regarding this system. These comments will be passed onto the Enrolment Office and it is envisaged that enrolment for the 2011 programs will be much smoother and problem free.</p>
<p>Overall, great job in running the QAPs for us. Thank you.</p>	
<p>Congratulations! Keep it up</p>	
<p>well done</p>	
<p>Keep up the good work.</p>	
<p>There is nothing more that I can say, I believe what you are doing is good for assessing quality of our work.</p>	
<p>SQAP RESPONSE</p>	<p>Thank you for your feedback.</p>
<p>Please note, my answers relate to infectious mononucleosis screening only.</p>	

Collaboration with Serology QAP

Q.1) Do you have a case study or a scenario that you would like to be presented for discussion in the Serology QAP Specimen Free Module? If Yes, please provide details underneath or by email serology@rcpaqap.com.au.

SQAP RESPONSE	Disappointingly for this question we received the following responses; 8 'No' responses, 1 'Not applicable', 1 'Sorry, just a simple screening lab!' and 1 'already participating'. The SQAP is always looking for interesting case studies, if you would like to contribute please contact us.
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Q.2) If you have an area of interest in Serology and would like to collaborate (for example, review results) with the Serology QAP, please provide details underneath or by email serology@rcpaqap.com.au.

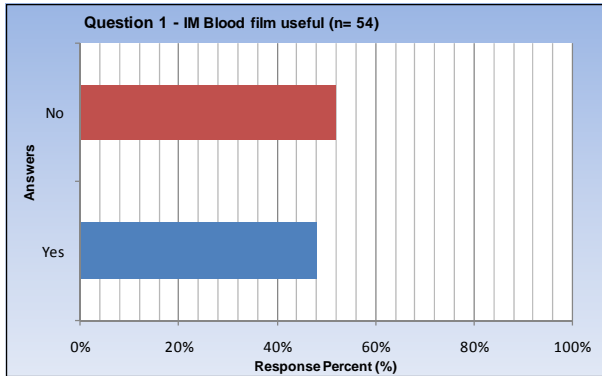
SQAP RESPONSE	Unfortunately, for this question we received the following responses; 6 'No' responses, 1 'Not applicable', 1 'Sorry, just a simple screening lab!' and 1 'already participating'. The SQAP is always looking for collaborators interested in various areas, if you would like to contribute please contact us.
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Q.3) If you have any suggestions regarding how we could improve the services we provide to you, please enter them in the box below.

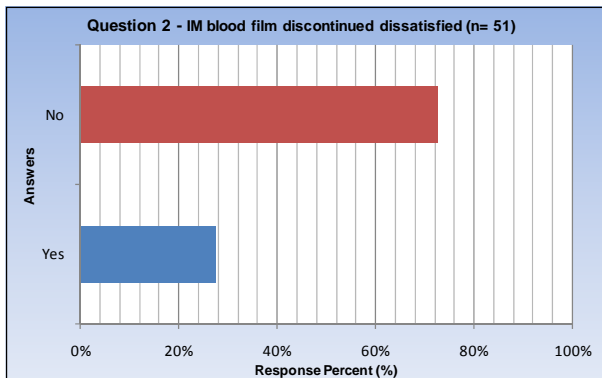
Comments	
hard copies of results sent via mail	
SQAP RESPONSE	The SQAP does have an option for reports to be sent via mail - 'mail option', please choose this when enrolling.
Non standard comments need to be better catered for.	
SQAP RESPONSE	All of the interpretative comments have been discussed at length with report reviewers and experts in the field. Unfortunately the SQAP cannot cater for every laboratory comment so we ask you choose the most appropriate comment so we can collate the data in a meaningful way for comparison. If you have a specific situation please use the feedback section on the website.
More educational exercise or information.?	
SQAP RESPONSE	The Specimen Free module is available containing educational exercises; each report has a review from an expert in the field offering educational information. If you have a specific ideas in mind please contact us so we can further accommodate your request.
No.	
NO	
No	
No, I do not. I think you are doing a good job, no suggestions for improvement.	
So far you service is good. No comments	

IM Module Participants ONLY

Q.1) *Is the blood film useful to you?*



Q.2) *If the blood film was discontinued in 2011, would you be dissatisfied?*



SQAP RESPONSE	<p>These two questions were directed to IM participants only (total of 386). Disappointingly only 51 participants responded, with half finding the blood film useful and the other half not. Although approximately 70% said they would not be dissatisfied if it was discontinued. The aim of the blood film is to 'value add' to the IM module, to add an educational component. It was added due to participant feedback. It is difficult for the SQAP to fully interpret these responses with only 13% of participants responding.</p>
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Thank you for taking the time to complete this questionnaire

Appendix A - Participant Assessment Report

Assessment reports have been developed so that participants can assess and monitor their performance over time. This feature was introduced in 2007 and trialled throughout 2007-2008. Participant feedback is welcomed as changes and improvements are made in response to participant suggestions.

