**The Newcastle upon Tyne Hospitals NHS Foundation Trust**

**Laboratory Department**

**Terms of Business for Customers of the Laboratory at Newcastle upon Tyne NHS Foundation Trust**

**Between:**

**The laboratory at Newcastle upon Tyne NHS Foundation Trust** (provider)

**Any organisation who refers samples for testing/processing and is subsequently invoiced directly by the provider for the service(s) received** (customer)

**Background:**

This document sets out what the Blood Sciences, Microbiology & Virology and Cellular Pathology laboratories at Newcastle upon Tyne Hospitals NHS Foundation Trust (the provider) expect of any organisation who refers samples for testing/processing (the customer) and what those customers can expect in return.

1. **Introduction and scope**

Laboratory practices are subjected to comprehensive regulation and legislation and most practices are accredited against ISO 15189 Requirements for Quality and Competence for Medical laboratories. This standard requires that agreements between the provider and customers are specified. As such there are expectations that fall on both parties, and it is a requirement that these are understood and strictly adhered to. Expectations and obligations of both parties are outlined in this document.

**2.0 Service agreement and Service Level Agreements (SLA)**

Submission of a specimen request form and specimen(s) to the provider constitutes as an agreement between the customer and the provider to perform investigations. Both parties are required to fulfil their obligations. Expectations and obligations of both parties are outlined in this document.

For financially material and/or complex service there will be an additional formal service level agreement (SLA) document agreed by both parties. Where an SLA has a service specification which contradicts this document, the SLA service specification takes precedence.

Scientifically technical and quality information will be made available to customers through the provider’s website or for services excluded from the website and specialist services through a memorandum of understanding (MOU) prepared by the providers quality team.

**3.0 Requirements of customers - General**

Customers are responsible for ensuring that all the following points are met, please also refer to specific sections later in this document:

**3.1 Contact**

The customer must contact the provider prior to sending a specimen relating to a new and unestablished requirement, contact must be made with sufficient lead time to allow the provider’s governance in relation to new activity. This includes but is not limited to, checking capability and capacity, and actioning any requirement for an SLA or SLA variation. This also applies where an existing customer has a service change or a new testing/process requirement. Contact is made via the providers business unit. Please see the key contacts section of this agreement.

* 1. **Specimen Requirements**

The customer must provide a specimen that is valid and of acceptable quality for testing. The patient must be correctly identified at the time of the specimen taking and the specimen must be fully and correctly labelled with the minimum essential information before sending to the provider. Specimens must be collected under the correct conditions. Refer to the providers webpage or MOU provided by the providers quality team where uncertainty exists. Specimen must be collected into the correct containers and be filled to the correct levels. The provider must be contacted if this cannot be done, and they will advise as to whether alternatives would be acceptable. The specimen container must be sealed to prevent spillage. Failure to do so may result in loss of specimen or the container being returned for appropriate repackaging.

* 1. **Transport Requirements**

The customer must ensure specimen are correctly packaged, preserved and transported in a timely manner to the provider for testing. The provider must be contacted if this cannot be done, and they will advise as to whether alternatives would be acceptable. The customer is responsible for all transport and packaging requirements.

* 1. **Specimen Forms**

The customer must provide a specimen form with complete information with each specimen or set of specimen from a patient encounter. This will include both patient and clinical details and any other information that will ensure that the correct tests and follow up tests are performed as required.

Each specimen, or each set of specimen from a patient encounter should have a specimen request form. Shipping manifest specimen request forms with information for multiple patients are not permitted unless with prior agreement.

Where electronic requesting is used, the customer must ensure that the exact process of ordering and escalation takes place before any specimen are sent for testing.

The provider cannot share specimen across disciplines and any patient who requires cross discipline testing, will need individual specimen for each discipline.

