

Feedback on the Haematology Laboratory User Survey 2026

Firstly, we would like to thank everyone who completed the survey, your time and feedback is very much appreciated.

All answers and comments were reviewed and where necessary appropriate action taken (where users provided details, personal correspondence has been completed).

Did you know!

You can access the BTL Lab User Manual via BHSCT Loop page enter 'Lab User Manual' as a search or access it externally via <https://belfasttrust.hscni.net/service/laboratory-services/laboratories-user-manual/>

Survey opened on 04th Feb 2026 with 4 weeks to complete (closing date, 06th March 2026).

The survey was promoted and shared via e-mail to all BHSCT users, GPs and advertised on social media and the BHSCT Loop page.

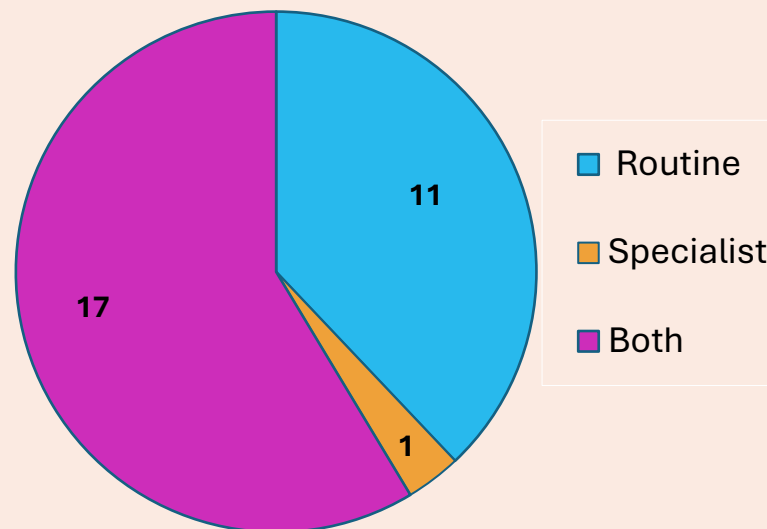
29 responses received!

Unfortunately, the response rate was much lower than our previous combined survey with Blood Bank. We appreciate service users are extremely busy with possible contributory factors affecting the response rate such as survey fatigue as we had issued two surveys at the one time by splitting the Haematology and Blood Bank services. The rationale for this was to improve analysis of results and direct individual comments according to discipline area, however going forward we will aim to issue surveys at different times throughout the year.