Taken directly from the RCPA SEROLOGY QAP 2010 Participation Booklet pg 23-25.

An example is shown below:



Participant Assessment Report
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RCPA Quality Assurance Programs Pty Ltd keeps all participant details confidential. Such details will not be disclosed to a third party, unless required by legislation, without the prior written consent of the participant.

RCPA Serology QAP
Locked Bag 2239
North Ryde NSW 1670
Phone +61 2 9779 5915
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ABN 32 003 611 123


Hepatitis Module Report for Survey H5:2009 Due Date: 4 Sep 2009 **Participant Number: *******

Report comprises: Hepatitis ABC Participants: 214 Report Issued: 10 Sep 2009

Test	Spec	Consensus	Result	Graphs	Your Result	Your Score	Kit in date	Total Score	Possible
HBsAg-Screening Assay	22	pos	99%		pos	2	1	3	3
HBsAg-Supplementary Test	22	pos	100%		NA	-	-	-	-
HBsAg-Confirmatory Test	22	pos	100%		pos	2	1	3	3
Anti-HBs	22	non-imm.	98%		non-imm.	2	1	3	3
Anti-HBc	22	pos	99%		pos	2	1	3	3
Anti-HBc IgM	22	neg	100%		neg	2	1	3	3
HBeAg	22	pos	99%		pos	2	1	3	3
Anti-HBe	22	neg	98%		neg	2	1	3	3
Anti-HAV Total	21	neg	98%		neg	2	1	3	3
Anti-HAV IgG	21	neg	100%		NA	-	-	-	-
Anti-HAV IgM	21	neg	100%		neg	2	1	3	3
HCV Ag-Ab Assay	24	No Consensus	-		NA	-	-	-	-
Anti-HCV-Screening Assay	24	neg	99%		neg	2	1	3	3
Anti-HCV-Supplementary Test	24	neg	100%		not tested	-	-	-	-
Anti-HCV-Confirmatory Test	24	neg	100%		NA	-	-	-	-
Total Score: 100%								30	30

Test	Spec	Consensus	Result	Graphs	Your Result	Your Score	Kit in date	Total Score	Possible
HBsAg-Screening Assay	23	pos	99%		pos	2	1	3	3
HBsAg-Supplementary Test	23	pos	100%		NA	-	-	-	-
HBsAg-Confirmatory Test	23	pos	100%		pos	2	1	3	3
Anti-HBs	23	non-imm.	99%		non-imm.	2	1	3	3
Anti-HBc	23	pos	99%		pos	2	1	3	3
Anti-HBc IgM	23	neg	100%		neg	2	1	3	3
HBeAg	23	No Consensus	-		neg	-	1	1	1
Anti-HBe	23	neg	97%		neg	2	1	3	3
Anti-HAV Total	24	pos	98%		pos	2	1	3	3
Anti-HAV IgG	24	pos	100%		NA	-	-	-	-
Anti-HAV IgM	24	neg	100%		neg	2	1	3	3
HCV Ag-Ab Assay	25	No Consensus	-		NA	-	-	-	-
Anti-HCV-Screening Assay	25	pos	98%		pos	2	1	3	3
Anti-HCV-Supplementary Test	25	pos	100%		pos	2	1	3	3
Anti-HCV-Confirmatory Test	25	pos	100%		NA	-	-	-	-
Total Score: 100%								31	31

Comment: HBsAg-Confirmatory Test - The cut-off is inconsistent with SQAP definition & kit insert for a value above which is positive.



NATA Accredited Proficiency Testing Scheme Provider No: 14863
 This facility is accredited by the National Association of Testing Authorities, Australia and complies with the requirements of ILAC G13. Site Number: 15003
 Site Number: 15003

