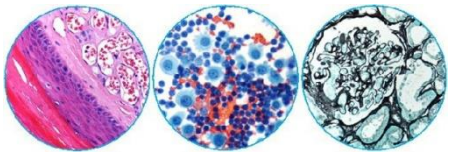
UK NEQAS

Cellular Pathology Technique



Participant Manual

2022 – 23 (Edition 22)

Committed to Quality

Committed to you

Excelling in 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 expert, highly qualified assessors who are specialists in their field - are graded, anonymously compared and peer reviewed.

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

This document is designed to act as a **User Guide**, together with dedicated Instructions for Participation and Assessment Criteria Handbooks for each EQA Scheme, alongside assessment run reports and other documentation or literature you may be sent.

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

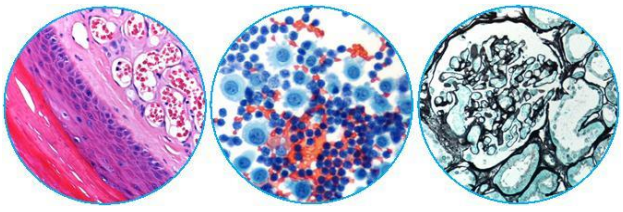
Updated versions will be issued annually following subscription and any subsequent updates will be available to download from the UK NEQAS CPT website. All participants must make sure they have the most recent edition and that all other editions are destroyed or archived, so that users are aware of the most up to date information.

This is a necessary part of the document control procedure of UK NEQAS CPT and is a requirement of ISO 17043 standards.

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

www.ukneqascpt.org.uk

Reference ISO 17043 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 in auditing their performance
- Sharing of best practice to improve procedures and quality within participating organisations
- Fully interactive website including online incident reporting, full scheme library of reference images and best practice methodologies
- Direct access to troubleshooting expertise, helping participants proactively mitigate issues and support 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, and assist in quality improvement
- Reports issued within 48 hours of assessment for efficient feedback and quality assurance

Education

- Continuing Professional Development (CPD) of staff within participating organisations including annual participant meetings and events, scientific meetings, seminars, educational webinars/workshops and e-learning
- Regular UK NEQAS CPT newsletters, troubleshooting, 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 **United Kingdom Accreditation Service** (UKAS) accredited programme

UK NEQAS CPT is UKAS accredited proficiency testing provider 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

UK NEQAS CPT offers bi-monthly distributions in the following areas;

Slide Based Schemes

- Tissue Diagnostics
- Specialist Techniques
- Neuropathology
- Renal Biopsy Pathology
- Muscle Histochemistry
- Diagnostic Cytopathology
- Bone Marrow Trephine biopsies (BMT)
- Mohs' Procedure
- Diagnostic Cytopathology Cell Block (Pilot)

Web Based Schemes

- Transmission Electron Microscopy (TEM)
- Direct Immunofluorescence (DIF)
- Digital Pathology (Pilot)

Digital Interpretive Web Based Schemes

- Digital Interpretive Diagnostic Cytopathology*
- Digital Diagnostic Ultrastructural Pathology (Pilot)

Companion Schemes

- Frozen Sections
- Mega Blocks

*** biannual circulations in conjunction with iLabXCell**

Accountability

- The ISO 15189 standard "5.6.3 Interlaboratory Comparisons" provides guidance directly related to EQA/proficiency testing
- The standards above use the terms "approved EQA schemes", "Interlaboratory Comparison programmes" and "external quality assessment programme or proficiency testing programme"
- The above terms are defined as those that are accredited according to ISO 17043 standards
- **UK NEQAS CPT is UKAS accredited proficiency testing provider 8268**

Performance Monitoring and Confidentiality

- Participation in UK NEQAS CPT is governed principally by confidentiality and Information Governance guidelines and standards ISO 17043, Information Governance (IG) and General Data Protection Regulation (GDPR)
- This includes information provided to the Quality Assurance in Pathology Committee (QAPC), [formerly the Joint Working Group (JWG) on Quality Assurance], and/or NQAAP

Specialist Assessment and Advice

- Participants have access to Specialist Advisory Panels for all EQA schemes
- Each panel consists of expert peer assessor who are specialists in their field of Cellular Pathology
- All UK NEQAS CPT assessors operate as Specialist Biomedical Scientists, Advanced Practitioners, Clinical Scientists and/or Consultant Pathologists
- Each assessor undergoes structured training and competency assessment prior to appointment and during each assessment session, following strict IG guidelines. This ensures professional and ethical conduct of the EQA schemes and expert peer assessors
- Each scheme has a Specialist Scheme Coordinator who is responsible for the development of the scheme and its team and 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 our service to participants, we partner with commercial organisations and other institutions via “Scheme Sponsorship”
- UK NEQAS CPT is an independent organisation, and any sponsorship has no influence on methods, results or reports
- The presence of a company’s advert on our website or documentation does not constitute an endorsement by UK NEQAS CPT of its products or services

Assessment Reports

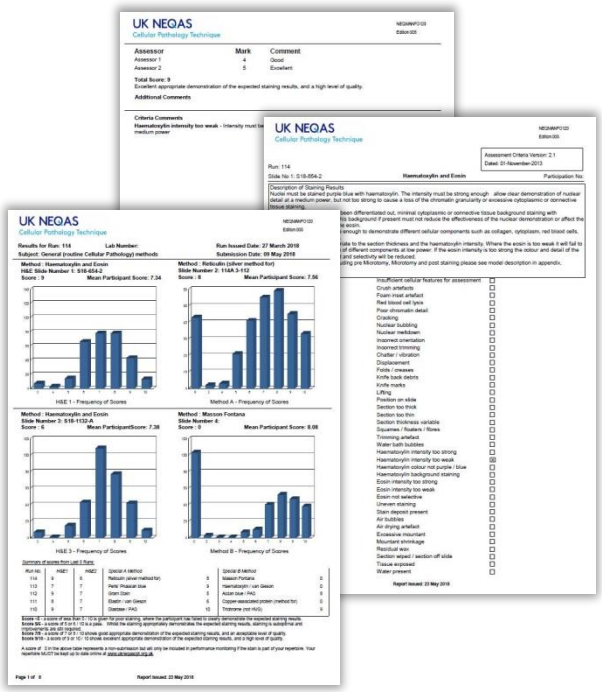
Assessment result reports are available online and our results package shows accumulated historical activity that highlights improvement or decreases in quality

Participant Report

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

Individual reports following each assessment include:

- The individual assessors' scores out of 5, and 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 assessment run and the mean participant score for the submissions for that assessment run
- A summary of scores from the last 5 assessment runs

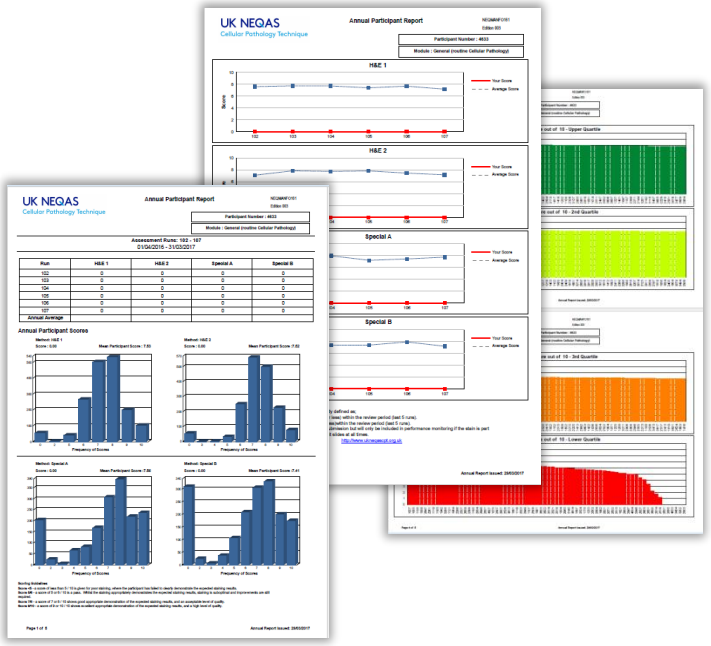


Before distribution of reports all participant data is anonymised except for individual participant numbers. Participant data remains confidential between UK NEQAS CPT and the participating centre, except for occasions of underperformance where NQAAP need to be notified (See Performance Monitoring).

