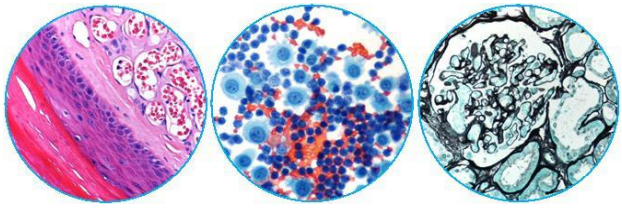
UK NEQAS

Cellular Pathology Technique



Participant Manual

2019 – 2020

(Edition 19)

Providing worldwide external quality assessment and proficiency testing for all aspects of tissue diagnostics

UK NEQAS

Cellular Pathology Technique

Unique world leader in Cellular Pathology EQA

Contents

General Information

UK NEQAS Cellular Pathology Technique (CPT) is an international organisation providing a comprehensive range of accredited External Quality Assessment (EQA) and Proficiency Testing programmes for all aspects of tissue diagnostics.

The result of many years of evolution and development in the field of Cellular Pathology Technical EQA and proficiency testing, our aim is to ensure that all our participants receive high quality, appropriate, clinically relevant and challenging samples that fully meet their facility's requirements; and, that our assessment of those samples is consistent, carried out by qualified assessors, graded and anonymously compared and peer reviewed.

To enable us to provide the best service possible to our participants, this is a continuous process, and as such, changes and amendments to this document will be inevitable and essential.

This document is designed to act as a **User Manual**, together with individual scheme assessment staining criteria handbooks, run reports and other documentation or literature you may be sent.

Please take the time to study all the sections and to familiarise all of the staff in your laboratory / organisation with the contents of the manual.

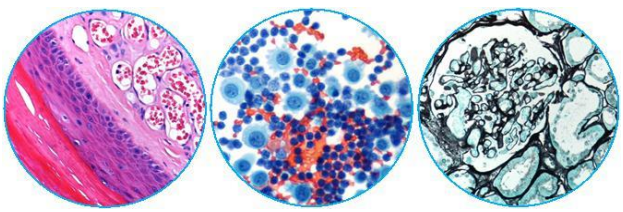
Updated versions will be issued as a hard copy annually with subscription and any subsequent updates will be available on our website. All participants must make sure they have the most recent edition and that all other editions are destroyed.

This is a necessary part of the document control procedure of UK NEQAS CPT and is a requirement of ISO/IEC 17043:2010(E) standard.

Electronic copies of this document can be found in PDF format on the UK NEQAS CPT website at:

www.ukneqascpt.org.uk

Reference ISO / IEC 17043:2010(E) clause 4.9 Communication with Participants



Benefits of Participation

UK NEQAS CPT provides assurance that a high standard of testing is achieved for all.

Expertise

- Regular, impartial and confidential assessments in a range of technical procedures performed by participating organisations
- Data analysis to assist participating laboratories/organisations audit their performance
- Sharing of best practice to improve procedures and quality within participating organisations
- Fully interactive website including reference library of images and best methods
- Direct access to troubleshooting expertise, helping participants proactively mitigate issues and supporting efforts to improve the quality of care provided to patients

Individualised Reports

- Graphical display of data for easy pictorial assessment of individual performance
- Detailed summary of the scoring against designated criteria
- Enhanced feedback in the form of criteria definitions and constructive assessment observations, for participants to maintain, review and / or improve their quality standards
- End of year annual performance report showing detailed summary of performance and a comparative performance assessment of peers

Frequency

- 6 distributions annually, allowing regular assessment of individual performance to support proactive identification and correction of issues
- Reports issued within 48 hours of assessment for efficient feedback and quality assurance

Education

- Continuing professional development of staff within participating organisations including annual participant feedback meetings, scientific meetings, seminars, educational workshops and e-learning
- Regular UK NEQAS CPT newsletters, best methods and assessment run publications keeping participants up to date with developments and expert help and advice

Recognised Accreditation

- Assistance with participating organisations to meet accreditation standards relating to EQA / proficiency testing
- Annual participation certificate providing evidence of participation in a UKAS accredited programme

UK NEQAS CPT is UKAS accredited proficiency testing provider No. 8268

External Quality Assessment

UK NEQAS CPT provides a secure and established set of schemes, with a first-class reputation and an extensive and stable participant base for both clinical and non-clinical laboratories and organisations in the UK and across the globe.

EQA Programmes

Currently UK NEQAS CPT offers 6 assessment cycles/runs per year in the following areas:

Slide Based Schemes

- General Pathology (Routine Histopathology)
- Neuropathology
- Renal Biopsy
- Muscle Histochemistry
- Diagnostic Non Gyn Cytology
- Bone Marrow Trephine biopsies (BMT)
- Mohs Procedure

Web Based Schemes

- Transmission Electron Microscopy (TEM)
- Direct Immunofluorescence (DIF) ***(Pilot)***

Interpretive Web Based Schemes

- Diagnostic Digital Non Gyn Cytology ***(Pilot)***

Companion Schemes

- Frozen Sections
- Mega Blocks

Accountability

- ISO 15189:2012 standard clause 5.6.3 Inter-laboratory Comparisons provides guidelines directly related to EQA / proficiency testing
- The standard above uses the terms “approved EQA schemes”, “inter-laboratory comparison programmes” and “external quality assessment programme or proficiency testing programme”. These terms are defined as those who are accredited according to ISO/IEC 17043:2010(E) standard
- UK NEQAS CPT is UKAS accredited proficiency testing provider No. 8268

Performance Monitoring and Confidentiality

- Participation in UK NEQAS CPT is governed principally by confidentiality and Information Governance guidelines and standard ISO/IEC 17043:2010(E)
- This includes the Joint Working Group (JWG) on Quality Assurance and the National Quality Assurance Advisory Panel (NQAAP)

Specialist Assessment and Advice

- All participants have access to Specialist Advisory Panels for each EQA scheme
- Each panel consists of expert peer assessors in the field of cellular pathology
- All of UK NEQAS CPT assessors operate as Specialist Biomedical Scientists and / or Consultant Pathologists
- Each assessor undergoes structured training and competency assessment prior to appointment and during each assessment session, and follows strict Information Governance guidelines. This ensures professional and ethical conduct of the scheme and participant confidentiality
- Each scheme has a Specialist Scheme Coordinator who is readily available to offer advice and troubleshoot technical queries

Company Partnerships

- UK NEQAS CPT is a not-for-profit organisation, funded by participation fees
- To enable us to invest and grow, we partner with commercial companies and other institutions via “Scheme Sponsorship”, which enables us to develop our EQA / proficiency testing service to participants
- UK NEQAS CPT is an independent organisation and any sponsorship has no influence on methods, results or reports

Assessment Reports

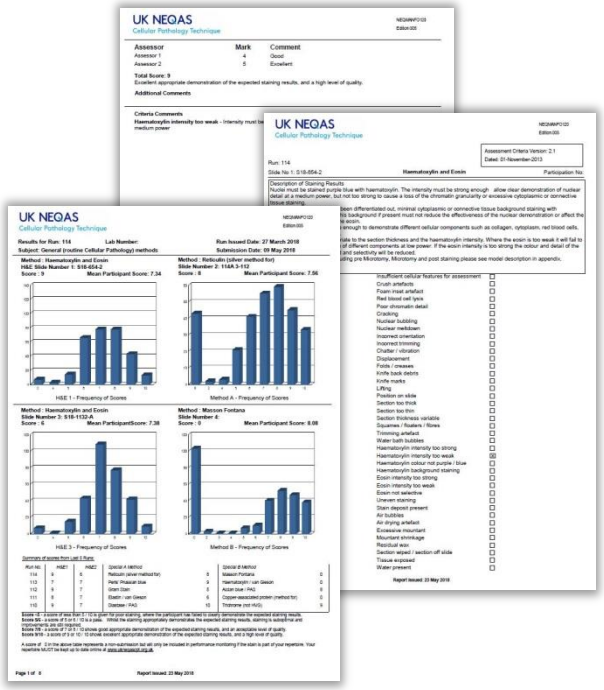
Assessment result reports are available online and our results package shows accumulated historical activity that highlights improvement or decreases in quality.

Participant Report

Following each assessment, participants are emailed notification of availability of their reports. These are available online and can be viewed and / or downloaded from the UK NEQAS CPT website **www.uknegascpt.org.uk** (See Online Reports).

Individual reports following each assessment include:

- The individual assessor's scores out of 5, giving a total score out of 10
- A detailed summary of the scoring against designated criteria, including detailed explanations of each criteria allocated against that submission
- Constructive comments from the assessors, to help participants improve their methodology/technique
- Frequency charts of submission scores, illustrating the distribution of participant scores for each run and the mean participant score for the submissions for the assessment run, as well as a summary of scores from the last 5 runs



Before distribution of reports, all participant data is anonymised, except for individual participant numbers.
Participant data remains confidential between UK NEQAS CPT and the participating centre, except for occasions of poor performance where NQAAP needs to be notified (See Performance Monitoring).

- Individual participant numbers are visible as part of the organisation specific (participant) assessment run reports
- All participant numbers are available as part of the organisation specific (participant) annual reports (See Interpretation)

- After each assessment, best methods and images are uploaded to the website from anonymised participant data

Annual Report

- Annual reports are available online at the end of each annual subscription, following consecutive run assessments
- A personalised report shows a detailed summary of scores, including frequency charts and graphs against Mean Participant Scores (Internationally) and a league table of Participant Performance (see Interpretation)
- **All** participant numbers are available as part of the organisation specific (participant) annual reports

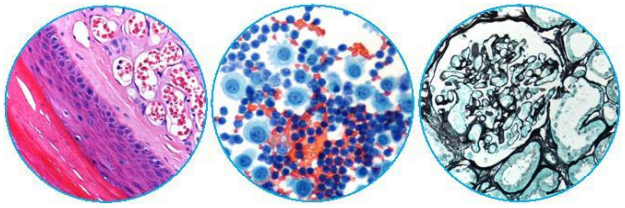
Publication of UK NEQAS CPT Reports

- Participant performance data and evidence of appropriate EQA / proficiency testing participation will be used for their own accreditation purposes and may also be provided to service users as supporting evidence for organisational KPI's. Patients and clinicians should have access to open and transparent details of pathology services quality assurance, to better understand and engage with providers about patient needs and concerns.