Your score: **2/2 (100%)** for correct result
0/2 for incorrect result

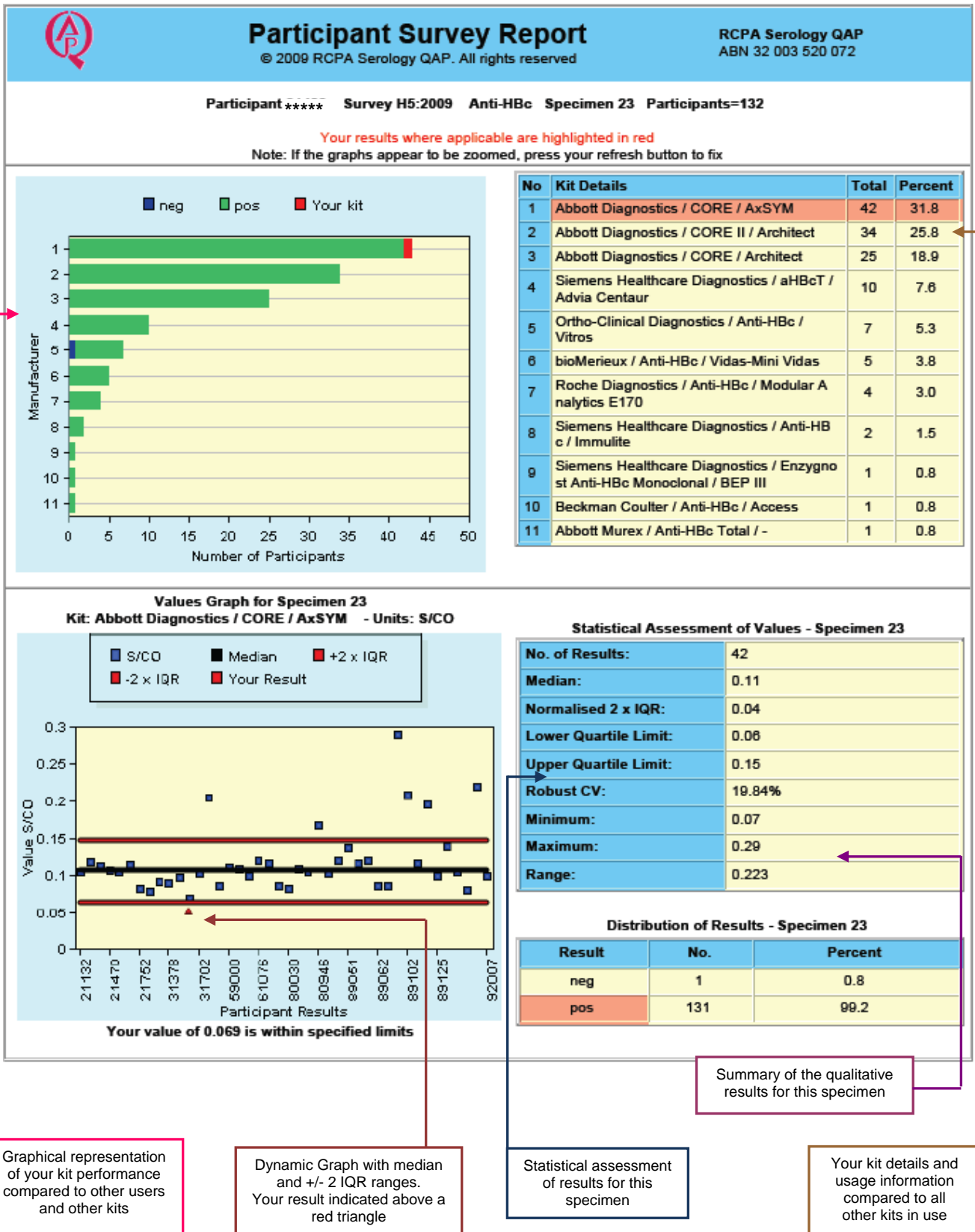
Your total score as a percentage, total score & maximum score possible

Kit used has 'in-date' expiry
1/1 for 'in-date' expiry
0/1 for kit past expiry

Access to graphical analysis of results (Participant Survey report)
- press the red ball for the next page



The Participant Survey report shows relevant graphical information relating to each particular test.

Interpretative comment graphs can also be accessed in this way, however, are not shown in this example.



The Cumulative Assessment Report shows scores achieved by your laboratory for all surveys participated in throughout the current year and your laboratory's performance as compared to all participants (last column).

This cumulative score allows the participants to evaluate their performance in all modules. For example, the average score for all participants for Survey AN2:2009 is 99% whereas this participant has a score of 85%; hence there is a need to investigate the cause of this low score. It is clear that this is not an ongoing issue as the scores for AN1, AN3 and AN4 are 100%; above the average score of all other participants.

	Participant Assessment Report © 2009 RCPA Serology QAP. All rights reserved Cumulative Year to Date Scores for Participant *****			RCPA Serology QAP Locked Bag 2239 North Ryde NSW 1670 Phone +61 2 9779 5915 Fax +61 2 9779 5916 ABN 32 003 520 072
	Survey	Your Score	Possible Score	Your Percent
AN1:2009	23	23	100%	97%
AN2:2009	23	27	85%	99%
AN3:2009	24	24	100%	99%
AN4:2009	20	20	100%	97%
B1:2009	6	6	100%	97%
B3:2009	6	6	100%	98%
H1:2009	61	61	100%	99%
H2:2009	60	60	100%	99%
H3:2009	61	61	100%	99%
H4:2009	58	60	97%	99%
H5:2009	61	61	100%	99%
L1:2009	39	39	100%	99%
L2:2009	38	40	95%	98%
L3:2009	40	40	100%	99%
L4:2009	43	43	100%	99%
P1:2009	6	6	100%	98%
P2:2009	6	6	100%	98%
P4:2009	6	6	100%	99%
S1:2009	8	8	100%	98%
S3:2009	13	13	100%	98%
Overall Year to Date:	602	610	99%	
 NATA Accredited Proficiency Testing Scheme Provider No: 14863 This facility is accredited by the National Association of Testing Authorities, Australia and complies with the requirements of ILAC G13. Site Number: 15003 Site Number: 15003				