Average time taken to complete survey = **3mins 01secs.**

Pie Chart showing the Total number of Responses received per Speciality

Total = 29 responses

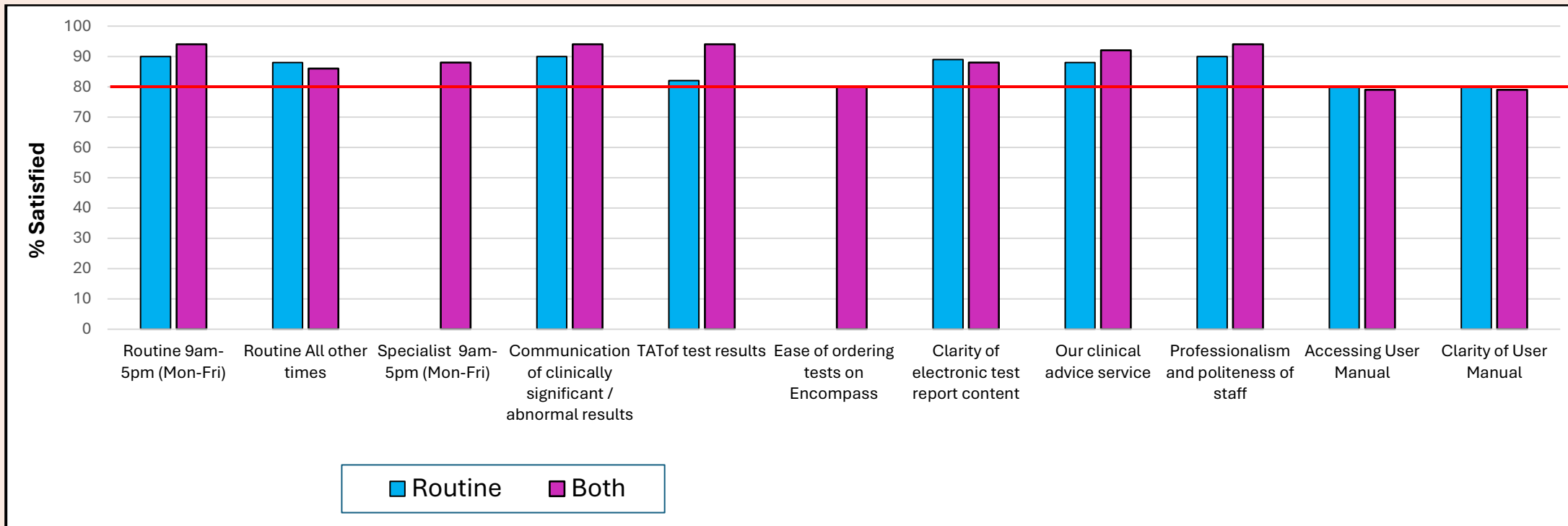


Users were asked to complete the survey according to which speciality they had used over the past 12 months; Routine Haematology only, Specialist Haematology only or Both Specialities.

Each question was rated as: Excellent, Good, Average, Poor or N/A.

A target value of 80% was deemed acceptable

The graph shows the percentage of users who rated the questions as Good or Excellent.



Majority of Questions exceeded Target of 80%

All comments made under Routine Haematology are attached as follows.

All comments were reviewed and responded directly to users where contact details were provided.

staff always very decent and helpful

STAFF ARE HELPFUL

Staff are very helpful and friendly when ringing

Sometimes if a sample is insufficient, it would be useful to be informed that it has not been processed. Colleagues sometimes send bloods for patients going to theatre or IR, we are waiting for results and then when we look at results its not processed, which then leads to delayed procedures.

Action: Contact made with user to enquire on specific locations. Comment being considered for critical areas such as Theatre, A/E and Clinics. (US-29)

Samples are often not tested/left lying in reception. Samples are also 'lost' at times.

Response: We acknowledge the concern regarding delays, samples left in reception, or samples being reported as lost. This is recognised as a risk; however, it is **not always attributable to laboratory processes alone**. Delays may arise prior to laboratory receipt due to factors such as, transport issues, or samples failing minimum acceptance criteria. Within the laboratory, staff prioritise prompt receipt, booking-in, and handling of all samples, with regular checks of reception areas in place. Any incidents involving delayed, missing, or untested samples are **promptly investigated** to identify root cause, including contributory factors outside the laboratory. Learning is shared with relevant teams, and sample tracking and procedures continue to be monitored and audited to maintain patient safety. (US-28)

It will be grateful if the lab could give the staff nurses a call in case of not collecting the sample in the Encompass/EPIC. Once I forgot to collect the sample in EPIC as the ward was busy, but the lab did not inform me about this. It would really be helpful if the lab has some flagging or notification system in case the staff forgets to collect sample in EPIC. A notification system if the blood not collected in EPIC.

Response: Due to the high volume of samples, it is not feasible for the laboratory to routinely notify wards where sample collection has not been completed. However, robust processes are in place for time critical or difficult to repeat samples, such as CSF. These samples will always be processed and tested even if the EPIC collection process has not been completed, to ensure there is no delay to patient care. (US-28)

very helpful.

Comments made by users using both, Routine and Specialist Specialities

Swift answering of the phone and always very helpful

I do not find it difficult to reach the person I need to in the lab (either routine or specialist)

Always very efficient

Both labs are always helpful when contacted

Staff in Specialist Red Cell Haematology Laboratory always answer our queries as soon as possible. (COMP-104)

Variability in turnaround times. Generally FBP results returning in a reasonable time during clinic. Have had no EPO results in many months. Molecular test turnaround times remain slow. Molecular reports need to incorporate previous results into the form (e.g. BCR:ABL) as adding a significant time burden to checking previous results.