- However, UK NEQAS CPT reports / performance data **must not be used in a promotional manner without specific written permission from UK NEQAS CPT.**
- This refers to the use of reports / performance data outside the scope and ethos of UK NEQAS CPT activity, which may be to the business detriment of other services.

- **UK NEQAS CPT will investigate any claims of data misuse.**

- Any participant suspected to be in breach of the above will be suspended from UK NEQAS CPT pending investigation and the centre will be asked to remove/retract any promotional information with immediate effect. Subscription to the UK NEQAS CPT scheme may be cancelled as a result.

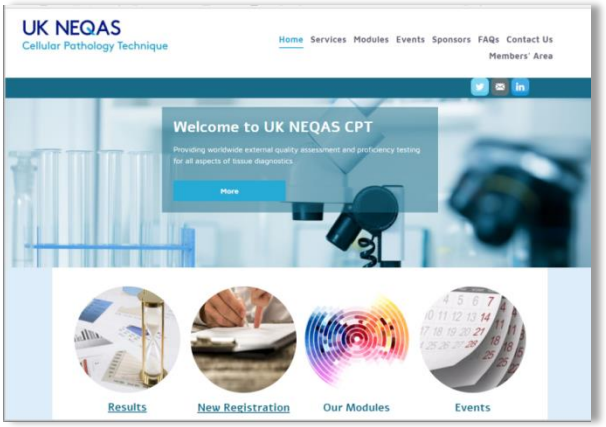


Online Reports

UK NEQAS CPT offers online access for data entry / digital submission and e-learning prior to, and retrieval of results reports following assessment, via the UK NEQAS CPT website.

Accessing Online Reports

Online reports are available from the UK NEQAS CPT website **www.ukneqascpt.org.uk**
From the homepage, click the **Results** button which will take you to the login page.

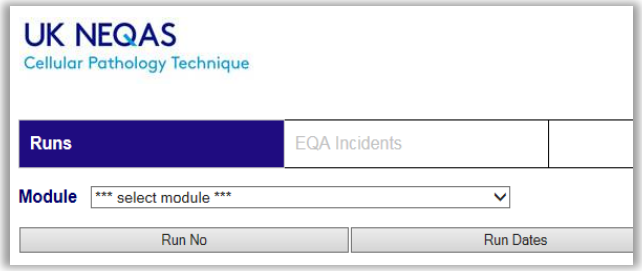


The login details consist of:

- **Lab Number** - 4 digit laboratory/organisation participation code that appears on all documents issued to you from UK NEQAS CPT e.g. 4633
- **Identity** - 4 digit random ID number, which is unique to the individual e.g. 7896
- **Password** - an alphanumeric series of at least six characters unique to the individual

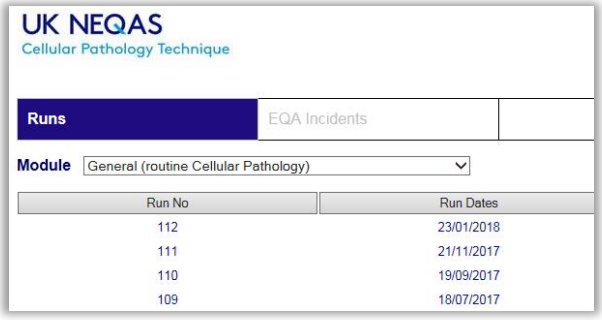
Please do not disclose your login ID and password to non-staff members. No responsibility can be taken by UK NEQAS CPT for any misuse of the system, or breach of confidentiality, where this may have happened

Selecting a Scheme



Use the drop down box to select a scheme. Select the relevant scheme results you wish to view.

Once selected, all of the distributions a participant has registered for in that scheme will be displayed.



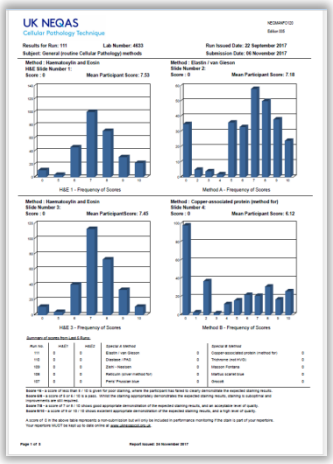
Selecting a Run

Once the relevant scheme has been selected, double click on the required run to automatically open the report. This will appear as a PDF which you will be able to download or print.

Run Reports

Individual reports following each assessment show:

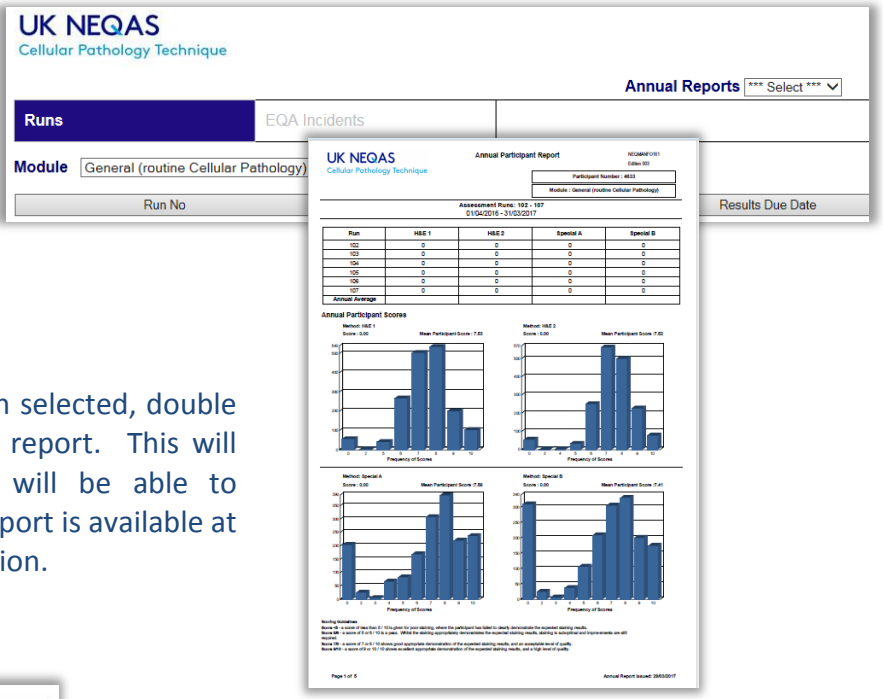
- Frequency charts of submitted slide scores, illustrating the distribution of participant scores for each run and the mean participant score for the submitted material for the assessment run
- A summary of your scores from the last 5 runs
- The individual assessor's scores out of 5
- A total score out of 10
- A detailed summary of the scoring against designated criteria, including detailed explanations of each criteria allocated against that submission and constructive comments from the assessors



Annual Reports

Annual reports are accessed from the same screen as the run reports.

From the **Annual Reports** tab, select a report from the dropdown menu.



Once the relevant year has been selected, double click to automatically open the report. This will appear as a PDF which you will be able to download or print. An annual report is available at the end of each annual subscription.

Participation Certificates

Annual participation certificates are issued following successful re-subscription and payment of fees. These detail your participation number and organisation details, the scheme you are subscribed to and the year of subscription, providing evidence of participation in a UKAS accredited programme.

Participation in UK NEQAS CPT

Participation in UK NEQAS CPT is a continuous assessment of quality and feedback on performance.

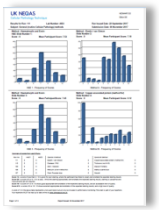
Remember to make note of the resubscription date

Certificate of Participation issued

Provides evidence of participation in a UKAS accredited programme

Access Reports online via UK NEQAS CPT website

Look out for your email notification when these are made available



Submitted material assessed according to designated criteria

Material assessed by specialist experts in the field of cellular pathology

Remember to make note of the return date to avoid late submissions

Select and submit your in house / archival material and / or stain any distributed material

Receive assessment run instructions via post / email

6 annual assessment runs, issued bi-monthly with instructions for participation

Receive your unique Participant Number along with an ID and Password

Subscribe online to UK NEQAS CPT and register your selected scheme repertoire

This can be as part of Annual subscription in February or at any time throughout the year

Check www.ukneqascpt.org.uk for details

UK NEQAS
Cellular Pathology Technique

Unique world leader in Cellular Pathology EQA

Assessment: Material

All participants are strongly recommended to draw up a written procedure covering the selection of material for EQA and to record instances of departure from any instructions given by UK NEQAS CPT.

Selected Material

When participating in the UK NEQAS CPT schemes, it is important that you treat the assessment material provided by UK NEQAS CPT in exactly the same way as your patient test material. Our scheme is designed to assess how you test patient material as part of your routine daily procedures, from fixation through to cover slipping of stained sections.

Treating your assessment material in the same way as you would your patient test material ensures that assessments are a reliable measure of the quality of your patient testing.

The work patterns in some departments / organisations may mean that the first specimen is always of a particular, perhaps unrepresentative type. Substitution of a later case is permissible provided this is chosen in accordance with a written departmental operating procedure. Please use your professional judgement.

Participants must not submit re-cut or re-prepared file material or select a "best example" for submission.

You may substitute the first suitable slide after that requested if the selected case:

- is not an H&E (General Pathology and Neuropathology schemes only)
- consists of minimal or acellular material (see scheme-specific Staining Criteria Handbooks for definitions and guidance)
- was referred into the department from an outside laboratory/organisation
- is required for another purpose or is still involved in the diagnostic process

Distributed Material

Distributed material is sent via mail in a barcode-labelled slide mailer. **This is a unique participant ID barcode identifier and is used by UK NEQAS CPT to log receipt of your EQA material.**

Recall of Material

Distributed material is validated, following strict guidelines, at source and again by UK NEQAS CPT, prior to distribution. Should any distributed material be identified as being compromised, material will be recalled and the associated run suspended (see Ethical Considerations).

Assessment: Submissions

All participants are strongly recommended to log receipt and dispatch of all EQA materials.

Participant Submissions

For each assessment run, participants are sent a delivery letter detailing instructions for submission and other important information for participation.

Participants are asked to submit for assessment according to the instructions detailed on the delivery letter (see Specialist Schemes).

For those participants submitting slides, they are asked not to submit multiple slides for selection by UK NEQAS CPT.

