

ACGS Quality Sub-committee meeting minutes

Location Regional Genetics Centre, Birmingham Women's Hospital
Date 04 November 2014
Duration 11am- 3.30pm
Chair Sandi Deans
Secretary Amy Roe

Attendee	Center	Attended	Apologies
Sandi Deans (SD)	UK NEQAS	Y	
Nick Bown (NB)	Newcastle		Y
Gail Norbury (GN)	Guys and St Thomas, London	Y	
Sian Morgan (SM)	Cardiff	Y	
Carl Fratter (CF)	Oxford	Y	
Shirley Henderson (SH)	Oxford	Y	
Richard Kirk (RK)	Sheffield	Y	
Will King (WK)	St Georges	Y	
Natasha Leo (NL)	Manchester	Y	
Amy Roe (AR)	BartsHealth, London	Y	
Louise Monkman (LM)	Glasgow		Y
Richa Sud (RS)	Institute of Neurology, London	Y	
Yvonne Wallis (YW)	Birmingham	Y	
Carolyn Campbell (CC)	Oxford	Y	
Roger Mountford (RM)	Liverpool		Y
Rachel Butler (RB)	Cardiff		Y
Graham Fewes (GF)	Birmingham	Y	
Simon Patton (SP)	EMQN		Y
Lara Creswell (LC)	Leicester	Y	

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Item	Action	Timeframe
<p>1. <u>Apologies</u> See above attendee list</p>		
<p>2. <u>Minutes from previous meeting</u> Accepted as true</p>		
<p>Actions:</p>		
<p>1. SD checked with DM general reporting guidelines include postnatal and prenatal arraysTAT</p>		
<p>2. NB actions to email NC as clinician to advise on HeamOnc cytogenetic guidelines- ongoing</p>	NB	Feb 15
<p>3. SD actioned to discuss feasibility of forum on ACGS website for accreditation issues- complete. NL to contact Hazel Dinning to progress with the website</p>	NL	ASAP
<p>4. SM actioned to send out questionnaire re FRAX testing- ongoing</p>	SM	Feb 15
<p>5. SD confirmed that audit data should be reported in quarter 4 only and that UKGTN postcode audit should not be included as not an ACGS audit.</p>		
<p>6. Decided another accreditation meeting should be held in Feb/March 2015 to include specific issues such as Validation, Calibration. Decided meeting to be held at Birmingham and one representative (preferably quality manager) from each lab invited to attend. Needs to be self-funding, with a registration fee applicable to cover costs of invited speakers. GF to draft costings</p>	GF	ASAP
<p>7. SM - FASP feedback -13/14 data collected. Now will collect 14/15 data. At FASP biochemistry meeting SM presented and actioned to write into newsletter results of the audit. Public Health England have funding to provide a Congenital Abnormalities Register for England. This will have an impact on National Downs Register. Hope to be collecting data from April 2015. Sm will continue to feedback to this committee.</p>		
<p>3. Review of Terms of Reference Remove UK Lab Quality assurance Development Group from Standards and Governance</p>	SD	Feb 15
<p>All committee members actioned to review why they are in the</p>	ALL	ASAP