**4.0 Customer expectations of the provider**

Provided that all the expectations within this document are met, the customers can in return expect the following levels of service from the provider:

* Requests and tests will be received, registered, processed and authorised by appropriately qualified, registered and experienced staff.
* Agreement to complete testing indicates the provider has the capability and resource to provide the requested service.
* Where appropriate scientific/technical interpretation and/or clinical advice and interpretation will be given verbally and/or in writing by appropriately qualified and competent staff.
* All staff involved in service delivery will be appropriately trained, competent and authorised for the service provided.
* All medical consultant staff will be registered with the GMC and participate in the relevant EQA schemes where available.
* The provider will ensure high quality of examination testing that will be subjected to robust quality management processes.
* The provider will aim to make results available to customers within the turnaround times stated on the Newcastle Laboratories webpage. Customers will be notified as soon as possible of any circumstances that adversely affect this. Please note, quoted turnaround times are from specimen receipt in the laboratory to result authorisation in the laboratory Information Management system (LIMS) and do not allow for specimen transport to the laboratory or the administrative process of printing and posting reports. The administrative processes will be completed in a timely manner.
* The provider will inform customers as quickly as possible of circumstances that could impact on the reliability of examination results.
* The provider will inform services users through direct communication (email or posted letter) and/or through the providers webpage of any changes to specimen requirements or testing processes that impact on examination results and/or reference ranges. This may result in a new MOU being issued.
* Some specific tests will be subcontracted to referral laboratories. Details of activities subcontracted to referral laboratories are available on the provider’s website.
* The provider will be registered with an appropriate EQA scheme, where available, for the services provided. The provider will inform the customer of any adverse EQA that results in persistently poor performance and/or where the provider has been referred to the advisory panel or NQAAP.
* Where a EQA scheme is not available the provider ensures the quality of testing performed is monitored by a robust and alternative method.
* The provider will maintain major incident and business continuity plans in order to ensure service continuity.

**5.0 Definitions**

*The provider*

The laboratory at Newcastle upon Tyne Hospitals NHS Foundation Trust.

The laboratory comprises of several facilities or areas that are equipped for performing diagnostic testing, experiments, research, and teaching. The laboratories are split into the following specific disciplines:

* Blood Sciences (Freeman Hospital and Royal Victoria Infirmary)
* Cellular Pathology- including Cytology (Royal Victora Infirmary)
* Microbiology and Virology (Freeman Hospital)

These terms of business do not extend to services from the Genetics laboratory (Centre for Life) the Novopath laboratory, the North East Innovation laboratory, or Mortuary service.

*Customer*

Any organisation who refers samples for testing/processing and is subsequently invoiced directly by the provider for the service(s) received.

The customers relevant to this document are those who do not have contractual agreement with Newcastle upon Tyne Hospitals at an organisational level which includes laboratory testing.

Customers must have the appropriate authority to request a laboratory to perform diagnostic testing of biological specimens. Customers will need to consider the appropriateness of all requests made and should contact the provider to discuss where uncertainty occurs. Although not exhaustive this includes the following groups:

* Qualified Doctors
* Qualified Nurses (delegated responsibility from a doctor or some specialist nurses in their own right)
* Qualified Midwives
* Qualified Dental Practitioners
* General Practitioners or representatives acting on their behalf.

*Service Level Agreement*

A contract between the service provider and the customer which documents what services are provided and defines the legally binding service terms and conditions.

*Memorandum of Understanding (MOU)*

A non-legally binding document which in addition to the provider’s website defines service technical and quality details. This document is managed and controlled by the providers quality team and will only be required for specialist services or for services which are not detailed on the provider’s website.

*Specimen*

A portion of biological fluid or tissue that is removed from a patient, placed into appropriate container (s) for the purpose of laboratory examination.

*Request*

A formal approach made in writing or electronically that asks a laboratory to perform an examination process on accompanying biological fluid(s) or tissue(s).

*Specimen Request Form*

Paper version of a request made in writing that askes for a laboratory to perform an examination process on accompanying biological fluid(s) or tissue(s).

*Reports*

The representation of collated examination results, with, where necessary, appropriate technical, scientific, clinical, and medical interpretations, in a single electronic or hard copy document. It is intended to assist customers in the diagnosis and/or clinical management of disorders and ailments.