Participants are reminded that they are liable for the cost of return postage. Packages received marked "postage due" cannot be accepted.

The schemes are intended to be educational in nature, so if problems are identified, this will enable the participant laboratory/organisation to improve quality of their patient testing.

Provision is made on the delivery letter to provide the assessors with any relevant information and participants are urged to use this facility. This information is available on the assessment screen during assessment sessions.

Participants are recommended to send slide submissions by tracked postage or courier service. UK NEQAS CPT provides return postal address labels for use when returning slides.

Submission Receipt

All submitted material is anonymised so that assessments are carried out blind and all material is returned to the participant following assessment. Complete participant confidentiality is maintained throughout all of our processes.

For some non – UK participants, submissions distribution and returns for UK NEQAS CPT scheme participation is via a distributor. In these instances the distributor will therefore communicate the process for slide submission distribution and collection to participants.

Submission Return

Postage and Packaging

UK NEQAS CPT has a duty of care over your submission material. With this in mind, we use high quality packaging, to satisfy UK Post Office and international postage regulations, to be environmentally friendly and to speed handling.

Optional Courier service

Run assessment distributions are currently sent Royal Mail tracked First Class Recorded to all destinations. If you would prefer your run shipments to be sent via courier in the UK or overseas we can offer this service at an additional cost.

Assessment: Interpretation

UK NEQAS CPT submissions are assessed by an expert team of biomedical scientists, clinical scientists and consultant pathologists, with extensive knowledge and experience in the field of cellular pathology. This includes specialist assessors for each of the specialist schemes.

Assessment Team

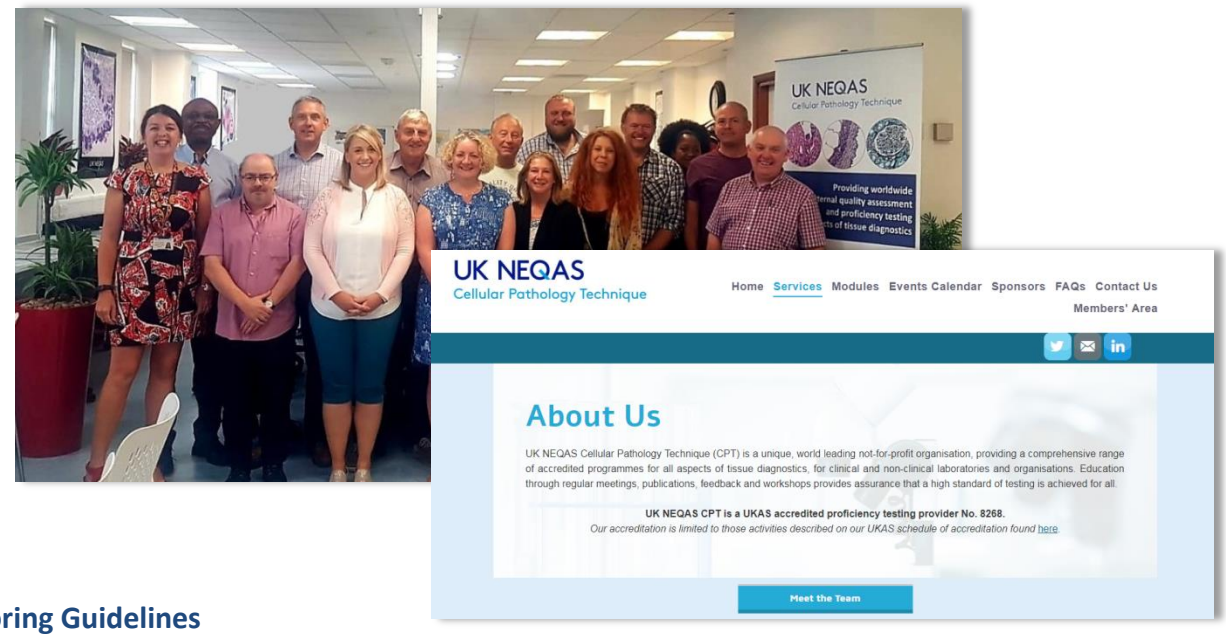
Each assessor undergoes training prior to appointment, is competency assessed prior to and during each assessment session and their competency is reviewed annually.

Training days are held for new assessors and new assessment team members adhere to strict UK NEQAS CPT guidelines before they are deemed competent.

Submissions are masked for anonymity using removable labels and are then assessed by a pair of experts in the field of Cellular Pathology techniques.

- Anonymisation of participant's submissions and their assessment using assessor pairs prevents any conflict of interest or collusion by UK NEQAS CPT assessors.
- It also ensures professional and ethical conduct of the scheme and participant confidentiality.

UK NEQAS CPT Peer Assessor profiles are available on the UK NEQAS CPT website **www.uknegascpt.org.uk**



Scoring Guidelines

During the assessment sessions, our expert assessors work in pairs to assess participant's submissions. Each assessor gives their mark out of 5 based on the criteria for a given method, giving a total score out of 10 for the submitted material.

Individual Assessor (out of 5)

0 - Non Submission

1 - Fail
No staining demonstrated based on the method employed and the expected staining results

2 - Borderline Fail
Unsatisfactory demonstration based on the method employed, with expected staining results being inappropriate

3 - Pass
Appropriate demonstration based on the method employed and the expected staining results, although improvements need to be made in the staining

4 - Good
Good appropriate demonstration based on the method employed and the expected staining results

5 - Excellent
Excellent demonstration based on the method employed and the expected staining results

Total Score (out of 10)

Score <5
A score of less than 5 / 10 is given for poor staining, where the participant has failed to clearly demonstrate the expected results

Score 5/6
A score of 5 or 6 / 10 is a pass. Whilst the staining appropriately demonstrates the expected staining results, staining is suboptimal and improvements are still required overall

Score 7/8
A score of 7 or 8 / 10 shows good appropriate demonstration of the expected results and an acceptable level of quality

Score 9/10
A score of 9 or 10 / 10 shows excellent appropriate demonstration of the expected results and a high level of quality

Scoring Variances

Any submission which scores a mark of 2 or below is passed to a further assessor for additional assessment before a final score is issued. If there is a discrepancy of 2 between the assessing pair e.g. 3 & 5, the submission will be passed on for further assessment. If there is a discrepancy of pass/fail between the assessing pair, the submission will be passed on for further assessment.

A more detailed explanation of the scoring criteria and its interpretation can be found in the scheme specific Assessment Criteria Handbooks.

Results

Following assessment, results and assessment sheet feedback are uploaded to the website. Participants are sent an email to inform them when the results are available and participants can access their results online. Laboratories/organisations are only able to access their own results (see Assessment Reports).

Non-submissions, which receive a score of zero, are shown on a published histogram, but these scores are not included in the mean participant score for the submissions for each assessment run. The original submission material is returned to the participant, along with the material and information for the next assessment run.

Assessment Criteria Handbooks

UK NEQAS CPT have developed assessment criteria and associated definitions to help participants interpret their scores and provide feedback from assessment sessions.

Each proficiency testing scheme has a separate Assessment Criteria Handbook, which contains a list of scheme specific staining criteria, definitions and guidance, as well as model descriptions and a more detailed explanation of the scoring criteria and its interpretation.

Copies of these criteria are available on the UK NEQAS CPT website at **www.ukneqascpt.org.uk.** This format is very similar to that used by the assessors themselves.

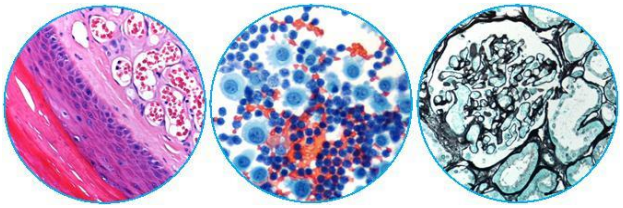
Annual Report

Annual reports are available online at the end of each annual subscription, following consecutive run assessments. (See Accessing Online Reports for more information.)

One of the key purposes of UK NEQAS CPT is to provide data to allow participants to review their practices and make informed decisions on any necessary quality improvements. Proficiency testing / EQA scheme performance should be assessed in the laboratory in conjunction with appropriate IQC programmes and procedures, in an open and transparent manner, to allow service users to better understand and engage with providers about patient needs and concerns.

Appeals procedure

Participants who are not satisfied with any scores received at an assessment can re-submit the same material to be re-assessed (see Appeals).



Performance Monitoring

UK NEQAS CPT monitors each EQA assessment run and monitors the performance of all participants. Any participants who fall into performance monitoring are offered advice and assistance.

UK NEQAS CPT is required by accrediting body United Accreditation Service (UKAS) to monitor the performance of all clinical UK participants. UK NEQAS CPT also informs all non-clinical and overseas participants who do fall in to performance monitoring, offering advice and assistance.

The National Quality Assurance Advisory Panel (NQAAP) states that submission rates should be 100% for all UK clinical laboratories/organisations.

Poor performance results in a letter being issued by UK NEQAS CPT to both the Clinical Head and the Technical Head of Department, summarising performance. A root cause analysis form (Poor Performance Monitoring Action Form) is also issued, which must be completed by the participant and returned with their response to the corresponding letter.

If no response has been received from the laboratory/organisation by the due date (one month from the date the letter is sent), UK NEQAS CPT will inform NQAAP.

UK NEQAS CPT use a 'traffic light' system for the grading of all its participants:

Amber Rating

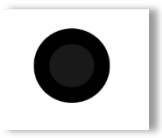
3 scores of 2/5 (4/10) or lower, over 5 assessment runs, will trigger an amber notification.

Issues with poor performance are managed locally by UK NEQAS CPT

Red Rating

5 scores of 2/5 (4/10) or lower, over 5 assessment runs, will trigger a red notification. As a result of a lab attaining a Red Rating, UK NEQAS CPT will also prepare a report to NQAAP detailing the nature of the problem and any action taken.

Persistent /unresolved poor performance issues are referred nationally to NQAAP (UK Clinical Laboratories)



Black Rating

This rating is defined by NQAAP for participants with unresolved performance issues. If the actions of NQAAP do not resolve the poor performance issues, then NQAAP will refer the participants to the Joint Working Group (JWG).