Would prefer results relating to family origin testing to be reported all in one section as opposed to two. Could easily miss need to test biological father of baby.

One major issue with FBC results. High basophil counts are not highlighted in red like all others. This leads to high basophils regularly being missed. It's been highlighted multiple times but remains an issue.

Action: Our EPO kit had been discontinued and validation was required which may have affected our TATs. For molecular results/TATs please contact RMDS lab. (US-31)

Response: We are investigating this suggestion further, all users will be informed of any future changes to results. (ES-233).

Action: Changes made to WinPath requires regional agreement. This has now been updated on WinPath. (US-30)

I deal with Colleen Williamson and Hannah Patterson and their help and advice is invaluable. Their service is second to none. (COMP-104)

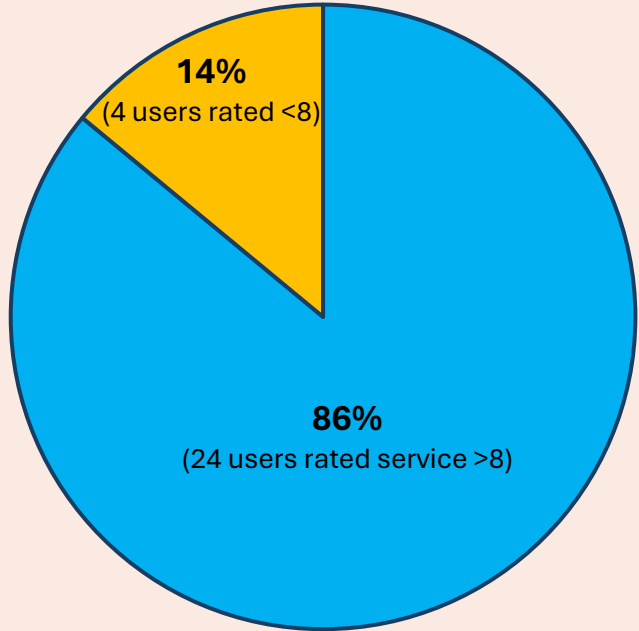
Reasons for sample rejections are still not being recorded clearly.
Action: We recognise this is not user friendly on EPIC and are currently working with BSO to find a resolution and improve the process for how rejected samples are reported in EPIC in the future. (US-32)

How Would You Rate the Haematology Service?

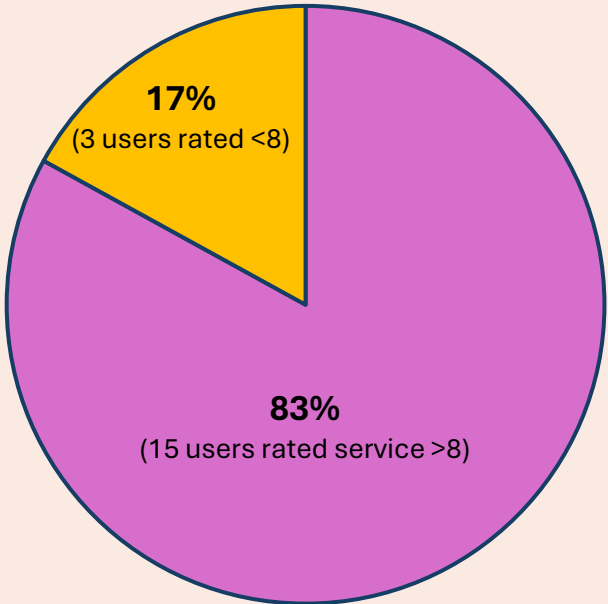
(Response rating score: 1 = Low and 10 = High)

A BIG THANK YOU!!

Routine Haematology = 86%
(lowest score = 4)



Specialist Haematology = 83%
(lowest score = 2)



Both of the service ratings above are excellent and it shows improvement from our last user survey in 2023 (overall service rating was 81%)