*Valid*

A specimen and/or request that is acceptable for examination by a laboratory. Although not exhaustive, this will require a specimen of appropriate quality, with positive and correct labelling. The request process should conform to the exact requirements whether hardcopy or electronic and should follow the exact progression steps.

*Unique Patient Identifier*

This is the patient’s unique 10-digit NHS number or their Medical Record Number (MRN). With pre agreement this can also be a unique anonymised reference.

*Laboratory Information Management System (LIMS)*

Laboratory software which allows specimen and data management.

**6.0 Customers**

We can only accept specimen from parties with the appropriate authority to request laboratory diagnostic testing of biological fluids or tissues, this is limited to medical professionals, such as qualified doctors, qualified nurses, qualified midwives, qualified dental practitioners, and general practitioners, as defined above.

We can only accept specimens from, CQC registered private general practitioners, healthcare providers or organisations who employee medical professionals to support their business needs, this includes Universities who require laboratory testing for research purposes. We cannot accept specimens directly from individuals outside of these groups even if the individual is a medical professional.

We can only report laboratory testing results to the requesting customer, the customer must have in their employment medical professionals, such as qualified doctors, qualified nurses, qualified midwives, qualified dental practitioners, and general practitioners to review and act upon the results.

**7.0 Patient Consent**

Patient consent is the responsibility of the customer.

Informing the provider of withdrawal of consent is the responsibility of the customer. On receipt of information regarding withdrawal of consent the provider will follow their local withdrawal of consent policy.

If withdrawal of consent is received either after testing is complete, or with insufficient time to stop testing results will not be deleted from the provider’s LIMS, and results will be made available to the customer. In this instance it is the customer’s responsibility to correctly handle any data following the request to withdraw consent.

**8.0 Patient Identification and Specimen Suitability**

The person taking any specimen is directly responsible for ensuring that the patient is positively and correctly identified and that patient details correspond to the information given on both the specimen and any accompanying request form.

The organisation requesting testing is responsible for ensuring the correct specimen container has been used for the requested tests, and that the containers are adequality filled and suitably transported, within required stability time limits.

Please consult the providers webpage, or MOU for specific test information.

If the requirements detailed by this policy are not completely met, the specimen may be rejected by the provider.

**9.0 Specimen Labelling (and patient identification)**

Accurate patient identification details on laboratory specimen are vital for patient safety. It is the responsibility of the person requesting a laboratory investigation (i.e., medical, nursing and phlebotomy staff etc.) to ensure that specimens are correctly labelled and request details (forms or electronic requests) are completed to the required standard. Specimen and request details must be compatible.

With pre-agreement for specific projects and services which require anonymisation waiver or adjustment to the below information for specimen labelling will be agreed.

If known or suspected to contain a hazard group 3 or 4 biological agent the specimen and specimen request form must be appropriately labelled.

All specimens

***Essential information for the specimen label:***

• Patient’s Full Name

Plus

• Date of birth

***Desirable information:***

• Hospital Number (MRN) or NHS number or another agreed unique identifier.

• Referring laboratories identifier (i.e. their specimen number)

• Date and Time of specimen is desirable; however, it is essential for certain dynamic tests, i.e., is one of a series

• Date and Time of specimen is essential for Tissue Specimens and where the specimen is perishable, or the analyte is unstable (e.g., serum potassium)

• The date and collection time is desirable for tissue specimens so that the provider is fully informed about how long the specimen has been in fixative as this will allow them to prioritise the processing of specimens.

**10.0 Requests (Specimen Request forms)**

Specimen requests can be made electronically (through a pre-agreed and ready established interfaced order communications solution) or with a paper request form (specimen request form). To ensure that the specimen is handled correctly, please ensure that the correct paper request form for the specimen is used e.g., cytology specimens must be sent on a cytology paper request form, Blood Sciences specimens must be sent on a Blood Sciences paper request form. Unless otherwise agreed the provider requires each set of patient specimen to be accompanied by a separate specimen request form. Manifest list specimen requests which include information for multiple patients will not be accepted unless with prior agreement.