Persistent /unresolved poor performance issues are referred by NQAAP to JWG (UK Clinical Laboratories)

Education & Development

Participation in UK NEQAS CPT includes access to a range of educational activities, for continuing professional development (CPD), which enables quality improvement in Cellular Pathology Techniques.

Workshops

UK NEQAS CPT delivers one day workshops featuring taught, practical and interpretive components designed to cover a range of methodologies and diagnostic applications of current importance. Educational workshops are led by experienced, internationally recognised biomedical scientists, clinical scientists and consultant pathologists, who are experts in their chosen specialism.

Workshops are designed to supplement the in-house experience and training for trainee and qualified laboratory scientists and support staff and to further their knowledge of the laboratory.

Workshops are held in conjunction with Universities and Specialist Centres and are offered regularly throughout the year. UK NEQAS CPT seeks sponsorship for these events to minimise the cost to participants.

Details of workshops are circulated to all participants via email and are shown on the UK NEQAS CPT website **www.ukneqascpt.org.uk** and in the UK NEQAS CPT Newsletter.

Bespoke workshops can also be arranged for both UK and overseas participants. Please contact the UK NEQAS CPT office for information.

Newsletter and Reports

UK NEQAS CPT Newsletters are produced and issued regularly throughout the year detailing changes and developments within UK NEQAS CPT and expert advice.

As well as scheme and technical updates, and news and events, the newsletter includes advances in the world of Cellular Pathology plus articles and insights from participants and UK NEQAS CPT personnel.

Bi-Annual Reports of UK NEQAS CPT activities are available in Spring and in Autumn to all participants, on the UK NEQAS CPT website **www.ukneqascpt.org.uk.**

These are also presented to the Board of the Legal Entity, LabXCell.

Meetings and Events

The UK NEQAS CPT annual Participants Meeting offers delegates the opportunity to hear about the latest developments, techniques and innovations from our EQA and proficiency testing network.
The event highlights the achievements in cellular pathology techniques from the scheme and key note speakers, with the opportunity for breakout and Q&A sessions for specialist areas.

In addition to an informative and influential scientific programme, there are ample opportunities to network with cellular pathology colleagues from the UK and overseas. It also provides participants with an opportunity to discuss cellular pathology and EQA / proficiency testing related topics with other participants, UK NEQAS CPT assessors and personnel.

Additional scientific meetings, conferences and seminars, hosted or associated with UK NEQAS CPT, are also held throughout the year. Details of the above are circulated to all registered participants through UK NEQAS CPT email and are published in the Newsletter and on our website.

Participant Surveys

Online surveys are issued throughout the year to allow participants to feedback on various aspects of UK NEQAS CPT and its EQA schemes. Results from this are available on the website and the feedback is included as part of the meetings and seminar programme.

Methodology and Reagent Data

High scoring participants are asked to provide their validated Best Methods and reagent data relating to specific stains they have submitted.
Participants can also access images from the Image Gallery, following each assessment run. These images are designed to demonstrate the scoring system and criteria employed for each of the methods assessed by UK NEQAS CPT. Images are available for all schemes, showing *good*, *bad* and *indifferent* examples.

Website Features for Participants

- Best Methods Library
- Image Gallery
- Articles and Publications
- Events Diary
- E-learning

Participants are encouraged to access the site and to take advantage of the facilities on offer.

E-Learning

Participation in the web based schemes provide access to **Knowledge and Competence Exercises** which can be completed as an organisation and individually as part of training, CPD and competency assessment for members of staff.

General Education

Our aim for UK NEQAS CPT remains educational. As an EQA/proficiency testing scheme, we are more than happy to be approached for expert advice with any issues you may have, including problematic staining methodologies, or new technology and /or techniques.

We are happy to provide advice and help during normal working hours by email or by telephone.

Please note telephone enquiries are only available Monday to Friday 09:00 to 17:00 GMT

We also provide an **Evaluation Service** for registered participants by which any participant laboratory / organisation can submit slides for evaluation, which are not part of the run assessments. This is especially helpful for those having issues with staining or validating new methodology or equipment.

Participants receive an individual report from UK NEQAS CPT, which under ISO accreditation, can be used towards in-house verification/validation. More information is available on our website at **www.ukneqascpt.org.uk**

Specialist Schemes

UK NEQAS CPT offers a wide range of Slide and Web Based, Interpretive and Extension to Scope EQA / Proficiency testing schemes. Each scheme can be tailored to the needs and repertoire of each participant organisation.

UK NEQAS CPT offers bi-monthly distributions in the following schemes:

Slide Based Schemes

- General Pathology (Routine Histopathology)
- Neuropathology
- Renal Biopsy
- Muscle Histochemistry
- Diagnostic Non Gyn Cytology
- Bone Marrow Trephine biopsies (BMT)
- Mohs Procedure

Web Based Schemes

- Transmission Electron Microscopy (TEM)
- Direct Immunofluorescence (DIF) ***(Pilot)***

Interpretive Web Based Schemes

- Diagnostic Digital Non Gyn Cytology ***(Pilot)***

Companion Schemes

- Frozen Sections
- Mega Blocks

For each scheme, UK NEQAS CPT must encompass the wide variety of techniques and methodologies and be able to either review material from the laboratory/organisation or distribute a sufficient quantity of material for laboratories/organisations to adequately demonstrate the target. Details for each of the specialist schemes are detailed in the following pages.

A detailed explanation of the scoring criteria used in assessment and interpretation can be found in each scheme specific Assessment Criteria Handbook. These contain a list of scheme specific assessment criteria and definitions and a detailed explanation of the scoring criteria and its interpretation. These are available on the UK NEQAS CPT website **www.ukneqascpt.org.uk** (also see Assessment: Interpretation - Staining Criteria Handbooks).

Slide Based

Participants are asked to submit 4 slides as part of each assessment run. An individualised report is provided and is available online after each assessment run.

Web Based

Participants are asked to submit 4 images on line as part of each assessment run. An individualised report is provided and is available on line after each assessment run. Generic Best Method and Images Reports are also provided following participant Data Input on submission.

See individual schemes regarding Interpretive and Companion participation.

General Pathology (Routine Histopathology)

No. of assessment runs: **Slide Based**

6 distributions over a 12 month period

Stains assessed:

Selected / In-house Material

Haematoxylin and Eosin (H&E) *(all runs)*

Distributed Material

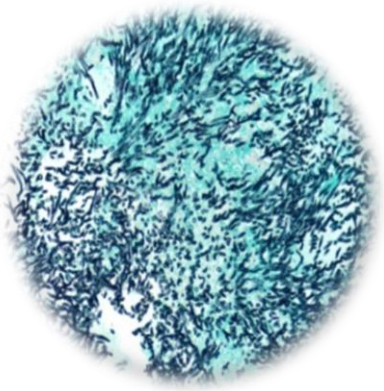
Special A	**Special B**
Diastase / PAS	Alcian blue / PAS
Elastin / Van Gieson	Amyloid (method for)
Gram	Grocott
Perls' Prussian blue	Haematoxylin / Van Gieson
Reticulin (silver method for)	Masson-Fontana
Ziehl-Neelsen	Martius-scarlet-blue (MSB)
	Copper Associated Protein (method for)
	Trichrome

This scheme assesses 2 archival surgical Haematoxylin and Eosin (H&E) stained sections, and special stained sections.

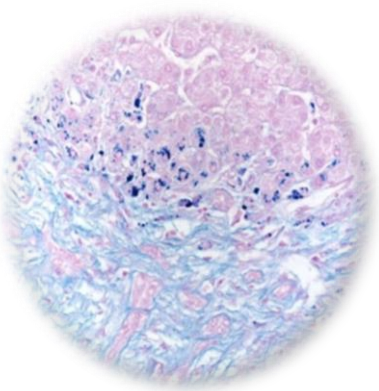
Special stains A & B are designated on the accompanying delivery letter issued with each run.

Two pairs of unstained sections are provided to each participant for staining by the staining methods directed, with one of each to be submitted for assessment.

If a method is not specified, the laboratory / organisation is free to use any suitable technique to demonstrate the target.



Grocott for fungi



Victoria blue for Copper Associated Protein

Neuropathology

This scheme is aimed at laboratories / organisations performing a neuropathology service, as part of routine Cellular Pathology, or a stand-alone unit.

No. of assessment runs: **Slide Based**

6 distributions over a 12 month period

Stains assessed:

Selected / In-house Material

Haematoxylin and Eosin (H&E) *(all runs)*

Distributed Material

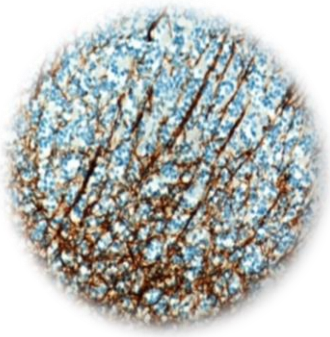
Special A	**Special B**
Diastase / PAS	Axonal Swelling (method for)
Elastin / Van Gieson	Glial fibres (method for)
Gram	Myelin (method for)
Perls' Prussian blue	Neurofibrillary tangles
Reticulin (silver method for)	Nissl substance
Ziehl-Neelsen	Senile plaques (method for)

This scheme assesses 2 archival surgical Haematoxylin and Eosin (H&E) stained sections, and 2 special stained sections.

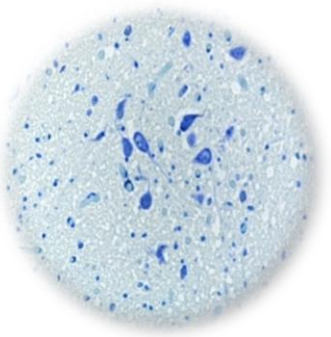
Special stains A & B are designated on the accompanying delivery letter issued with each run.

Stain A comprises routine histology special stains, and stain B comprises specialist neuropathological methods. Two pairs of unstained sections are provided to each participant for staining by the special stain methods directed, with one of each to be submitted for assessment.

If a method is not specified, the laboratory / organisation is free to use any suitable technique to demonstrate the target. For neuropathology, the methods in list B may include immunocytochemical techniques where that is the organisation's method of choice.



Myelin



Nissl substance

Renal Biopsy Pathology

This scheme is intended for use by clinical laboratories / organisations which may be either specialist departments or sections within general laboratories / organisations. The renal biopsy pathology scheme assesses **surgical renal biopsies**.