- 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



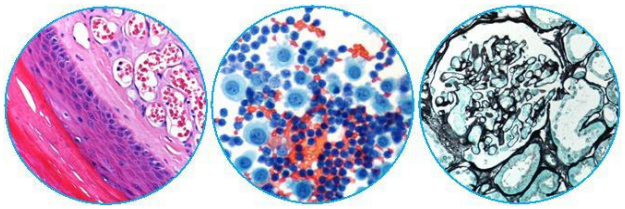
Many UK NEQAS CPT Schemes also include a generic image and best method report, in additional to a Participants' individual report (See Specialist Schemes).

Publication of UK NEQAS CPT Reports

- Participant performance data and evidence of appropriate EQA/proficiency testing participation can be used for a participants 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

- UK NEQAS CPT reports/performance data however, **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



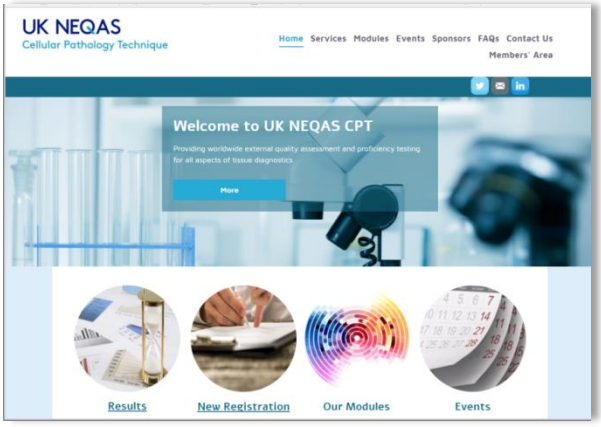
Online Reports

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

Accessing Online Reports

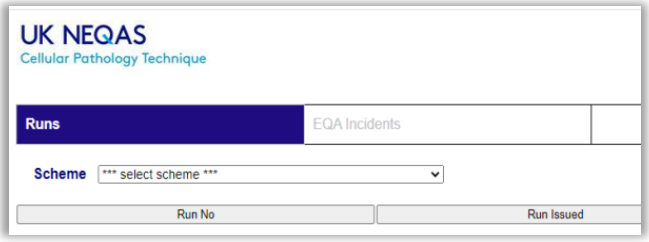
Online reports are available from the UK NEQAS CPT website **www.ukneqascpt.org.uk** homepage. Click the **Results** button which will take you to the login page. The login details consist of:

- **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

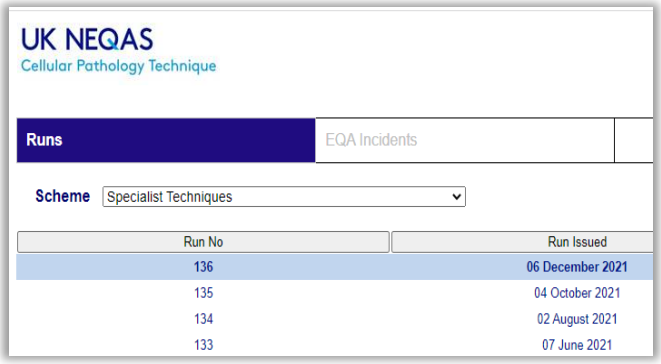


Use the drop down box to select a scheme. Select the relevant scheme results you wish to view

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

Selecting an Assessment Run

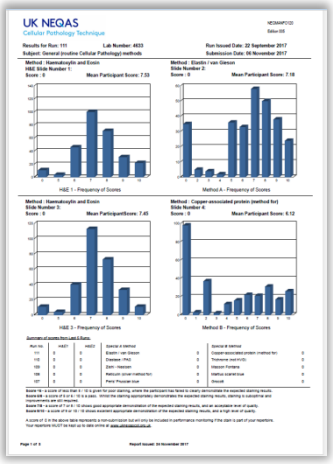
Once the relevant scheme has been selected, double click on the required assessment run to automatically open the report. This will appear as a PDF which you will be able to download or print.



Run Reports

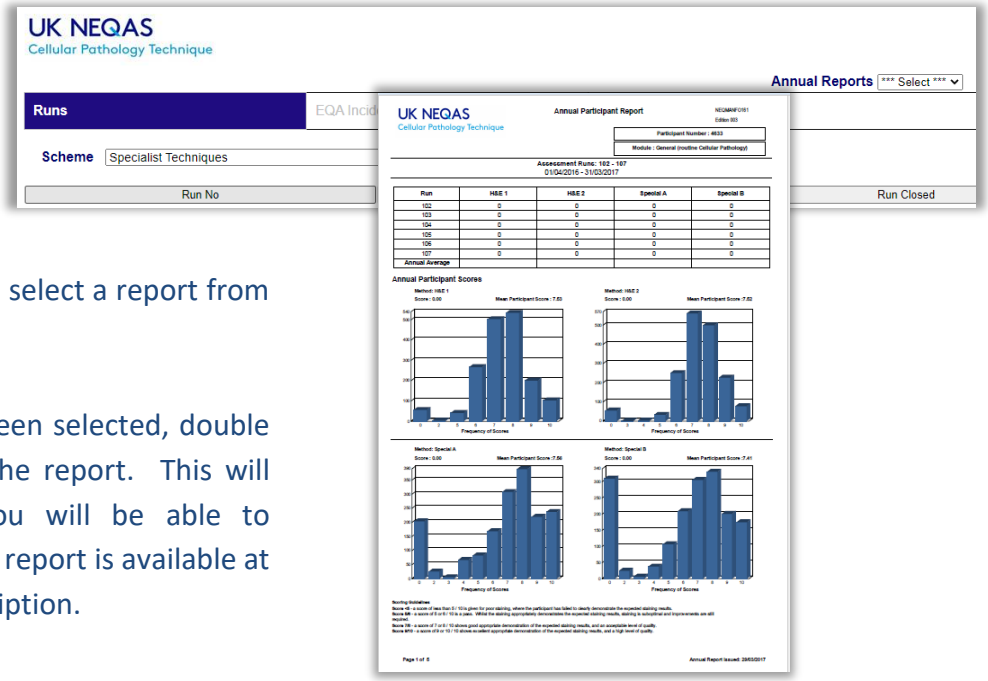
Individual reports following each assessment show:

- Frequency charts of submitted slide scores, illustrating the distribution of participant scores for each assessment run and the mean participant score for the submitted material
- A summary of your scores from the last 5 assessment runs
- The individual assessors' 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 assessment 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 Certificate

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

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

Receive your unique Participant Number along with an ID and Password

Receive assessment run instructions via post/email

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

UK NEQAS
Cellular Pathology Technique

Unique world leader in Cellular Pathology EQA

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

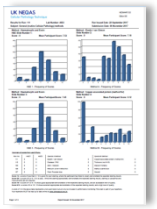
Remember to make note of the return date to avoid late submissions

Submitted material is assessed according to designated criteria

Material is assessed by specialist experts in the field of cellular pathology

Access Reports online via UK NEQAS CPT website

Look out for your email notification when these are made available



Assessment: Material

All participants are strongly recommended to assemble 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 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 Schemes are designed to assess how you test patient material as part of your routine daily procedures, from beginning to the end of the complete process.

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 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 your written procedure. Please use your professional judgement

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

You may substitute the first suitable material after the requested date if the selected case:

- is not an H&E (Tissue Diagnostics and Neuropathology Schemes only)
- consists of minimal or acellular material (see scheme-specific Assessment 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 post 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 found to be compromised, material will be recalled and the associated assessment run suspended (see Ethical Considerations)

Assessment: Submissions

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

Participant Submissions

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

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

UK NEQAS CPT schemes are intended to be educational in nature - to enable the participant laboratory / organisation to improve quality of their patient testing, if problems are identified

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

For those participants submitting physical material they are asked not to submit multiple submissions for selection by UK NEQAS CPT

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

Submission Receipt

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

Submission Return

Postage and Packaging

Run assessment distributions are currently sent Royal Mail tracked First Class Recorded to all destinations with the exception of the EU. **All EU packages are sent via courier service**

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, courier services and international postage regulations, to be environmentally friendly and to speed handling

Optional Courier service

If you would prefer your assessment run shipments to be sent via courier in the UK or overseas we can offer this service at an additional cost

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

Assessment: Interpretation

UK NEQAS CPT submissions are assessed by an expert team of biomedical scientists, advanced practitioners, 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 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, which are then assessed by a pair of experts in the field of Cellular Pathology techniques.