With pre-agreement for specific projects and services which require anonymisation waiver or adjustment to the below information for specimen request forms will be agreed.

***Essential information for all paper requests:***

• Patient’s Full Name

• Date of birth

• Investigations required

• Referring location

• Name of the requesting clinician (contact number desirable)

• Sex of patient

• Date of specimen

• Clinical Information

• Essential requirements for Specific Specimen type/test e.g., fasting

• Time of specimen: All cellular pathology requests. Selected dynamic function tests.

• The exact official name of the investigation and /or the approved abbreviation should be written legibly.

***Desirable information for all paper requests:***

• MRN or NHS number or another agreed unique identifier.

• Referring laboratories reference (i.e. specimen number)

**11.0 Specimen rejection criteria**

Specimen may be rejected in the following circumstances:

* + ***Any of the following: patients full name, date of birth, investigations required, referring location and name of the requesting clinician are missing from the specimen or request.***
	+ ***The specimen and request form information do not match.***
	+ ***The specimen is unlabelled or otherwise unsuitable (e.g., wrong tube type).***

**12.0 Specimen Where the Minimum Essential Information Is Missing**

Where essential information is missing from a specimen or request form, the provider will attempt to contact the customer using contact information on the specimen request form.

If the provider is unable to contact the customer, the specimen will be rejected, or analysis deferred until contact is made. The provider will make an assessment on the ease of repeating a test and how precious a specimen is prior to rejection.

For specific contracts the provider may agree different criteria with the customer in relation to specimen acceptance/rejection and this will be detailed in a service specification.

When specimens are rejected due to insufficient information, a report will be issued through the provider’s LIMS as soon as practicable, stating that the specimen has not been processed and giving details.

Where the missing information includes the location from which the specimen originated and destination for report, a patient report will be unavailable. It is fully expected that in this scenario the customers local outstanding result process will identify missing results and instigate investigation.

Specimen that have been rejected and not processed may be stored by the provider for up to one week to allow the customer time to make contact. This storage will be at the discretion of individual departments.

**13.0 Specimen Which May be Processed Even If the Essential Information Is Missing**

Certain types of specimen are considered ‘precious’ or are extremely difficult to repeat (e.g., CSF specimens, biopsies, aspirates, etc., or where the specimen forms part of a series or dynamic test).

In such cases, a senior member of the providers staff will be responsible for deciding if the analysis is justified. The customer will be contacted and may be asked to come to the department to complete the details.

If specimens are accepted under these circumstances, the details will be recorded on the form or in the computer. The report will include a clear disclaimer detailing the shortcomings of the specimen and/or request.

The disclaimer will identify the customer representative who has agreed to take responsibility for the results and for any action taken as a result of the report.

Cellular pathology specimens will not be rejected but will not be processed until any error has been corrected, and this may lead to a delay in diagnosis.

**14.0 Specimen which cannot be processed due to specimen or laboratory issue.**

If a specimen cannot be processed due to a specimen, transport, analyser or other laboratory issue this will be notified by a comment on the patient report.

The provider will not contact the customer prior to issuing the paper report.

The customer is responsible for contacting the provider via the business unit to arrange retesting either on residual specimen should stability allow or on a new specimen.

Contact information is available in the key contact section.

If testing was not complete because of a laboratory error retesting will be provided free of charge.

**15.0 Transport of laboratory specimen**

Specimen transport requirements including any special requirements and conformance with transport of biological substance standards is the responsibility of the customer. The provider will reject specimens not transporting in line with requirements.

For blood science requests where the customer has transported specimen using a bio-freeze box and provided pre-paid return postage the provider will return the transport box to the customer. If no return postage is provided the box will be recycled within the Newcastle upon Tyne Integrated Care System (ICS) with no further communication to the customer.