No. of assessment runs: **Slide Based**

6 distributions over a 12 month period

Stains assessed:

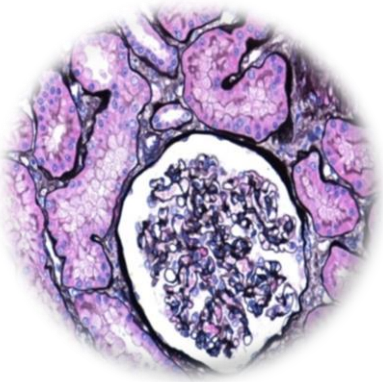
Selected / In-house Material *(all runs)*

Haematoxylin and Eosin (H&E)
Methenamine silver
Periodic acid-Schiff
Elastin / Van Gieson

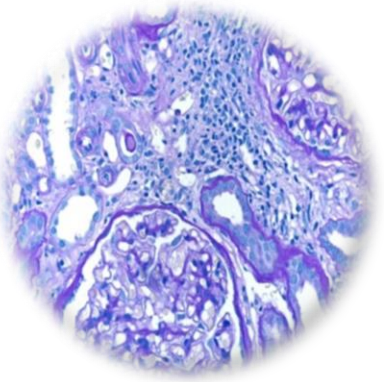
The renal pathology scheme assesses surgical renal biopsies using 4 routine renal staining methods.

The scheme works on a retrospective basis. Participants are asked to submit diagnostic slides from their archive containing material from a suitable native renal biopsy, which has been recently processed in the laboratory organisation. Participants must not cut / recut slides specifically for EQA submission.

A suitable biopsy must include renal cortex to ensure demonstration of glomerular basement membranes can be assessed.



Methenamine Silver



PAS

Muscle Histochemistry

This scheme is designed for clinical laboratories / organisations which may be either specialised departments or sections within general laboratories / organisations.

No. of assessment runs: **Slide Based**

6 distributions over a 12 month period

Stains assessed:

Selected / In-house Material *(all runs)*

Haematoxylin and Eosin (H&E)
Gomori Trichrome
NADH
Cytochrome Oxidase (COx)

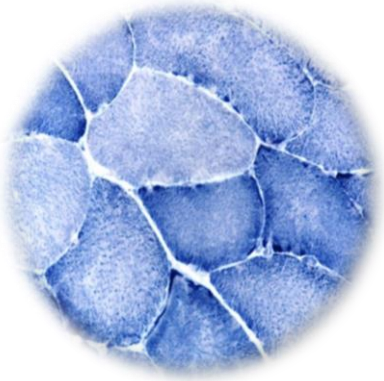
***Additional "Rotational" Stain**

(designated on delivery letter issued with each run)

Acid Phosphatase
Lipid
PAS
Primary fibre typing
Succinate Dehydrogenase (SDH)

This scheme assesses archived muscle biopsy material using 4 routine muscle staining methods. In addition, participants are requested to send the first suitable stained slide for an additional stain requested from the list above*.

If a method is not specified, the laboratory / organisation is free to use any suitable technique to demonstrate the target.
As with neuropathology, the methods listed above may include immunocytochemical techniques where that is the organisation's method of choice.



NADH

Cytochrome Oxidase

Diagnostic Non Gynaecological (Gyn) Cytology

This scheme is aimed at laboratories / organisations performing a Diagnostic Cytology service, as part of routine Cellular Pathology, or a stand-alone unit.

No. of assessment runs:

6 distributions over a 12 month period

Slide Based

Stains assessed

Selected / In-house Material *(all runs)*

Papanicolaou

Romanowsky

Specimen Types:

Serous Fluid

Head and Neck

Respiratory

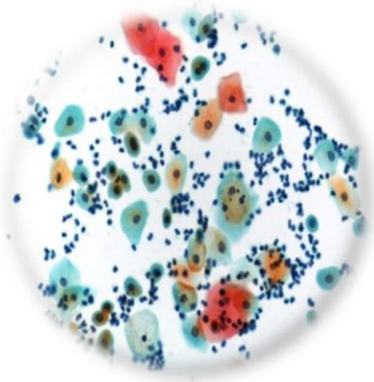
Urine

In the field of Diagnostic Non Gynaecological (Gyn) Cytology there are many sites for samples to be obtained from e.g. urine, sputum, pleural fluid, ascitic fluid, FNA etc. This scheme assesses 2 archival stained preparations, from 2 distinct cytology specimens, which are designated on the accompanying delivery letter issued with each run.

A preparation technique is not specified, and the laboratory / organisation is free to use any suitable technique to adequately demonstrate the staining method e.g. direct smears, cytospin preparations, liquid based methodologies.

This scheme does not assess H&E stained preparations.

UK NEQAS CPT follows RCPath guidance which explicitly states that H&E should not be used for cytology preparations. The BSCC does not specifically exclude H&E as a cytology stain, but equally does not advocate its use. If the guidance changes, then H&E may be included as part of the repertoire for this scheme.



Papanicolaou

Romanowsky

Bone Marrow Trephine Biopsy

This scheme is intended for use by specialist and routine pathology centres and departments carrying out Bone Marrow Trephine biopsies (BMT). BMT biopsies are an essential diagnostic tool to enable pathologists to diagnose an array of haematopathological disorders.

No. of assessment runs: **Slide Based**

6 distributions over a 12 month period

Stains assessed:

Selected / In-house Material *(all runs)*

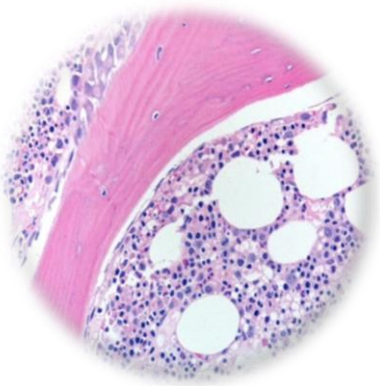
Haematoxylin and Eosin (H&E)

Reticulin (silver method for)

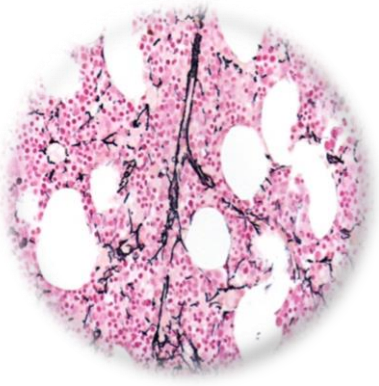
The BMT scheme assesses bone marrow trephine biopsies using 2 routine staining methods for diagnostic bone marrow trephine biopsies.

As BMT is a specialised tissue, it is approached as such within routine laboratories, employing specialist handling. Best practice and close liaison with haematologists ensures ease of reporting to ensure correct diagnosis.
Like other schemes, the BMT scheme works on a retrospective basis. Participants are asked to submit 2 archival stained preparations from 2 distinct BMT biopsies, as designated on the accompanying delivery letter issued with each run.

A preparation technique is not specified and the laboratory / organisation is free to use any suitable technique to adequately demonstrate the staining method.



Haematoxylin and Eosin



Reticulin

Mohs Procedure

This scheme is designed for centres in the UK and overseas that carry out Mohs Procedure. Mohs is a specialized, precise surgical technique used to treat skin cancer. As such it employs specialist handling, best practice, and close liaison with surgeons, to ensure correct diagnosis.

No. of assessment runs: **Slide Based**

6 distributions over a 12 month period

Stains assessed:

Selected / In-house Material *(all runs)*

Haematoxylin and Eosin (H&E)
Toluidine Blue

Specific Site/ Tissue Composition*

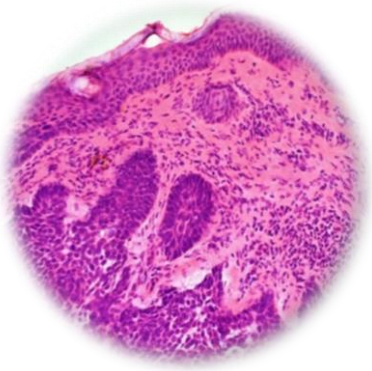
Cutaneous
Mucosal
Hair Bearing
Cartilaginous

The Mohs Procedure scheme assesses Mohs surgery biopsies using 2 routine staining methods employed during Mohs surgery.

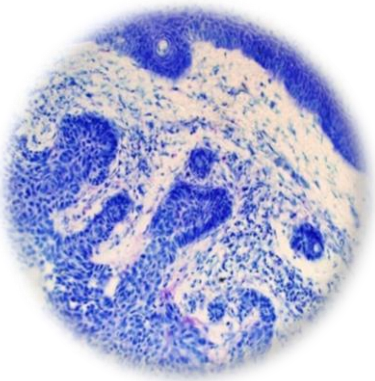
Like other schemes, the Mohs Procedure scheme works on a retrospective basis. Participants are asked to submit 2 archival stained preparations from 2 distinct Mohs surgery biopsies, as designated on the accompanying delivery letter issued with each run.

***The first case requested being from any site, the second case from the specific site / tissue composition detailed on the delivery letter.**

For each case, 1 slide must demonstrate tumour and the 2nd must be a full-face cryostat section, usually with inked margins indicating orientation.



Haematoxylin and Eosin



Toluidine Blue

Transmission Electron Microscopy (TEM)

This scheme is aimed at Diagnostic Transmission Electron Microscopy (TEM) carried out in a number of specialist centres and departments. Renal pathology is by far the largest user of diagnostic electron microscopy services, however, in other areas such as muscle and nerve pathology TEM is also regarded as an important if not essential diagnostic tool.

No. of assessment runs: **Web Based**

6 distributions over a 12 month period

Digital Images assessed:

Selected / In-house Material *(all runs)*

Image 1	the lowest power image for that case
Image 2	the highest power image for that case
Image 3 & 4	2 representative images showing the diagnostic features from that case

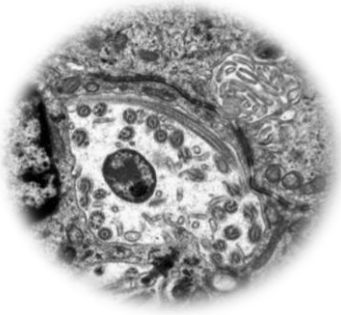
Specific Site / Tissue Composition*:

Renal
Nerve
Muscle

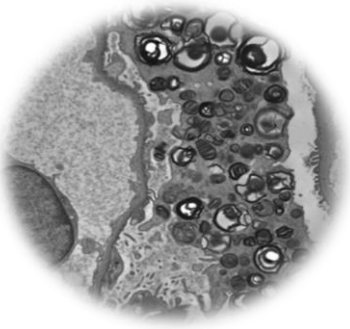
*If participants are unable to provide any of the 3 stated specimen types for either case, they are permitted to submit an alternative specimen type, but must state what the specimen type is and the reason for submitting it.