- Anonymisation of participants' 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 participants' submissions. Each assessor gives a mark out of 5 based on the criteria for a given method, giving a total score for the submitted material out of 10

Scoring Guidance

Individual Assessor (out of 5)

0 - Non Submission

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

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

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

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

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

Total Score (out of 10)

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

Score 5/6
A score of 5 or 6/10 is a pass. Whilst demonstration is appropriate the expected results are 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 pair 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 also be passed for further assessing. If there is a discrepancy of pass/fail between the assessing pair, the submission will be passed for further assessing.

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

Results

Following assessment, results and criteria feedback are uploaded to the website. Participants are issued an email to inform them when the results are available, and participants access their results via the UK NEQAS CPT website. 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 for the next assessment run where required

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 EQA/proficiency testing scheme has a separate Assessment Criteria Handbook, which contains a list of scheme specific 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**. The format of the Assessment Criteria Handbooks is very similar to that used by the assessors themselves when assessing material at run assessments

Instructions for Participation Handbooks are also available to ensure optimal and effective participation in each of our specialist schemes.

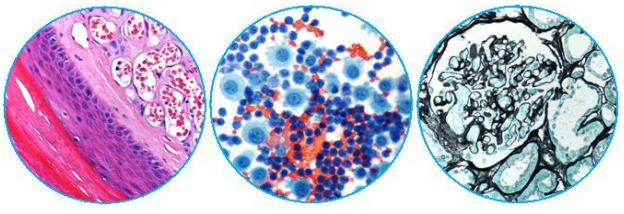
Annual Report

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

One of the key purposes of UK NEQAS CPT is to provide data to allow participants to review their practice 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 UKAS to monitor the performance of all clinical UK participants. UK NEQAS CPT also contacts all non-clinical and overseas participants who do fall in to performance monitoring, to offer assistance and advice

Any participant who falls into performance monitoring, receives notification via email. This is issued by UK NEQAS CPT to the Day to Day, Technical Head and Clinical Head contacts, to inform them that under performance has been identified.

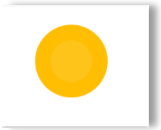
A root cause analysis form (Performance Monitoring Action Form) is made available on the UK NEQAS CPT website, **www.ukneqascpt.org.uk**, as part of on line incident reporting.

This MUST be completed and submitted by the participant online as response to their notification.

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

NQAAP state that submission rates should be 100% for all UK clinical laboratories/organisations

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.

For TEM scheme only *6 scores of 2/5 (4/10) or lower over 5 assessment runs = Amber.*

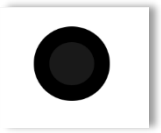
Issues with performance managed locally by UK NEQAS CPT

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.

For TEM scheme only *10 scores of 2/5 (4/10) or lower over 5 assessment runs = Red.*

Persistent /unresolved performance issues 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 performance issues, then NQAAP will refer the participants to the Joint Working Group (JWG).

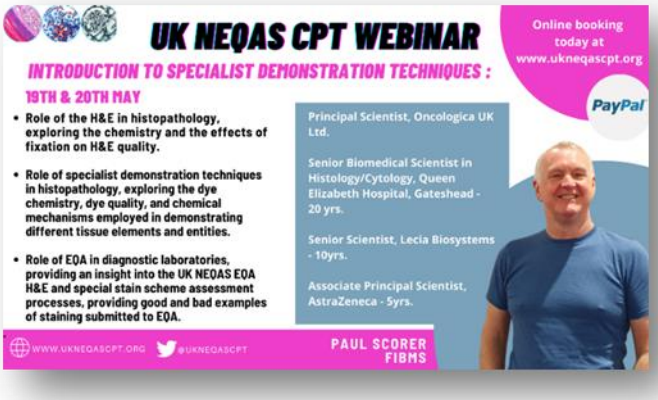
Persistent /unresolved performance issues may be referred by NQAAP to QAPC (UK Clinical Laboratories)

Education & Development

Participation in UK NEQAS CPT includes access to a range of educational activities, to support in-house training and Continuing Professional Development (CPD), to enable quality improvement in Cellular Pathology Techniques

Webinars and Workshops

UK NEQAS CPT deliver educational webinars and workshops featuring theory, practical knowledge and interpretive components designed to cover a range of methodologies and diagnostic applications of current importance. Face to face education, when available, also offers the chance to participate in "wet workshops" and lead case discussions



Educational webinars and 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. These are led by experienced, internationally recognised biomedical scientists, clinical scientists, advanced practitioners and consultant pathologists, who are experts in their chosen specialism.

Webinars are held via Zoom to allow the full interactive experience, and face to face workshops are held in conjunction with Universities and Specialist Centres. UK NEQAS CPT seek sponsorship for these events to minimise the cost to participants.

Details of educational workshops and webinars are circulated to participants via our social media platforms, email, are advertised in our Newsletter and are on the UK NEQAS CPT website **www.ukneqascpt.org.uk**

Newsletter and Reports

UK NEQAS CPT Newsletters are produced and issued regularly throughout the year detailing changes and developments within UK NEQAS CPT and offering expert advice. As well as scheme updates and news and events the newsletter includes helpful technical hints and tips, plus articles and insight from participants and UK NEQAS CPT personnel

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

Social Media Platforms

To continue our commitment to education and training, "CPT Cast" is available on Twitter, Instagram and LinkedIn, consisting of technical, and interpretive posts, as well as reminders about Continuous Quality Improvement to reinforce; Quality Matters #ukneqascptqualitymatters

Follow UK NEQAS CPT for scheme updates, interactive pathology posts, quality quotes and competitions

@ukneqascpt

@ukneqascpt

UK NEQAS CPT

E Learning

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

Meetings and Events

The UK NEQAS CPT Participant Meetings offers the opportunity to update delegates about the latest developments, techniques and innovations from our EQA and proficiency testing network.
The events highlight the achievements in Cellular Pathology Techniques from UK NEQAS CPT and key note speakers, with the opportunity for interactive and Q&A sessions for specialist areas

In addition the meetings provide ample opportunity to network with Cellular Pathology colleagues from UK and overseas - providing participants with an opportunity to discuss common issues and concerns with other participants, experts in the field of Cellular Pathology and UK NEQAS CPT 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 our 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 our website and the feedback is included as part of the meetings and seminar programme

Methodology and Reagent Data

High scoring participant's data relating to submitted material is utilised to provide **Best Method Documentation.**

Participants can also access images from the **Image Gallery**. 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 where possible, showing *good*, *bad* and *indifferent* examples

Other website features for Participants

- Events details and information
- Articles and Publications
- Essential Documentation
- E-learning
- Online Incident Reporting

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

Evaluation Service

UK NEQAS CPT offers an **Evaluation Service** for registered participants. This allows participating laboratories to submit material for evaluation that is not part of routine run assessments. This is helpful for those having issues with staining, evaluating new methodologies, or externally validating methods outside of the UK NEQAS CPT repertoire. Participants receive an individual report from UK NEQAS CPT, which can be used towards in-house verification/validation under ISO accreditation

As part of annual subscription participants are able to submit, **free of charge, up to 6 individual submissions per year**, after which there is an additional charge per individual submission. There is no limit to the amount of submissions a participant can submit but they must reflect the UK NEQAS CPT scheme they are subscribed to. More information is available on our website at **www.ukneqascpt.org.uk**

Specialist Advisory Service

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 via telephone or by email

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

Specialist Schemes

UK NEQAS CPT offers a wide range of Slide, and Web Based, Digital and Interpretive and Extension to Scope (Companion) 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

- Tissue Diagnostics
- Specialist Techniques
- Neuropathology
- Renal Biopsy Pathology
- Muscle Histochemistry
- Diagnostic Cytopathology
- Bone Marrow Trephine biopsies (BMT)
- Mohs' Procedure
- Diagnostic Cytopathology Cell Block (Pilot)

Web Based Schemes

- Transmission Electron Microscopy (TEM)
- Direct Immunofluorescence (DIF)
- Digital Pathology (Pilot)

Digital Interpretive Web Based Schemes

- Digital Interpretive Diagnostic Cytopathology*
- Digital Diagnostic Ultrastructural Pathology (Pilot)

Companion Schemes

- Frozen Sections
- Mega Blocks

*** biannual circulations in conjunction with iLabXCell**

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 sufficient quantity of material for laboratories/organisations to adequately demonstrate the target. Details for each of the 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 - Assessment Criteria Handbooks)