**16.0 Specific requirements**

Information on specific technical and quality requirements for specimen can be found either on the provider’s website or for specialist services or service not detailed on the website through a MOU which will be provided to the customer by the provider’s quality team.

**17.0 Laboratory turnaround times**

Test turnaround times are published on the provider’s website. The quoted turnaround time is from specimen receipt in the laboratory, to results authorisation in the LIMS. The times do not include transport of specimen to the laboratory or the administrative process to print and post/email reports, administrative tasks will be complete in a timely manner. Customers must allow for transport and reporting time when ordering tests.

**18.0 Urgent testing**

The provider does not provide an urgent testing service at customer’s request. The provider will not alter testing procedure for any specimen request marked as urgent. On clinical grounds testing may be processed urgently as per the providers standard laboratory protocol.

**19.0 Emergency contact for reporting of abnormal results**

Customers are responsible for suppling the provider with emergency contact details to be used if laboratory testing identifies an abnormal result, reporting of abnormal results is applicable to tests with clinical relevance. The provider will not be held responsible for delay of reporting due to lack of contact information.

**20.0 Reflex testing**

Clinically required reflex or associated testing will be performed automatically to include patient reporting, a charge will be made for this testing. This will be done without a prior request from the customer.

**21.0 Reference Ranges**

Reference ranges and critical values are assessed regularly by suitably qualified laboratory staff to ensure that they remain current and appropriate to the test repertoire. The provider will update the details on the provider’s website and/or MOU as required.

**22.0 Reporting**

The primary method of reporting is paper posted reports. Electronic options are available through Labgnostic (NPEx) and Clinisys ICE.

**22.1 Paper reporting**

The provider will:

* Request a report postal address from all customers.
* Request a location code is created within the LIMs for the reporting address.
* Print reports the evening after authorisation of the result with LIMs.
* Envelop and post the reports the working day following printing.
* For some non-NHS customers reports will be checked for accuracy, which may result in results being held for one working day.
* Results will only be emailed with prior agreement, and only if administrative capacity allows. If an emailed reporting is to be provided, email with be sent by secure egress to a pre-agreed email address.

**22.2 Electronic Labgnostic (NPEx) Reporting**

Electronic reporting for customers is available through Labgnostic (NPEx).

Labgnostic (NPEx) allows real time result reporting between laboratories and is a dedicated VPN between the Trust and Labgnostic cloud services, which meets secure standards and clinical safety standards.

In addition to the standard requirements outlined through this document the customer is responsible for ensuring samples sent with a Labgnostic (NPEx) request have been marked as dispatch within the Labgnostic (NPEx) system. The customer is responsible for ensuring the samples are transported to the provider with a Labgnostic (NPEx) shipping manifest and all samples that are included in the manifest are in the shipment.

The provider is responsible for the sample once it arrives at one of the provider’s laboratory receptions. The provider is responsible for receipting the sample within Labgnostic (NPEx) or in the event of a damaged sample reporting the sample as damaged.

If a sample is received without dispatch the provider will take all reasonable actions to correct the electronic ordering pathway.

The provider will support any issues arising for the use of Labgnostic (NPEx) to allow issues to be fully investigated, reported and corrected.

 **22.3 Electronic Clinisys ICE Reporting**

Customers can make referrals to the provider via ICE and the reports will post back to the patient record in ICE Desktop. Reports can be accessed by customers through the provider’s instance of ICE to view the reports or by logging into their own instance of ICE and viewing the results/reports via the OpenNet connection.

Options are available to receive results electronically via ICE using the Message Exchange for Social Care and Health (MESH), which enables senders and recipients to exchange messages securely and reliably.

In all cases the responsibility of ensuring the required ICE access lies with the customer. Further advise regarding ICE can is available through the providers ICE administration team, by contacting tnu-tr.newcastlelaboratories@nhs.net in the first instance.

**23.0 Data processing agreement**

A patient’s personal data will be shared between the customer and provider for the purpose of specimen identification in the laboratory and reporting laboratory test results. When no other specimen identification options exist, patient identifiable data will be included on invoice backing information supplied by the provider to allow the customer to identify activity and verify invoices for payment.