The TEM scheme utilises digital image submission to our website for assessment. Where a participant is unable to submit digital images, micrographs will be accepted.
Like other schemes, the TEM scheme works on a retrospective basis. Participants are asked to submit 2 archival stained preparations from 2 distinct TEM analysed biopsies.

Unlike other schemes, participation in the TEM scheme provides access to a **Knowledge and Competence Exercise** which can be completed as an organisation and individually as part of training, CPD and competency assessment for members of staff.



Cilia showing internal dynein



Fabry's disease

Direct Immunofluorescence (DIF) Pilot

This scheme is intended for use by clinical laboratories / organisations which may be either specialist departments or sections within general laboratories / organisations, who offer an immunofluorescence service.

No. of assessment runs: **Web Based**

2 distributions over a 9 month pilot period

Stains assessed:

Selected / In-house Material *(all runs)*	Specific Site/ Tissue Composition*
Haematoxylin and Eosin (H&E)	Skin
Toluidine Blue	Renal
2 Positive fluorescent markers	Other

Digital Images assessed:

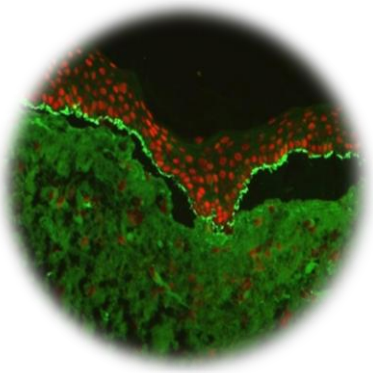
Selected / In-house Material *(all runs)*

Image 1	Haematoxylin and Eosin (H&E) /Toluidine Blue	
Image 2	Fluorescent marker A	the lowest power image for that case
Image 3	Fluorescent marker A	the highest power image for that case
Image 4	Fluorescent marker B	the lowest power image for that case
Image 5	Fluorescent marker B	the highest power image for that case

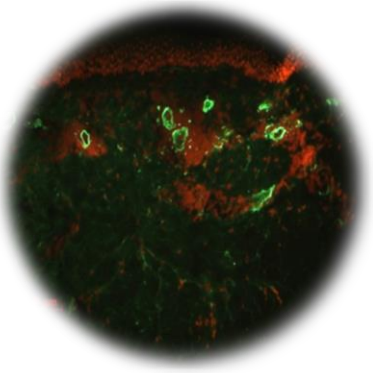
*Participants are able to provide any of the 3 stated specimen types for the requested case, as long as the images submitted show positive staining for each of the 2 selected fluorescent markers.

The DIF pilot scheme, like the TEM scheme, utilises digital image submission to our website for assessment. Where a participant is unable to submit digital images, micrographs will be accepted. Like other schemes, the DIF pilot scheme works on a retrospective basis.

The fluorescent markers required for submission are not specified by UK NEQAS CPT and participants must use their professional judgement to select appropriate markers and representative images for assessment.



Skin DIF: pemphigoid (IgG)



Skin DIF: vasculitis (C3).

Digital Interpretive Diagnostic Non Gynaecological Cytology Pilot

This scheme aims to promote quality and education for all involved in screening and reporting Diagnostic Non Gynaecological (Gyn) Cytology. It will be open to both medical and non-medical, as well as cytology trainees, providing good cytological examples to enable individual feedback and promote education within cytology.

No. of assessment runs:

2 distributions over a 12 month period

Web Based

Stains assessed

Selected / In-house Material *(all runs)*

Papanicolaou

Romanowsky

Specimen Types:

Serous Fluid

Head and Neck

Respiratory

Urine

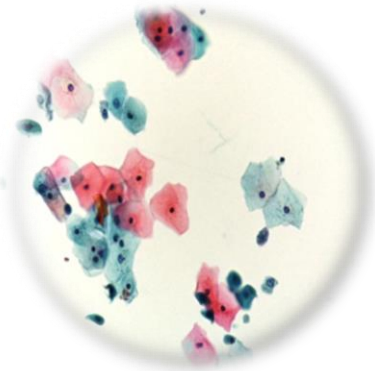
Each circulation comprises 14 stained Diagnostic Cytology slides: 12 scored cases (individual assessment) and 2 un-scored cases (education) will be used, from serous fluids, respiratory, head and neck, and urine cases.

This pilot scheme will solely use **digitised scanned cytology slides**, to allow ease of access, instant feedback and education.

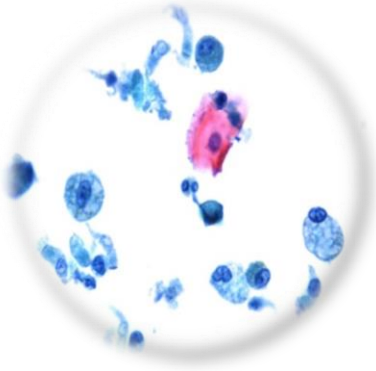
A preparation technique is not specified and the scheme will utilise any suitable technique to adequately demonstrate the staining method and its subsequent diagnosis e.g. direct smears, cytospin preparations, and liquid based methodologies.

For the pilot, participants will categorise using 'benign/malignant' diagnosis and can opt to give a specific diagnosis if they feel they can. As the pilot scheme achieves its aims, this scoring system will be developed further.

Participants will be scored a '1' for a correct initial diagnosis: '0' for an incorrect initial diagnosis. Further specific diagnoses will not be scored at this time, but will be collated for educational purposes.



Serous Fluid



Respiratory

Companion Schemes
Frozen Sections and Mega Blocks

These schemes are intended as “bolt-ons” to those participants who are already registered for the General Pathology (Routine Histopathology) EQA / proficiency testing scheme.

Both schemes are **Slide Based**.

No. of assessment runs:
6 distributions over a 12 month period

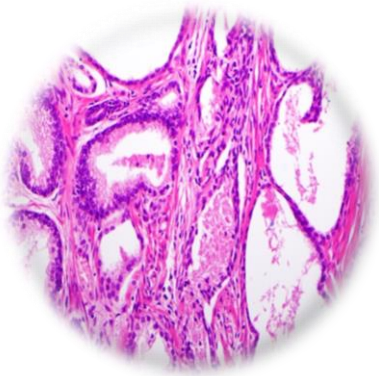
Stains assessed:
Selected / In-house Material *(all runs)*
Haematoxylin and Eosin (H&E)

Frozen Sections

The frozen section procedure is a pathological laboratory procedure to perform rapid microscopic analysis of a specimen, and is an essential diagnostic tool in many organisations. It is used most often in oncological surgery. The technical name for this procedure is ‘Cryosection’.

The principal use of the frozen section procedure is for the examination of tissue while surgery is taking place.

Participants are asked to submit 1 case of 1 slide for submission, from the date indicated on the delivery letter. The slide requested must be a true representation of that case and a true representation of the quality performed in that centre as part of their routine daily workload.



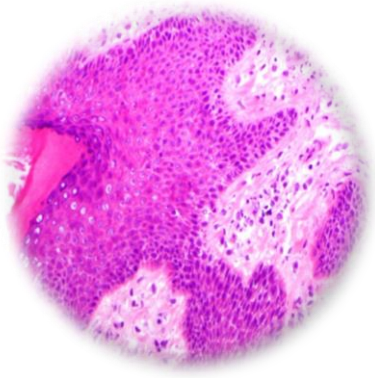
Frozen Section Haematoxylin and Eosin

Mega Blocks

The use of “super” sized tissue cassettes, which are the equivalent size to 4 of the standard tissue cassettes routinely employed within histological practices.

Super or “mega” cassette systems or “mega blocks”, with dimensions of approximately 75 x 52 x 17 mm, are designed for processing and embedding larger, thicker specimens. As such, this technique is also utilised with specialist laboratories such as Neuropathology.

Participants are asked to submit 1 case of 1 slide for submission, from the date indicated on the delivery letter. The slide requested must be a true representation of that case and a true representation of the quality performed in that centre as part of their routine daily workload.



Mega Block Haematoxylin and Eosin

Repertoire

A participant's repertoire is declared and confirmed upon subscription. This ensures UK NEQAS CPT assesses material that is part of a participant's repertoire and any non-submission does not count towards any performance monitoring.

Online Repertoire

Participants declare their repertoire at registration and confirm this at annual subscription. Participants are however, able to amend this during the course of the year.

The overriding principle is that when UK NEQAS CPT requests material that is not part of a participant's repertoire (i.e. not supported by a standard operating procedure), the non-submission will not count against them, for the purposes of performance monitoring.

Participants are reminded that it is their responsibility to:

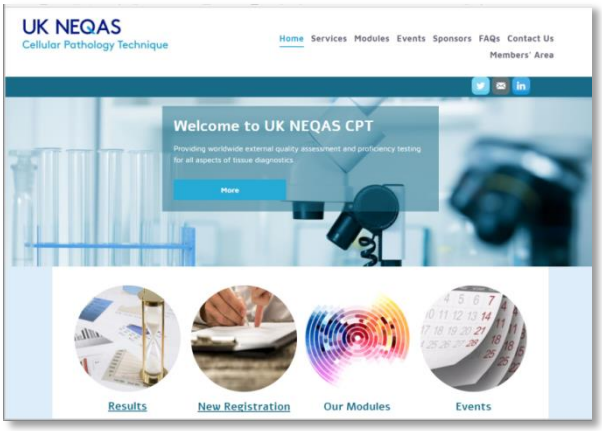
- **Update their own repertoire**
  Invalid repertoires will lead to a non-submission (0 score) and possible poor performance issues
- **Declare restricted repertoires**
  Non-declaration of this will lead to a non-submission (0 score) and possible poor performance issues
- A non-submission is a score of 0. This is not an indication of a fail (scoring guidelines are defined in the Assessment Criteria Handbooks for each scheme)
- **However**, participants who fail to submit a stain that is part of their declared repertoire will automatically be awarded a mark of 0, which **will** be considered a non-submission for performance monitoring purposes

Accessing Online Reports

Participants are able to set and amend their repertoire on the UK NEQAS CPT website **www.ukneqascpt.org.uk**
From the homepage, select the **Members Area** which will take you to the login page.