Slide Based

Tissue Diagnostic Scheme - Participants are asked to submit 1 paraffin embedded tissue block and its corresponding H&E slide, **per asset**, as part of each assessment run. Generic Best Method and Images Reports are also provided following participant Data Input on submission
Specialist Schemes - Participants are asked to submit requested slides at each assessment run

Web Based

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

Tissue Diagnostics

No. of assessment runs:

6 distributions over a 12 month period

Stains assessed:

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

Paraffin wax embedded tissue block

Haematoxylin and Eosin (H&E)

Slide and Block Based

An individualised report is provided on line after each assessment. Generic Best Method and Image Reports are also provided

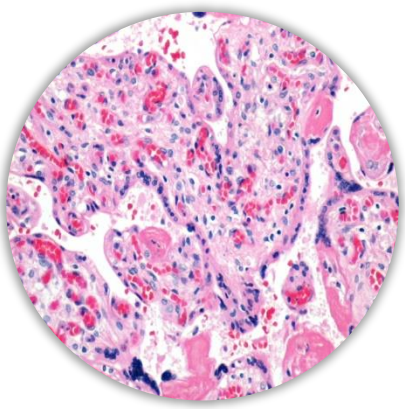
Paraffin wax embedded tissue is employed throughout a number of specialist and routine pathology centres and departments as the basis for providing tissue sections for diagnosis. Whilst the concept is routinely employed within histological practices, there are widely varying fixation and processing and methodologies across organisations, which can affect both the cutting and staining of tissue sections

This scheme allows the EQA of the paraffin wax embedded tissue cassettes in association with the corresponding H&E stained section, to provide excellent concordance and more informed assessment and feedback

Participants are asked to submit 1 block together with the corresponding H&E stained section from the date indicated on the delivery letter, **per asset**.
The basic scheme allows for the registration of 2 assets – additional assets can be added as part of the subscription process to cover a laboratories / organisations full range of automation / schedules

The block and associated slide should be a true representation of that case, and a true representation of the quality performed in that centre as part of their routinely daily workload

Paraffin Wax Embedded Tissue Block



Haematoxylin and Eosin

Specialist Techniques

No. of assessment runs:

6 distributions over a 12 month period

Slide Based

An individualised report is provided on line after each assessment

Stains assessed:

Distributed Material

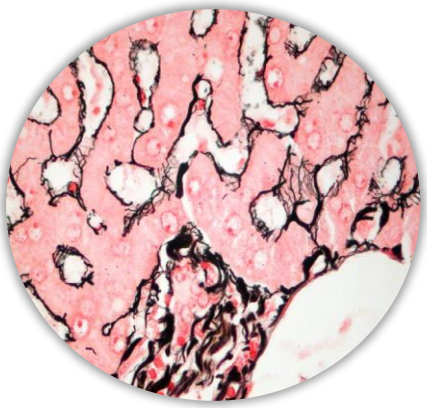
Special A	Special B
Diastase PAS	Alcian Blue PAS
Elastin Van Gieson	Amyloid (method for)
Gram	Grocott
Perls' Prussian blue	Haematoxylin Van Gieson
Reticulin (silver method for)	Masson Fontana
Ziehl Neelsen	Martius Scarlet Blue (MSB)
	Copper Associated Protein (method for)
	Trichrome

This scheme assesses special stains through the distribution of known target material, for 2 designated specialist stained sections on a rotational basis from the list above

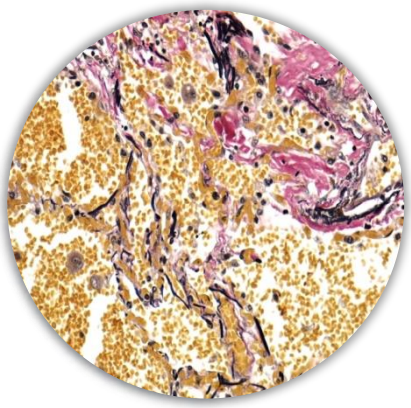
Special stains A & B are designated on the accompanying delivery letter issued with each assessment run
Two pairs of unstained sections are provided to each participant for staining by the special stain methods directed on the accompanying delivery letter, with one of each to be submitted for assessment

If a method is not specified, the laboratory / organisation is free to use any suitable technique to demonstrate the target. Intermittently unstained sections are provided to each participant for staining by H&E, to allow assessment of participants staining only

UK NEQAS CPT also offers an **Evaluation Service** for registered Participants; allowing participating laboratories to submit slides for evaluation that are not part of the run assessments (see Evaluation Service)



Reticulin (silver method for)



Haematoxylin Van Gieson

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:

6 distributions over a 12 month period

Slide Based

An individualised report is provided on line after each assessment

Stains assessed:

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

Haematoxylin and Eosin (H&E)

Distributed Material

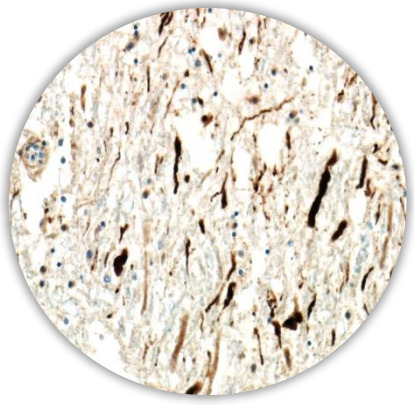
Special A	Special B
Diastase PAS	Axonal Swelling (method for)
Elastin Van Gieson	Glial fibres (method for)
Gram	Myelin (method for)
Perls' Prussian blue	Neurofibrillary tangles
Reticulin (silver method for)	Nissl substance
Ziehl Neelsen	Senile plaques (method for)

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

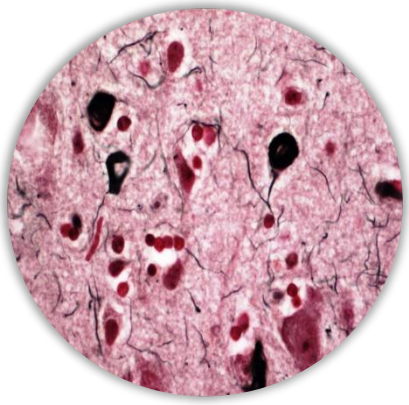
Special stains A & B are designated on the accompanying delivery letter issued with each assessment run

Stain A comprises routine cellular pathology 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



Axonal Swelling (method for)



Neurofibrillary tangles

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:

6 distributions over a 12 month period

Slide Based

An individualised report is provided on line after each assessment

Stains assessed:

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

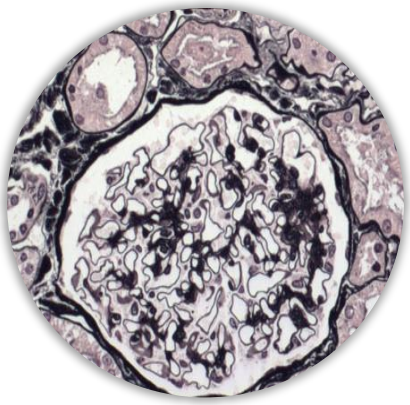
Haematoxylin and Eosin (H&E)
Methenamine silver
Periodic Acid Schiff
Elastin Van Gieson
Masson Trichrome

The renal pathology scheme assesses surgical renal biopsies using 5 routine renal staining methods

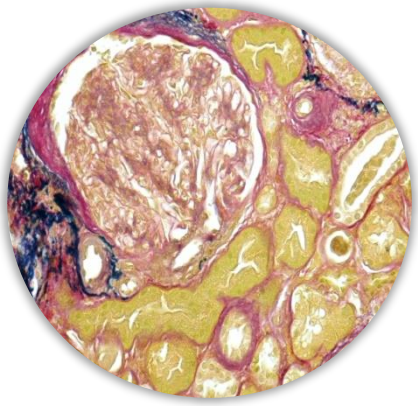
The scheme works on a retrospective basis. Participants are asked to submit diagnostic slides from their archive containing material from a suitable native renal biopsy, which has been recently processed in the laboratory organisation

Participants should 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



EVG

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:

6 distributions over a 12 month period

Slide Based

An individualised report is provided on line after each assessment

Stains assessed:

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

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

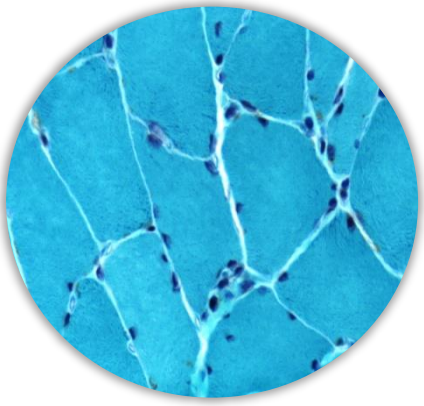
***Additional "Rotational" Stain**

(designated on delivery letter issued with each run)