All patient identifiable information when reported by the customer will be provided securely, this may be through egress secure email, by post, through Labgnostic (NPEx) link.

Secure egress email will require non nhs.net users to register with egress to download encrypted data.

Secure post will only be sent, by courier or by royal mail marked as confidential to the address held within our LIMs.

Labgnostic (NPEx) allows real time result reporting between laboratories and is a dedicated VPN between the Trust and Labgnostic cloud services, which meets secure standards and clinical safety standards.

If a request relates to a patient who has also attend at Newcastle upon Tyne Hospitals NHS Foundation Trust, test result information will be shared with the Newcastle upon Tyne NHS Foundation Trust electronic patient record providing the required patient identifiers, relevant to the request type (paper or electronic), are available.

| **Description**  | **Details** |
| --- | --- |
| Subject matter of the processing | Information required to carry testing and / or investigation as detailed on the specimen request form. |
| Duration of the processing | As required to complete the investigation and / or testing as detailed on the specimen request form. |
| Nature and purposes of the processing | The data shall be processed for the purposes of investigation and / or testing as detailed on the specimen request form. This includes reporting the patient results and invoicing. For the avoidance of doubt, all processing will take place within the UK and no personnel data will be imported into the UK for the purpose of this contract. |
| Type of Personal Data  | The laboratory will process patient identifiable information for the purpose of providing the service detailed within this agreement which may include (but not restricted to):* Name and NHS Number
* Patient MRN (Trust Patient ID)
* Date of Birth
* Address
* Telephone Number
* Relevant clinical conditions
* Only relevant data is processed, is also in line with specimen essential information criteria.
* This may include special category data such as ethnicity and clinical conditions only when relevant to the referral.
 |
| Categories of Data Subject | All relevant patient’s data relating to the test under the terms of this policy. |
| Plan for return and destruction of the data once the processing is complete UNLESS requirement under union or member state law to preserve that type of data | In line with Laboratory destruction of data policies |

**24.0 New customers/New workload**

The provider accepts customer with regular and one-off testing needs of varying financial materiality.

Irrespective of whether the customer and provider have an established agreement in place the customer must contact the provider via the providers business unit if there is a new testing requirement, a change in testing requirement or a material change in referred activity levels.

Capacity and capability to support customers will be ascertained by the providers business unit. If the provider does not have capacity and capability the customers will be notified by email communication.

The customer will be asked to provide details of the customers organisation name to bill (name and address) and the address for patient reporting.

The customer may be asked to provide information to confirm they have the appropriate authority to request diagnostic testing of biological specimens.

For some non-NHS services who make routine referrals, consumables and a specimen request form will be provided. Instructions on how to order consumables will be provided at the service set up stage.

For high financially material services and / or complex service needs SLA paperwork will be provided. SLA paperwork is initiated by the providers business unit and is signed by both provider and customer. The paperwork includes indictive testing levels, pricing, and may include a service specification. SLAs vary in duration depending on the service.

For customers with a regular but low financial value service no SLA is put in place, receipt of a specimen with specimen request form constitutes agreement.

The provider uses an ad-hoc technical request form for one off, short duration and/batch testing requirements, to gather and confirm the customers information and requirements. Requests for ad-hoc services are initiated by the customer completing an ad hoc request form. If materiality/complexity requires there will be an SLA prepared and signed by both the customer and the provider, alternatively receipt of the specimen and specimen request form constitutes agreement. In all cases a purchase order must be provided before ad-hoc work is sent to the provider; test results will not be released without a purchase order.

In all cases this terms of business document is to be read in conjunction with any agreement.

Detailed scientific technical and quality information will be provided through the provider’s website or through a MOU supplied by the providers quality team.

**25.0 Pricing and Payment**

Test prices are available by contacting the providers business unit, please see key contacts.