The login details consist of:

- **Lab Number** - 4 digit laboratory/organisation participation code that appears on all documents issued to you from UK NEQAS CPT e.g. 4633
- **Identity** - 4 digit random ID number, which is unique to the individual e.g. 7896
- **Password** - an alphanumeric series of at least six characters unique to the individual



Please do not disclose your login ID and password to non-staff members. No responsibility can be taken by UK NEQAS CPT for any misuse of the system, or breach of confidentiality, where this may have happened

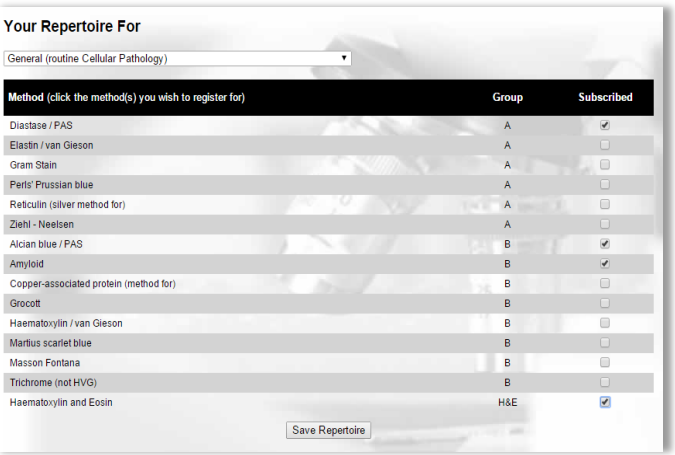
Selecting a Scheme

Use the drop down box to select a scheme. Select the relevant scheme results you wish to view/amend.

Amending your Repertoire

From this screen you will be able to select which staining methods you wish to be subscribed for. Once your repertoire is correct, select **Save Repertoire**.

Any amendments are immediately sent to our EQA Programme Management Office system and are linked directly to your record, making any amendments to your repertoire, where necessary.



Please Note: If you amend your repertoire online this will not be reflected in any run which has already been issued to participants and is awaiting assessment. This will be reflected in the *next* run in regards to any potential non-submissions or performance monitoring.

Declared Repertoire

Where it is the laboratory/organisation's policy to refer special stains to another department or laboratory/organisation, these stains should be included in the declared repertoire and the EQA / proficiency testing material referred to the relevant third party as if it were diagnostic material. UK NEQAS CPT requires no details of the commissioning arrangement.

Restricted Repertoire

Participants must declare restricted repertoires. This means that when UK NEQAS CPT requests a special stain that is not part of a participant's repertoire (i.e. not supported by a standard operating procedure), the non-submission, *or a low mark*, will not count against them for the purposes of performance monitoring.

Once registered, each department is responsible for reviewing and maintaining its repertoire, online (see Participant Responsibilities).

Submission Deadlines

UK NEQAS CPT encourages early submission. Our system records when your material was submitted and calculates the turn-around time in days before the submission deadline. For your information an email is also issued to you when your submission has been receipted by UK NEQAS CPT administrative staff.

Closing Date for Submission

Submitting material on time enables UK NEQAS CPT to evaluate your material and communicate results in a timely manner.

The closing / return date for submission is never less than four weeks after the date on which the results of the previous circulation are issued. Details of specific dates can be found on the UK NEQAS CPT website (see NEQMANFO030 Proficiency Testing Scheme Schedule).

- We appreciate delays may occur due to mail, courier and other postal issues which may be beyond the control of UK NEQAS CPT and its participants
- Any delays encountered by UK NEQAS CPT in distributing assessment material will be communicated to participants via email

Late Submission Procedure

The closing date determines the timing of each cycle for submission. The closing date for submission is clearly stated on the assessment run delivery letter.

In some instances, submissions received after this date may be accepted at the discretion of the Scheme Manager. This is providing the participant states a genuine reason for the late submission of material.

Submissions received after the closing date without explanation will be returned to the participant. Such submissions will be considered non-submissions for performance monitoring.

Late submissions are regularly audited and any frequent abusers are notified.

In some countries UK NEQAS CPT scheme participation is via a distributor, the distributor will therefore communicate deadlines to participants.

Appeals

Participants who are not satisfied with a score received at an assessment can re-submit the material to be reassessed. Any appeals are reassessed at the next scheduled assessment session.

Submission of Material for Appeal

The appeals procedure has been designed to maintain confidentiality. An appeals form can be downloaded from the UK NEQAS CPT website **www.ukneqascpt.org.uk**

Any appeal should be sent for the attention of the UK NEQAS CPT Administrator including:

- Resubmission of the original material
- Appeals Form with page 1 completed
- A copy of the original report for the original material
- One form must be completed per individual score for reassessment

All material and documents must be submitted before the deadline of the next run.

Assessment of Appeals

Assessment of appeals will be carried out by a set of assessors who are independent from the original submission, to eliminate any potential bias within the procedure.

Assessment will be carried out according to routine assessment protocol (see Assessment: Interpretation).

Appeal Report

Once assessed, the amended report will be available to view on the UK NEQAS CPT website www.ukneqascpt.org.uk (see Assessment Reports). All material is returned to participants via a UK NEQAS CPT Administrator.

At the Scheme Manager's discretion, any scoring amendments are fed back to the original assessor pairs for auditing and training purposes.

Falsification of Appeal Material

Material submitted as part of the appeal process must be the original material, in the original state in which it was submitted for assessment in the first instance. New material must not be submitted. **Any participant suspected to be in breach of the above, or suspected of collusion and falsification, will be suspended from UK NEQAS CPT pending investigation. Subscription to the UK NEQAS CPT scheme may be cancelled as a result.**

Complaints

UK NEQAS CPT aims to provide a fair and effective EQA / proficiency testing service to its participants.

Logging a Complaint

All complaints regarding any aspect of the service provided by UK NEQAS CPT should be directed to the Quality Manager at cellpathtech@uknegas.org.uk. The Quality Manager will then ensure that all complaints are passed to the relevant person within UK NEQAS CPT for investigation.

A Complaints Policy (NEQMANPO004), outlining the complaints process, can be found on the UK NEQAS CPT website **www.ukneqascpt.org.uk.**

Follow Up

Follow up to complaints are done so on an individual basis and the resulting outcome fed back to the individual participant, where appropriate.

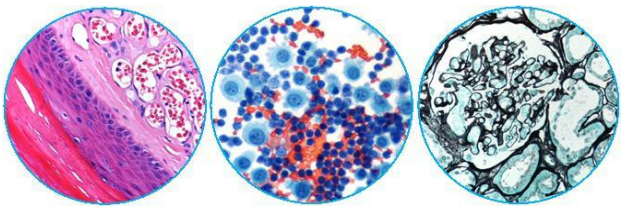
At all times during the complaints procedure, participant confidentiality will be maintained. Participants are requested to assist in this respect.

If the complaint cannot be resolved at this level, the Quality Manager/Scheme Manager will advise the participant to refer the complaint to either:

a) the chairperson of the UK NEQAS Steering Committee for Techniques in Cellular Pathology, if the complaint concerns operational aspects of UK NEQAS CPT, or

b) the chairperson of the National Quality Assurance Advisory Panel (NQAAP) for Histopathology and Cytopathology, if the complaint concerns performance of UK NEQAS CPT.

The chairperson of these two committees may choose to refer the matter to the UK NEQAS Executive or the Joint Working Group (JWG) on Quality Assurance respectively.



Contact Us

Registration, Subscription and Scheme Enquiries

Susan Mulinda	Tel: +44 (0)191 445 6553
Lauren Mulinda	Tel: +44 (0)191 445 2719
	Email: cpt@ukneqas.org.uk

Assessment Run Submission and Workshop Enquiries

Nathan Bowe	Tel: +44 (0) 191 445 8181
Karen Shakespeare	Tel: +44 (0) 191 445 2747
	Email: cellpathtech@ukneqas.org.uk

Please note telephone enquiries are only available Monday to Friday 09:00 to 17:00 GMT

Postal Address:
UK NEQAS CPT, The Pathology Centre, Queen Elizabeth Hospital, Gateshead, Tyne and Wear, NE9 6SX, United Kingdom.

Website Address:
www.ukneqascpt.org.uk

In some countries, registration to UK NEQAS CPT is via a distributor and communication regarding subscription etc. should be via this route

For security and confidentiality reasons, anyone contacting UK NEQAS CPT, by email, telephone or in writing, ***must quote their unique participant number***. This will enable UK NEQAS CPT to deal with queries more effectively and efficiently. Responses to any queries directed towards UK NEQAS CPT without a participant number may be seriously delayed as a result. Please see sections on Confidentiality for further information.

If the correspondent is not a registered contact on our database, permission MUST BE RECEIVED from the UK NEQAS CPT listed contact before participant information can be amended or given.

For enquiries requiring a change of contact details or information request on a participation number within the UK NEQAS CPT scheme, strict guidelines must be followed to ensure that an appropriate person is making this request.

Key Personnel

Scheme Management

Scheme Organiser
Rob Hughes
Email: cpt@ukneqas.org.uk

Scheme Manager
Chantell Hodgson
Email: chantell.hodgson@nhs.net

Quality Manager
Julie Coaker
Email: julie.coaker@nhs.net

Administrative Manager
Susan Mulinda
Email: susan.mulinda@nhs.net

Administration Team

Administrative Coordinator
Lauren Mulinda
Email: lauren.mulinda@nhs.net

Administrative Support
Nathan Bowe
Karen Shakespeare

Scheme Coordinators

General Pathology / Routine Histology Co-ordinator
Peter Mooney

Neuropathology Co-ordinator
Richard Mathias

Renal Biopsy Pathology Co-ordinator
Jane Pizer

Muscle Histochemistry Co-ordinator
Scott Maxwell

Diagnostic Non Gyn Cytology Co-ordinator
Anna Patterson

Bone Marrow Trephine Co-ordinator
Dharmesh Mistry

Mohs Procedure Co-ordinator
Dr Guy Orchard

Transmission Electron Microscopy (TEM) Co-ordinator
Tracey de Haro

Direct Immunofluorescence (DIF) Co-ordinator
John Mee

Digital Interpretive Diagnostic Non Gynaecological Cytology Co-ordinator
Dr Paul Cross

Companion Scheme Co-ordinator
Scott Gable

All of the above scheme coordinators can be contacted via email at cpt@ukneqas.org.uk

Information Governance

Information Governance requires EQA / proficiency testing providers to handle **ALL** organisational information in a confidential manner, according to legal and best practice standards. UK NEQAS CPT has a responsibility to keep participant information safe, secure and confidential.

