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|  | NE&Y GLH Central Laboratory Leeds |
|  | Ashley Wing |
|  | St James Hospital |
|  | Leeds Teaching Hospitals Trust |
|  | November 2023 |

**Re: Delays to Genomic Laboratory testing services**

Dear Genomic Laboratory Users,

I am writing to advise you of ongoing delays to the Genomic Laboratory testing service. These delays are for a combination of reasons centred around significant national and local reconfiguration of genomic services and challenges with staffing levels. This means that many of our current services are not being reported to the turnaround time guidelines that you may normally expect. We apologise for these delays and any impact they may have on patients and services, and we are actively working to address these issues.

This is affecting services at each of our Genomic Laboratories in the North East and Yorkshire Genomic Laboratory Hub (NE&Y GLH) but particularly in the Leeds Central Genomics Laboratory at this time. We continue to work together as the NE&Y GLH to manage recovery plans across the wider region to rectify this and improve performance. We have made some significant improvements in specific areas of the service over the last 12 months and continue to take a granular approach to focusing our resources to optimise recovery and manage risk in service. However, it will still take several months before a significant improvement is apparent for some services.

Please be assured that we will prioritise the most urgent clinical work which includes:

* pregnant women undergoing prenatal diagnosis;
* patients needing urgent advice on carrier testing relating to pregnancy, for example cystic fibrosis, thalassaemia;
* rapid genomic testing pathways, including those for fetal anomalies in ongoing pregnancies , critically ill neonates and children, including those for whom rapid Whole Genome Sequencing via the R14 service is appropriate;
* conditions where rapid genetic testing may alter clinical treatment or decision making; and
* patients requiring urgent testing, for example BRCA testing, to inform chemotherapy options.

We have provided a set of indicative turn-around times below to help manage service expectations as we balance the capacity and build recovery. We will update these on a quarterly basis which should indicate the service improvement being achieved:



In order to help the laboratory team to manage resources:

* Please ensure all referral and reporting information is completed on the referral forms and ensure you are requesting the right test (with correct code as per the National Genomic Test Directory). If details are absent, it takes our scientific team time to check and testing will be delayed. If you are uncertain whether a genetic test is suitable, please do not hesitate to contact the laboratory before sending a sample.
* Please only contact the laboratory if absolutely essential. We are always happy to help, but non-essential contacts take our technical/scientific team away from reporting.
* Whilst we will triage cases based on clinical urgency as noted above and then the oldest cases in order, you should contact the laboratory if your case becomes more clinically urgent and the genomic report will affect treatment outcomes. Examples of these urgent situations include when there is an ongoing pregnancy in the family and a result would alter management; a child is very unwell and admitted to hospital; or other situations when a result is needed to inform urgent clinical management decisions. Requests for urgent WGS testing will be discussed with the Clinical Genetics team on a case-by-case basis.

We wish to thank you for your understanding, patience and cooperation.

Yours Sincerely,

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