Test prices are subject to annual and/or bi-annual inflation to the level indicated by NHS England nationally, or subject to annual inflation in line with RPI/CPI or an alternative percentage based on Trust supplier uplifts for customers not commissioned by NHS England.

Prices may be subject to change following service review, in the event of analyser replacement and/or other service improvements. Price change from these events will be notified in advance.

Prices for tests not performed in-house, i.e. those sent away to a third-party laboratory will be changed in line with pricing information received from our third-party laboratory. Notice will not be issued in advance of these price changes.

The customer shall pay any invoice submitted by the provider within thirty (30) days of invoice date.

The customer is responsible for providing any necessary purchase order, failure to promptly provide a purchase order does not discharge from the customer’s obligation to pay for services within 30 days of invoice date.

All provided pricing excludes VAT, should VAT become due this will be charged at the prevailing rate.

**26.0 Assessment, Regulation and Legislation**

Most laboratory tests within the providers repertoire are accredited to the ISO15189 standards for medical laboratories. On-site inspections occur annually to ensure ongoing compliance. Conformance to these standards and ongoing accreditation remains the prime quality objective and provides reassurance to customers of our ongoing commitment to attaining the highest levels of service quality.

Where tests are not included with the scheduled of accreditation the provider will be able to demonstrate that testing is carried out as part of a defined management system.

The full accredited scope of tests is available on the UKAS website.

Should accreditation be fully withdrawn or fully suspended this will be communicated by letter to impacted customers, information will also be made available on the provider’s website.

Information on tests outside of scope of accreditation are detailed on the provider’s website and in some cases as a note on test results.

The provider complies with all legislative requirements for practice and are assessed appropriately by external bodies such as the Human Tissue Authority (HTA), Medicines and Health Regulatory Agency (MHRA) and the Home Office for evidence of conformity.

**27.0 Health and Safety**

Specimens with known or suspected risk of containing a Hazard Group 3 or 4, e.g., hepatitis, HIV or tuberculosis must be labelled as a biohazard.

A lack of sufficient clinical detail provided on the request form regarding potential risk of infection may result in the specimen being handled in the wrong biological containment level with resulting increased risk of infection to laboratory staff.

All specimens must be correctly packaged, it is the customers responsibility to ensure packaging meets all governance in relation to transporting of biological substances

**28.0 Complaints**

Complaints can be made through the Newcastle upon Tyne NHS Foundation Trust complaint procedure. An official complaint can be made verbally, in writing or electronically. If you wish to make a verbal complaint, please telephone the Patient Relations Department on 0191 223 1382 or 0191 223 1454. To make a complaint electronically please send the details in an email to the provider.patient.relations@nhs.net. If you wish to complain in writing, you can write to: -

Chief Executive,

Newcastle Upon Tyne Hospitals NHS Foundation Trust, Headquarters

The Freeman Hospital,

High Heaton,

Newcastle Upon Tyne

NE7 7DN

Alternatively, complaints can be made by contacting the appropriate laboratory / department manager as detailed on the contact us page of the provider’s website.

If a formal SLA is in place this will include details of the provider representative.

**29.0 Key Contacts**

Enquiries can be made by email, writing or phone to:

Laboratory Business Unit

Room 113C

Freman Pathology

Freeman Hospital

High Heaton

NE7 7DN

Telephone: 0191 223 1135 (Option 1)

Email: tnu-tr.newcastlelaboratories@nhs.net

Details of laboratory contacts can be found on the provider’s website.

**30.0 Notifications**

In the event of both a planned or unexpected laboratory issue impacting customer reporting the provider will communicate details of the issue and mitigation plan to customers via letter and/or email. Information on large scale / duration issues will also be available on the provider’s website.

**31.0 Testing to support research**

The customer is responsible for informing the supplier of any testing required for research purposes. In the event that testing is associated with research, the customer will be asked to evidence research governance approvals, including Calicott approval.

**32.0 Provider’s website**

The provider’s website can be found at <https://laboratories.newcastle-hospitals.nhs.uk/>