Key Personnel

UK NEQAS CPT require four main points of contact within each laboratory / organisation:

Main Contact	This is designated as the Clinical Lead within a department, or the Consultant Pathologist departmental head.
Technical Head	The Technical Lead with managerial responsibility for the registered department. This may also be the Laboratory/Organisation Manager.
Day-to-Day	The individual within a department who has section or day-to-day responsibility for the laboratory / organisation workings.
Finance/Supplies	Contact responsible for the payment of subscription fees.

Additional personnel can also be added to a participant record as "Quality Manager" or "Web Member", to enable other members of staff to receive UK NEQAS CPT communications.

Organisational information should only be shared with others who are authorised to see it and need to know it in order to carry out their role.

UK NEQAS CPT must be informed immediately of any amendments to key personnel at a registered centre, so that their login privileges can be removed and new login ID and password details issued. Any user changing their email address must notify UK NEQAS CPT immediately.

Information Governance is the responsibility of both UK NEQAS CPT and the Participant.

UK NEQAS CPT accepts no responsibility for any non-notification of assessment run distribution or performance issues where incorrect or old participant details are supplied.

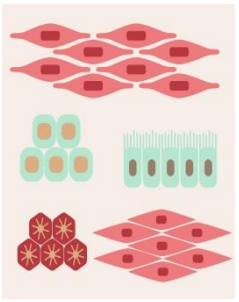
Performance Notifications and Assessment Sessions

- Both the **Main Contact** and **Technical Head** are informed in writing of any poor performance issues (see Performance Monitoring). If a response is not received in the designated time, the technical head and day-to-day contact will be issued a reminder.
- During assessment sessions, or for the use of data in educational purposes, a participant's identity is not disclosed.

Ethical Considerations

UK NEQAS CPT is governed principally by the guidelines and standards issued by the Human Tissue Act, ISO/IEC 17043:2010 (E) and RCPath/IBMS for the supply of human tissue.

UK NEQAS CPT Governance



- Material commissioned for special stains is “left over from investigations”
- No more tissue was removed from the patient in excess of that required for ordinary clinical care and the EQA/proficiency testing use of the tissue does not compromise routine diagnostic assessment
- Such tissue is used for the purpose of education and the audit of quality of care through “implementation of quality control and assurance programmes”
- All tissue is anonymised
- UK NEQAS CPT operates on a not-for-profit basis
- Transactions between UK NEQAS CPT and suppliers of tissue do take place
- Only “reasonable handling charges” are involved and the tissue itself is neither bought nor sold
- The preparation and distribution of tissue is carried out in accordance with current Health and Safety legislation

The first four points above constitute an exemption from the need to seek advice from Local Research Ethics Committees.

UK NEQAS CPT Material

- The provision of material for UK NEQAS CPT EQA/proficiency testing is subcontracted to external laboratories/organisations
- All laboratories/organisations providing tissue for UK NEQAS CPT must be ISO accredited or equivalent and provide written declaration confirming that they are operating to the above guidelines
- Provided tissue is validated, following strict guidelines, at source and again by UK NEQAS CPT, prior to distribution
- The criteria applied by UK NEQAS CPT EQA / Proficiency Testing Scheme for tissue procurement, is set up to meet the demands laid down by HTA for the use of human tissue
- Should any distributed tissue be identified as being compromised, material will be recalled and the associated run suspended
- Where it is not possible to source suitable human tissue, then it may be possible that animal tissue can be used as an alternative
- Animal tissue provided for UK NEQAS CPT activity will be validated by parallel testing alongside a previously validated human tissue control for the same target / attribute, in order to assure suitability of the material
- Both human and animal tissues utilised for UK NEQAS CPT EQA / Proficiency Testing schemes have been stained and tested against the appropriate UK NEQAS CPT assessment criteria, to ensure that they contain the appropriate amount of suitable target material for effective demonstration and assessment

Participant Responsibilities

By subscribing to UK NEQAS CPT the participant agrees to follow the guidelines in this manual as detailed in the table below.

Inform and Update	• **of any change of personnel or updates to contact details** - without valid contact details, participants may not receive essential information • **participant repertoire** - invalid repertoires may lead to a non-submission (0 score) and possible performance monitoring • **declare restricted repertoires –** non-declaration may lead to a non-submission (0 score) and possible performance monitoring
Ensure	• **the guidelines covering selection of material are followed** • **EQA samples are treated in the same way as clinical samples** • **submissions are securely packaged to prevent breakages** - which may prevent assessment • **submissions are returned in the barcode labelled boxes where appropriate** - to enable identification on receipt • **submissions are clearly labelled** - regarding appropriate requested details • **prompt payment of subscription fees** - participation will be suspended if payment is not received following invoicing
Adhere to	• **submission deadlines** - late submissions will be logged and monitored by UK NEQAS CPT • **staining requirements** - for both the UK NEQAS CPT supplied sections and in-house submissions (slide based schemes) • **specific requirements for specialist schemes** - as instructed on the delivery letter • **requests issued, including submission of annual subscriptions and poor performance issues** - delays in response may result in avoidable communication issues and/or your participation being suspended
Data and Information	• **access online assessment reports and associated documentation** • **handle and interpret own results** • **respect the confidentiality of proficiency testing when corresponding with other centres** • **always quote your unique participant number whenever contacting UK NEQAS CPT**

UK NEQAS
Cellular Pathology Technique

Providing worldwide external quality assessment and proficiency testing for all aspects of tissue diagnostics

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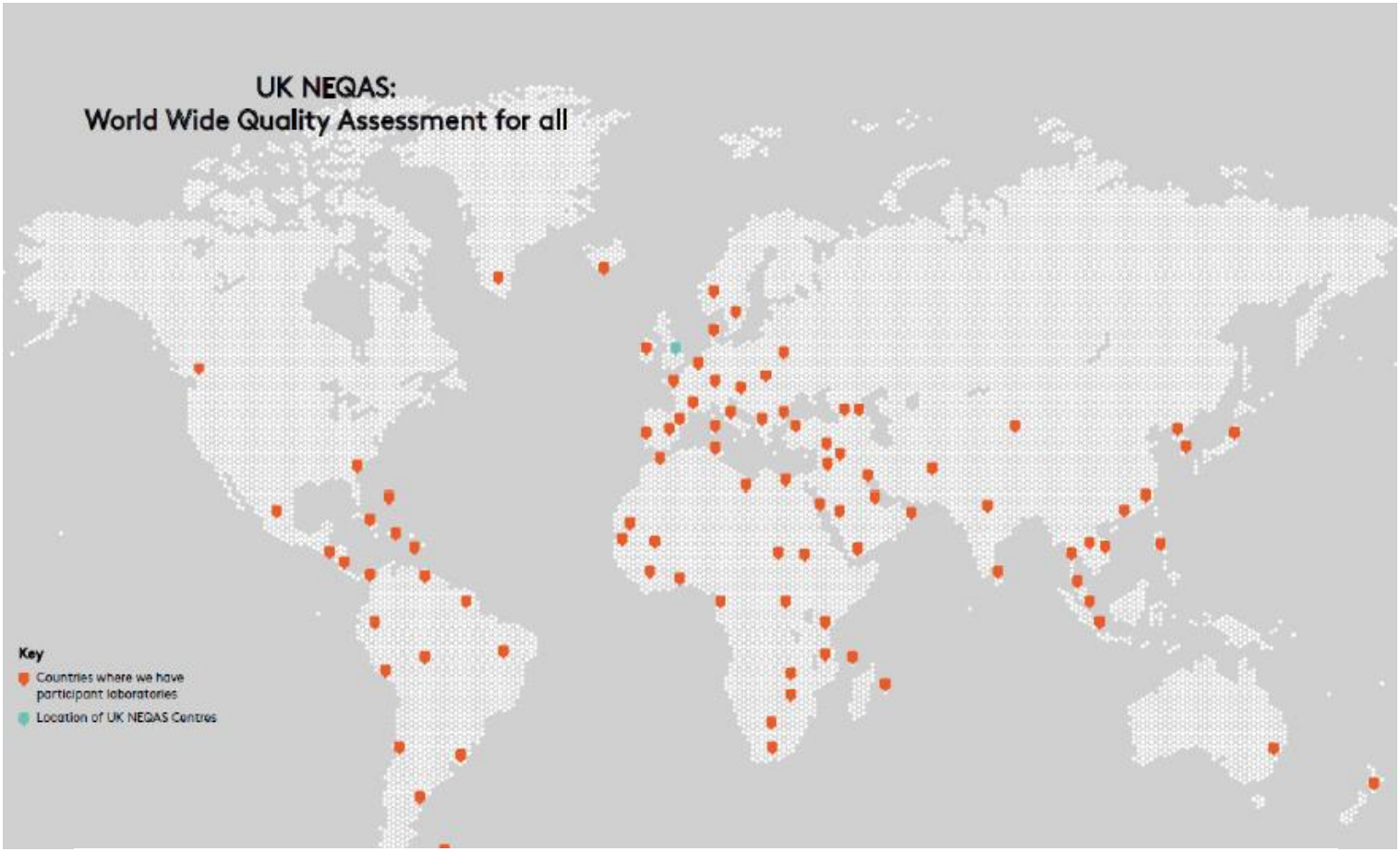

UK NEQAS Cellular Pathology Technique |www.ukneqascpt.org.uk |Email: cpt@ukneqas.org.uk |The Pathology Centre, Queen Elizabeth Hospital, Sheriff Hill, Gateshead, Tyne and Wear NE9 6SX |Tel: +44 (0)191 445 2747