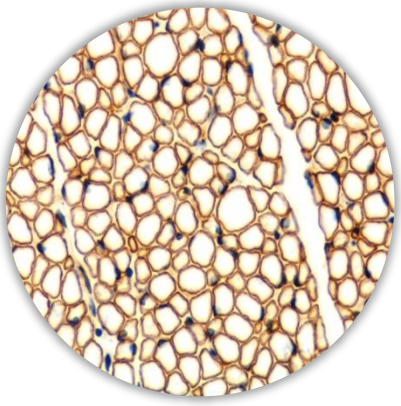
Acid Phosphatase
Lipid
PAS
Primary fibre typing
Succinate Dehydrogenase (SDH)

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



Gomori Trichrome



Primary fibre typing

Diagnostic Cytopathology

This scheme is aimed at laboratories / organisations performing a Diagnostic Cytopathology 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

An individualised report is provided on line after each assessment

Stains assessed

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

Papanicolaou

Romanowsky

Specimen Types:

Serous Fluid

Head and Neck

Respiratory

Urine

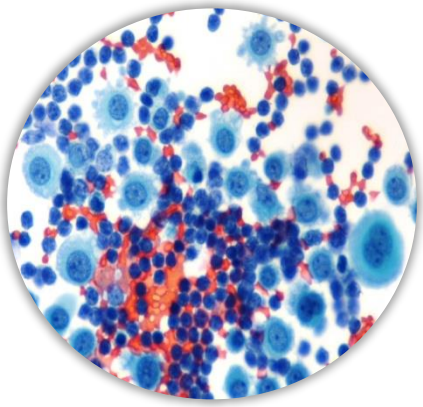
In the field of Diagnostic Cytopathology there are many sites for samples to be obtained from e.g. urine, sputum, pleural fluid, ascitic fluid, FNA etc. This scheme assesses 2 archival stained preparations, from 2 distinct cytology specimens, which are designated on the accompanying delivery letter issued with each assessment 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, cytospins, liquid based methodologies

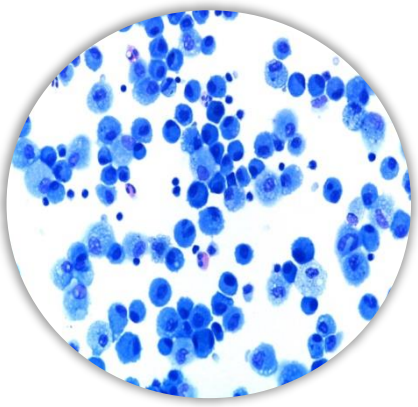
This Diagnostic Cytopathology scheme does not assess H&E stained preparations

UK NEQAS CPT follows RCPath guidance which explicitly states H&E should not be used for cytology preparations. Whilst other guidance does not specifically exclude H&E as a cytology stain, it equally does not advocate its use.

H&E stained preparations can be submitted as part of the Evaluation Service for Diagnostic Cytopathology Scheme participants, if required



Papanicolaou



Romanowsky

Diagnostic Cytopathology Cell Block (Pilot)

This scheme is intended as a specialist scheme to those participants who prepare cell blocks for diagnostic purposes, as part of their Diagnostic Cytopathology service

No. of assessment runs:

Based

6 distributions over a 12 month period

Stains assessed:

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

Paraffin wax embedded cell block
Haematoxylin and Eosin (H&E)

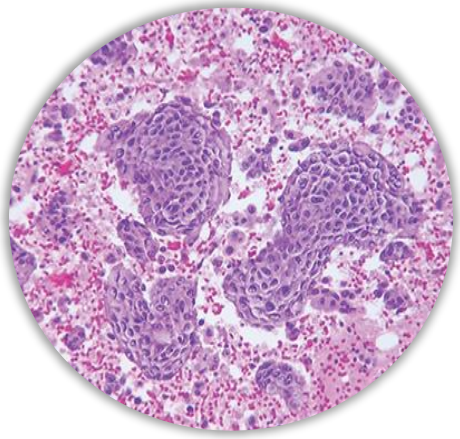
Slide and Block

An individualised report is provided on line after each assessment. Generic Best Method and Image Reports are also provided

Diagnostic Cytopathology Cell Blocks represent an important and valuable tool in a modern cytopathology era, with many Cytopathology centres routinely carrying out preparation of cell blocks to aid in patient diagnostics. This requires in depth technical knowledge along with a judgement of when such a preparation is relevant to the investigation and to the pathologist. Different methods have been described for cell block preparation, however the extent of technical variability as well as technical problems in a daily practice are unknown

At present there is no External Quality Assurance (EQA) scheme covering this part of Diagnostic Cytopathology and the specialist knowledge aspect of the service - with many Cytopathology centres organising and participating in their own audit / quality control schemes. If this project is successful it could provide a standard evaluation of Diagnostic Cytopathology Cell Block quality, globally, introducing guidelines and recommendations concerning best practice for the Cell Block technique

Each pilot distribution will comprise of 2 diagnostic cell blocks, together with the corresponding H&E preparation from the date indicated on the delivery letter, regardless of specimen type



Cell Block H&E Preparation

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:

6 distributions over a 12 month period

Slide Based

An individualised report is provided on line after each assessment

Stains assessed:

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

Haematoxylin and Eosin (H&E)

Reticulin (silver method for)

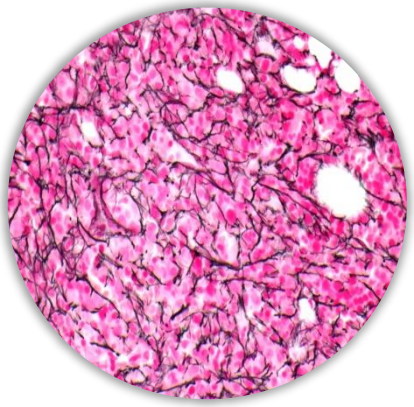
Romanowsky stain (for haemopoietic cells) - optional

The BMT scheme assesses bone marrow trephine biopsies using 2 routine staining methods for diagnostic bone marrow trephine biopsies, with an option for a 3rd staining method should this be applicable to the participants routine repertoire for BMT biopsies.

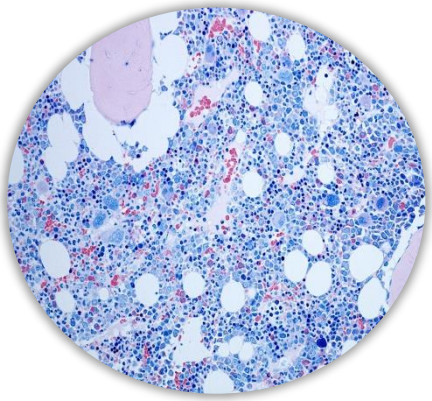
As BMT is a specialised tissue, it is approached as such within routine laboratories, employing specialist handling. Best practice and close liaison with haematologists ensures ease of reporting to ensure correct diagnosis

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

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



Reticulin (silver method for)



Romanowsky stain (for haemopoietic cells)

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:

6 distributions over a 12 month period

Slide Based

An individualised report is provided on line after each assessment

Stains assessed:

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

Haematoxylin and Eosin (H&E)
Toluidine Blue

Specific Site/ Tissue Composition*

Cartilaginous Cutaneous Mucosal Hair Bearing

Or an alternative (see Mohs Instructions for Participation)

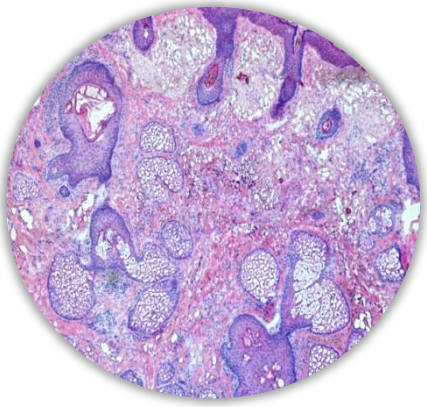
The Mohs' Procedure scheme assesses Mohs' surgery biopsies using 2 routine staining methods employed during Mohs' surgery

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, which are designated on the accompanying delivery letter issued with each assessment run:

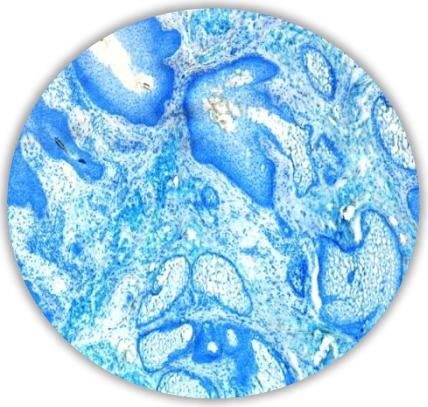
The first case is requested from any site
The second case is from the specific site/tissue composition detailed on the delivery letter*

For each case;

- slide 1 must demonstrate tumour
- slide 2 must be full-face



Haematoxylin and Eosin



Toluidine Blue

Companion Scheme - Frozen Sections

This scheme is intended as a “bolt on” to those participants who are already registered for the Specialist Techniques and/ or the Neuropathology EQA/proficiency testing schemes

No. of assessment runs:

6 distributions over a 12 month period

Slide Based

An individualised report is provided on line after each assessment

Stains assessed:

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

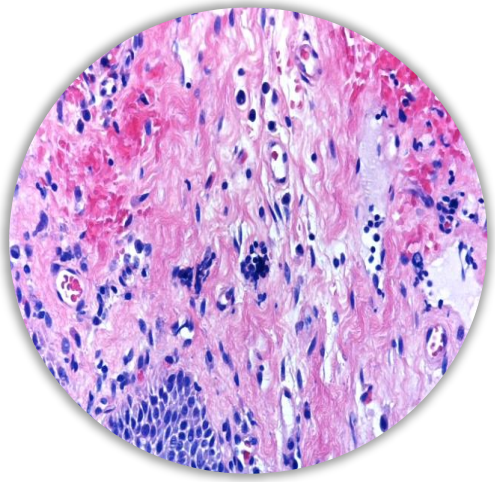
Haematoxylin and Eosin (H&E)

The frozen section procedure is a pathological laboratory procedure to perform rapid microscopic analysis of a specimen, and 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 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 should be a true representation of that case, and a true representation of the quality performed in that centre as part of their routinely daily workload



Frozen Section Haematoxylin and Eosin

Companion Scheme - Mega Blocks

This scheme is intended as a "bolt on" to those participants who are already registered for the Specialist Techniques and/ or the Neuropathology EQA/proficiency testing schemes

No. of assessment runs:

6 distributions over a 12 month period

Slide Based

An individualised report is provided on line after each assessment

Stains assessed:

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

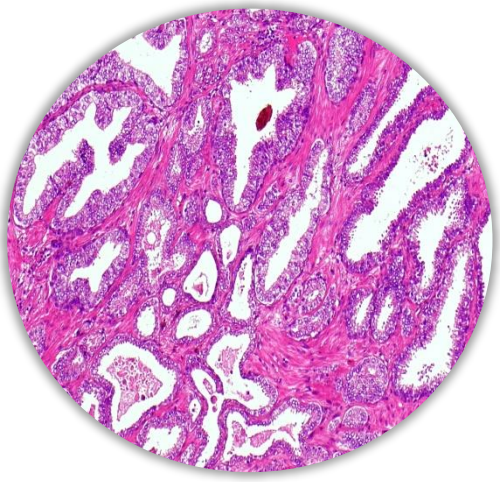
Haematoxylin and Eosin (H&E)

The use of "super" sized tissue cassettes, which are the equivalent size to 4 of the tissue cassettes, are routinely employed within histological practices, but can have widely varying processing and cutting methodologies from day to day "routine" tissue blocks

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 should be a true representation of that case, and a true representation of the quality performed in that centre as part of their routinely daily workload



Mega Block Haematoxylin and Eosin

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:

6 distributions over a 12 month period

Web Based

An individualised report is provided on line after each assessment. Generic Best Method and Image Reports are also provided

Digital Images assessed:

Selected / In-house Material *(all assessment 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

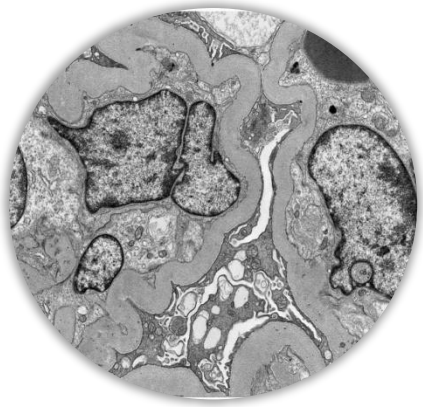
Specific Site / Tissue Composition*:

Renal
Nerve
Muscle

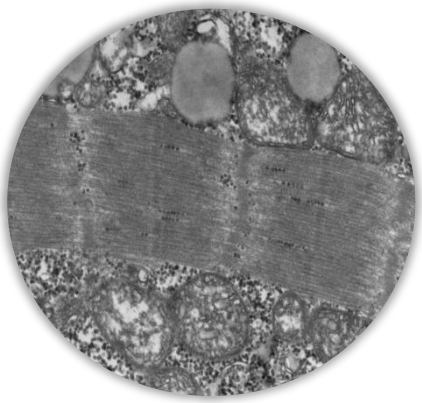
The TEM scheme utilises digital image submission to our website for assessment
Like other schemes, the TEM scheme works on a retrospective basis. Participants are asked to submit 2 archival stained preparations, from 2 distinct TEM analysed biopsies

*If participants are unable to provide any of the stated specimen types stated on the delivery letter for that assessment run, they are permitted to submit an alternative specimen type, but must state what the specimen type is and the reason for submitting it

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



Renal Biopsy



Muscle Biopsy

Direct Immunofluorescence (DIF)

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:

6 distributions over a 12 month period

Web Based

An individualised report is provided on line after each assessment. Generic Best Method and Image Reports are also provided

Digital Images assessed:

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

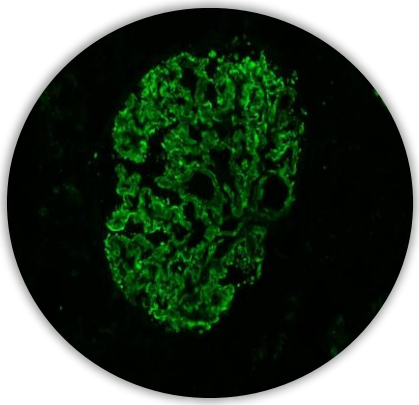
4 positive fluorescence images from the following options;

- 4 single positive cases
- 3 cases (1 double positive plus two single positives)
- 2 cases (2 double positives)
- 1 triple positive and 1 single positive
- 1 case with 4 separate positive conjugates

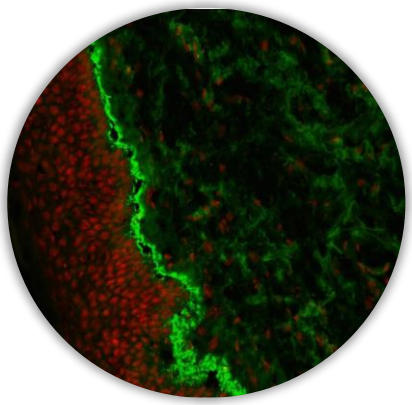
Specific specimen types are not requested, and Participants' are permitted to submit any specimen type, as long as the images submitted show positive staining and are representative of a Participants' in house repertoire. This allows any Participant carrying out DIF to submit to UK NEQAS CPT regardless of their routine tissue type

The UK NEQAS CPT DIF scheme, like our TEM scheme, utilises digital image submission to our website for assessment. Like other schemes, the DIF scheme works on a retrospective basis.
Participants are asked to submit the first 4 positive fluorescence images after the specified date, irrespective of number of cases, provided that at least 4 separate positive conjugate examples from a Participants' in house repertoire are represented

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



Renal Biopsy



Skin Biopsy

Digital Interpretive Diagnostic Cytopathology

This scheme aims to promote quality and education for all involved in screening and reporting Diagnostic Cytopathology. It will be open to both medical and non-medical personnel, as well as cytopathology trainees, providing good cytological examples to enable individual feedback and promote education within cytopathology

No. of assessment runs:

2 circulations over a 12 month period*

Stains assessed

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

Papanicolaou

Romanowsky

Specimen Types:

Serous Fluid

Head and Neck

Respiratory

Urine

Web Based

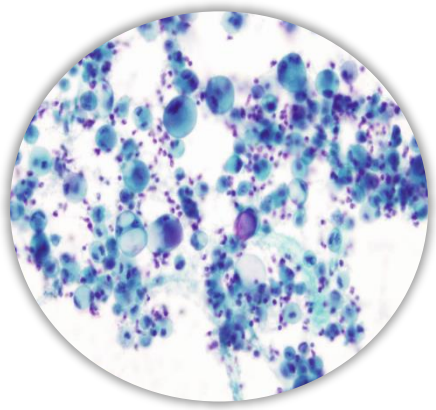
An individualised report is provided on line after each circulation. A Generic Report is also provided

Each circulation comprises 14 stained Diagnostic Cytology slides: 12 scored cases (individual assessment) and 2 un-scored cases (education), from serous fluids, respiratory, head and neck, and urine cases. This scheme solely utilises **digitised scanned Diagnostic Cytology slides**, to allow ease of access, instant feedback and education

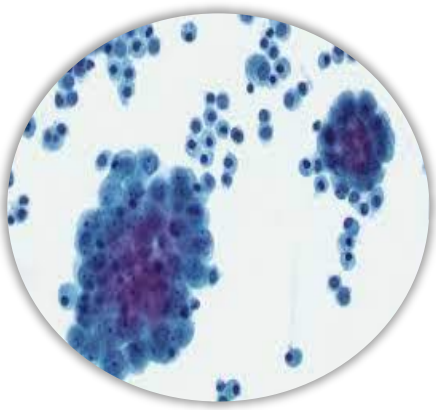
A preparation technique is not specified, and the scheme includes any suitable technique to adequately demonstrate the staining method and its subsequent diagnosis e.g. direct smears, cytospins, liquid based methodologies

Participants are able to categorise using benign/malignant diagnosis, and can opt to give a specific diagnosis if they feel they can. Participants will be scored for a correct initial diagnosis: and 0 for an incorrect initial diagnosis. Further specific diagnoses are not scored, but are collated for educational purposes.

*** biannual circulations in conjunction with iLabXCell**



Serous Fluid



Respiratory

Digital Pathology (Pilot)

This scheme aims to promote quality assurance and confidence for all involved in imaging, assessing and reporting Diagnostic Cellular Pathology. It will be open to both medical and non-medical laboratories providing constructive feedback on image quality produced by various vendor systems or laboratories using different systems

No. of assessment runs:

2 distributions over a 12 month period

Information assessed

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

Digital images

Specimen Types:

All

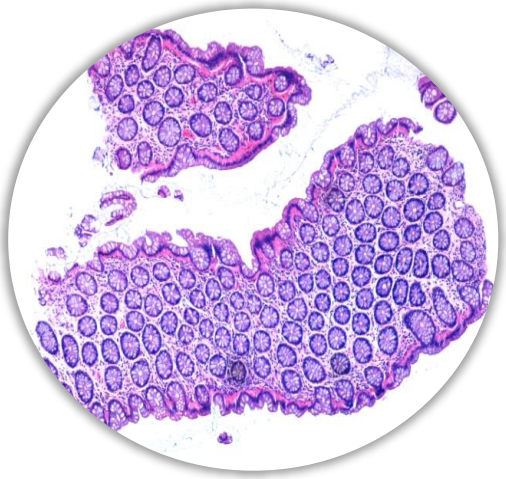
Web Based

An individualised report is provided on line after each assessment.. A Generic Report is also provided

Variation in staining is a continuing problem in Cellular Pathology laboratories. Many centres are utilising **Digital Slide Scanning** or **Digital Pathology** for reporting by a pathologist from a digital monitor or device. Whilst Digital pathology is still in the early stages of adoption for many centres for diagnostic reporting it is essential that a form of quality assurance is established to provide constructive feedback on image quality produced by various vendor systems or laboratories using different systems, and ensure this technology is implemented and utilised optimally.

If this project is successful it could provide a standard evaluation of technical laboratory quality and performance, assist in eliminating bias and personal preference to provide an additional benchmark to aid standardisation of quality across laboratories and improve medical confidence in reporting digitally.

Each pilot distribution will comprise of 2 diagnostic H&E images from 2 devices, regardless of tissue type, with the option to sign up each in-house device when the pilot scheme goes live.



Digitised H&E stained slide

Digital Diagnostic Ultrastructural Pathology (Pilot)

This scheme aims to promote quality and education for all involved in imaging, assessing and reporting Diagnostic Ultrastructural Pathology. It will be open to both medical and non-medical personnel, providing good diagnostic examples to enable individual feedback and promote education within Electron Microscopy

No. of assessment runs:

3 – 6 distributions over a 12 month period

Web Based

An individualised report is provided on line after each circulation. A Generic Report is also provided

Information assessed

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

- Digital images
- Clinical information
- Other diagnostic test results

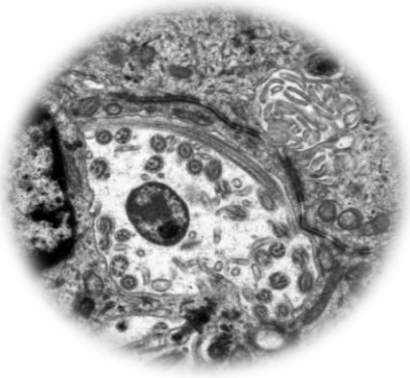
Specimen Types:

- Renal
- Muscle and nerve
- Cilia

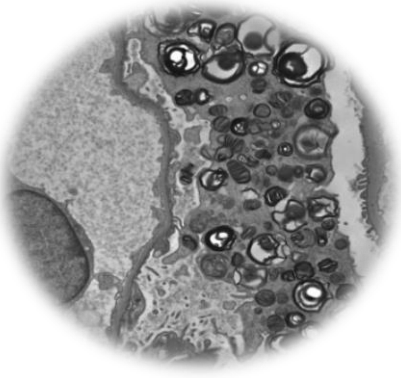
Each circulation comprises 2 diagnostic cases from each tissue type (optional sign up to each tissue type). A number of digital images along with clinical information and results of other diagnostic techniques will be provided for each case, along with questions on ultrastructural features seen
This pilot scheme will solely use digital electron microscopy images to allow ease of access, instant feedback and education Participants will answer questions provided with the images in each case, for diagnostic interpretation. There will also be an opportunity to suggest a specific diagnosis having considered the ultrastructural features seen and the clinical / other diagnostic information provided

Participants will be scored pass /borderline / fail for the specific diagnosis offered; participants will score 1 mark for each correctly answered question on the ultrastructural features seen. Participants will have to achieve a result of 80% or higher on each case attempted to pass
As the pilot scheme progresses, the scoring system will be developed further

*** biannual circulations in conjunction with iLabXCell**



Cilia showing internal dynein



Fabry's disease

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

Participant's 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 performance monitoring
- **Declare restricted repertoires**
  Non-declaration of this will lead to a non-submission (0 score), and possible performance monitoring

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 material 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

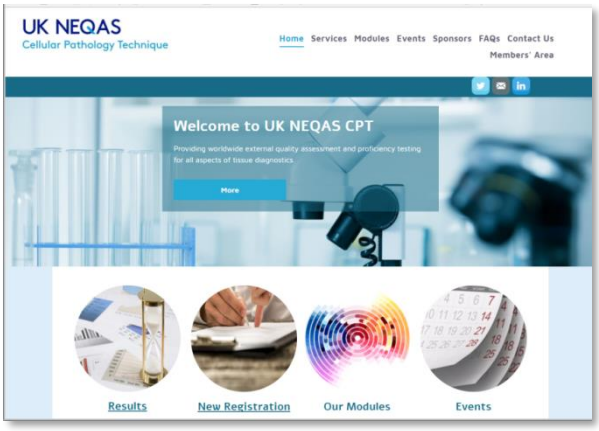
Accessing Online Reports

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

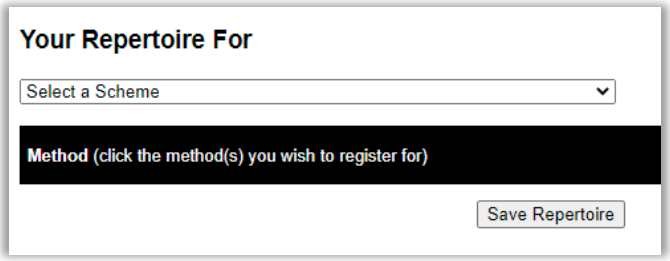
The login details consist of:

- **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

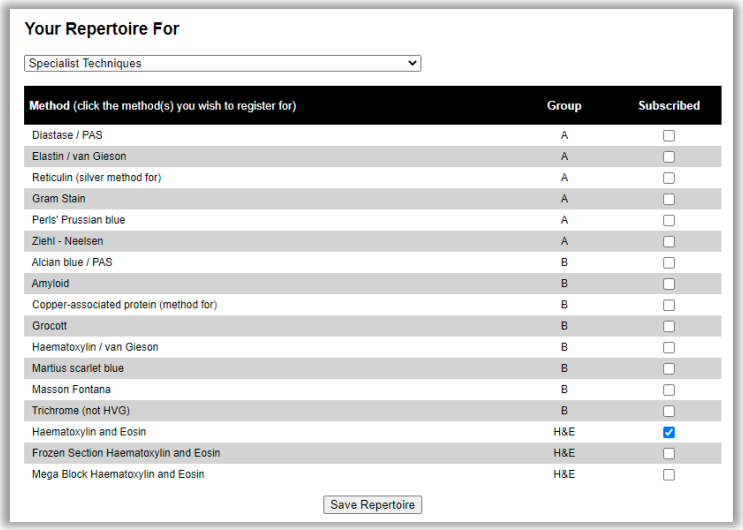


Use the drop down box to select a scheme. Select the relevant scheme repertoire you wish to view/amend

Amending your Repertoire

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

Any amendments are immediately sent to our EQA Scheme Management Office system, and are linked directly to your record, which make any necessary amendments to your repertoire



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

Declared Repertoire

Where it is the laboratory/organisation's policy to refer material to another department or laboratory/organisation, these 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 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.

Any submission, which is not part of the participant's repertoire, but scores a "low mark", will count towards performance monitoring

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

Submission Deadlines

UK NEQAS CPT encourage early submission. Our system records when your material was submitted and calculates the turn-around time in days before the submission deadline. For your records and assurance, 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 **www.ukneqascpt.org.uk** (see NEQMANFO030 Proficiency Testing Scheme Schedule)

- We appreciate delays may occur due to mail, courier and other global 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, and can be found on the UK NEQAS CPT Scheme Schedules for each scheme

In some instances, submissions received after this date may be accepted at the discretion of the Scheme Management. 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 re-assessed. 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 and 2 completed
- **Both MUST be submitted together, before the deadline of the next assessment**

One form should be completed per individual score for be reassessment

Assessment of Appeals

Assessment of appeals will be carried out by expert 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 via a UK NEQAS CPT Administrator

At the Scheme Managements discretion, any scoring amendments are fed back to the original expert assessing pair for auditing and training purposes

Falsification of Appeal Material

Material submitted as part of the appeal process should 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@ukneqas.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 procedure, can be found on the UK NEQAS CPT website **www.ukneqascpt.org.uk**

Follow Up

Follow up to complaints are carried out on an individual basis, and the resulting outcome fed back to the individual Participant where appropriate

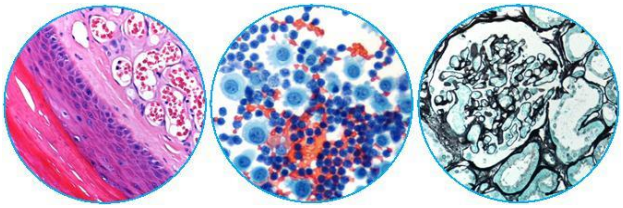
At all times during the complaints procedure, Participant confidentiality will be maintained Participants are requested to assist in this respect

If the complaint cannot be resolved at this level, the Scheme Management 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 NQAAP for Cellular Pathology, 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 Quality Assurance in Pathology Committee (QAPC), [formerly the Joint Working Group (JWG) on Quality Assurance], respectively



Contact Us

Registration, Webinar and Workshop Enquiries

Tel: +44 (0)191 816 1030
Email: cpt@ukneqas.org.uk

Assessment Run, Scheme and Technical Enquiries

Tel: +44 (0)191 816 1030
Email: cellpathtech@ukneqas.org.uk

iEQA Administrative Support
Email: digitalieqa@labxcell.co.uk

Finance Administrative Support
Email: Finance@labxcell.org

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

Postal Address:
UK NEQAS CPT
Haylofts, St. Thomas Street, Haymarket, Newcastle, NE1 4LE, United Kingdom

Website Address:
www.ukneqascpt.org.uk

In some countries registration to UK NEQAS CPT is via a distributor. 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

Administrative Manager
Susan Mulinda

Technical Expert
Al-Amara Rafique

Scheme Manager
Chantell Hodgson

Quality Manager
Julie Coaker

Diagnostic Cytology Expert
Helen Naylor

Scheme Coordinators

Tissue Diagnostics Co-ordinator
Scott Gable

Specialist Scheme Co-ordinator
Peter Mooney

Renal Biopsy Pathology Co-ordinator and Technical Expert
Jane Woods

Diagnostic Cytopathology Co-ordinator
Anna Patterson

Mohs Procedure Co-ordinator
Dr Guy Orchard

Bone Marrow Trephine Co-ordinator
Dharmesh Mistry

Direct Immunofluorescence (DIF) Co-ordinator
John Mee

Neuropathology Co-ordinator
Richard Mathias

Muscle Histochemistry Co-ordinator
Scott Maxwell

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

Digital Interpretive Diagnostic Cytopathology Co-ordinator
John Crossley

Digital Interpretive TEM Co-ordinator
Tracey de Haro

Digital Pathology
Will Davies

All Scheme Coordinators can be contacted via **Email:** 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 4 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 should 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 should notify UK NEQAS CPT immediately

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

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

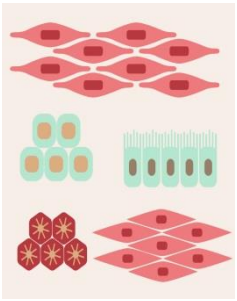
Performance Notifications and Assessment Sessions

- The **Day to Day**, **Clinical Head** and **Technical Head** are informed via email of any performance issues (see Performance Monitoring).
- 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 17043 standards and RCPath on the supply of human tissue

UK NEQAS CPT Governance



- Material commissioned for special stains is “left over from investigations”
- No more tissue has been 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 4 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 found to be compromised, material will be recalled and the associated assessment run suspended
- Where it is not possible to source suitable human tissue animal tissue may be used as an alternative
- Animal tissue provided for UK NEQAS CPT activity, will be validated by parallel testing alongside an already validated human tissue control for the same target / attribute, in order to assure suitability of the material
- Both human and animal tissue utilised for UK NEQAS CPT EQA / Proficiency Testing schemes have been validated against the appropriate UK NEQAS CPT assessment criteria, to ensure 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

- **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
- **restricted repertoires** – non-declaration may lead to a non-submission (0 score) and possible performance monitoring

Ensure

- **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 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 EQA and proficiency testing when corresponding with other centres**
- **always quote your unique participant number whenever contacting UK NEQAS CPT**

Guidelines for Successful Participant Submissions

The guidelines below aim to assist participants in the successful submission of slides. This will ensure that users receive appropriate reports, and are effective in monitoring continuous quality improvement

Assessment Submissions

- Upon run issue notification, add an Outlook Calendar invite to action EQA submissions upon receipt
- If you do not receive your EQA submissions, please get in touch as soon as possible to request any additional material
- Allocate a responsible EQA person and also a deputy, for handling EQA submissions in times of absence/holiday
- Complete any submission documentation fully and correctly, adding additional information where it might aid assessment e.g. to identify PAP or ROM for Diagnostic Cytopathology, or tumour and full-face for Mohs' submissions
- Return submissions **as soon as possible**
- Package and protect your submissions well, to ensure safe transit
- Track your submission to UK NEQAS CPT, where possible
- Following return of submissions to UK NEQAS CPT, use an Outlook calendar invite to monitor notification of receipt by UK NEQAS CPT – request any additional material if your submissions are not received back at UK NEQAS CPT

Quality Review

- Review your EQA scores upon report issue and act upon the results accordingly, where any poor/borderline performance is indicated
- Record your score review and detail the outcome of discussions, including a root cause for any poor performance, and corrective and preventive actions to ensure improvement
- Undertake regular reviews of your own internal quality controls for your repertoire - **record your findings** and act upon the data e.g. replace stains where stain quality has been observed to decrease over time
- **Remember UK NEQAS CPT are available for any help and advice you may require**

UK NEQAS

Cellular Pathology Technique

Committed to Quality Committed to you

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