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<p>committee and what they can offer- SD to send round original applications for all members to review and update if necessary AR actioned to email GT (Helen Thomas and Martin Hart) inviting them to join the committee and to the next meeting</p>		
<p>AR actioned to send email round to all ACGS members to identify a bioinformatician to join committee.</p>	AR	ASAP
<p>Decided a minimum and maximum number of representatives should be in committee. Decided maximum of 25 and minimum of 8. SD actioned to check with other ACGS committees what they have as a minimum and then update terms of reference to reflect.</p>	SD	ASAP
<p>4. BPG review 1. YW to email final pipeline SOP to NL for publication on ACGS website</p>	YW/NL	ASAP
<p>2. NGS- complete</p>		
<p>3. FRAX complete- YW to email NL with final version for publication on ACGS website</p>	NL	ASAP
<p>4. General Reporting - YW to obtain latest version from Kath Smith and to circulate to committee for 2 week review, after which send to working group for final comments(2 weeks), then on to ACGS website for 2 weeks for open review.</p>	YW	ASAP
<p>5. Sarcoma RT-PCR - draft now available for review by authors after which will be sent for general review on ACGS website (2 weeks). Hopefully final ratified version available by end of December 2014.</p>	SD	ASAP
<p>6. HeamOnc - NB contacted current authors and they are happy to review. SH suggested more joint cyto and molecular pathology guidelines. SH to contact NB</p>	SH	ASAP
<p>7. Hypertrophic cardiomyopathies – Dennis Dooijes (Utrecht) and Kate Thomson (Oxford) are leading. YW actioned to follow up on progress</p>	YW	ASAP
<p>8. Prenatal Arrays - lead Debs Morragh</p>		
<p>9. Postnatal arrays - lead DM</p>		

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<p>10. YW discussed Lynch guidelines and it was decided by committee that GN would take these forward in collaboration with Stewart Payne and Ian Frayling.</p>	GN	Feb 15
<p>11. CC- cytogenetic general guidelines, postnatal, prenatal and tissues all need updating. Decided more appropriate to finish BPG for pre and postnatal arrays before reviewing these. Myeloma BPG also needed in light of pilot CEQAS myeloma scheme. CC to contact Polly Tally to identify working group for this.</p>	CC	Feb 15
<p>12. Breakage syndrome BPG need updating- Ian Kesterton, Graham Fews and Chris Ryan to lead on this. GF to contact Ros Hastings to ensure there is no duplication of BPG.</p>	GF	Feb 15
<p><u>5. Example risk calculations</u> Model risk calculations need identifying and distributing. CF is leading on this and has recruited a team to help draft calculations.</p>	CF	Feb 15
<p><u>6. Internal Quality Control Meeting</u> Scheduled for 26th November 2014 to draft some internal quality control guidelines</p> <p>Decided that smaller group more appropriate to include 2 cytogeneticists, 2 molecular pathologists, 2 molecular geneticists, 1 quality manager and 1 bioinformatician.</p>		
<p>SH actioned to identify 2 molecular pathology people</p>	SH	ASAP
<p>GN/NL to suggest bioinformatician</p>	GN/NL	ASAP
<p>NL to ask quality manager at Manchester</p>	NL	ASAP
<p>Jo Whittaker suggested by GN- SD to email</p>	SD	ASAP
<p><u>7. UKGTN gene dossiers for cytogenetic tests</u> LC attended UKGTN LMA meeting. Highlighted that very few labs have submitted gene dossiers for array testing. There is no current gene dossier for prenatal arrays. Decided that it would be a good idea to tie in with array BPG. SM to contact Debs Morrigh to tie in with BPG and to include CEQAS prenatal array pilot scheme results.</p>	SM	Feb 15
<p><u>8. UKGTN- GenU document</u> GenU system-reviewed and happy with changes NL actioned to get Oct 12 and draft version uploaded onto website.</p>	NL	ASAP

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<p>NL actioned to let ACGS members know of document</p>		
<p><u>9. ACGS activity audit update</u> 2 molecular labs still to submit- SD actioned to chase (GN to provide information) LC to check cytogenetic data. Suggested a slot should be given in the ACGS spring meeting to update people on audit results. SD to contact Dom McMullan.</p>	SD/LC/GN	ASAP
<p><u>10. FRAX Asuragen testing- validation</u> Laz Lazarou contacted SD regarding national validation of Asuragen prenatal testing. 80~90% labs currently use kit. SD actioned to feedback to Laz with the suggestion to surveys to find out the extent of their current validation and to identify if a national validation scheme is appropriate.</p>	SD	ASAP
<p><u>11. UKAS inspections- calibration</u> Need to ensure that all calibration tests undertaken by a company are ISO accredited for that test. Each lab can define what they think is necessary to calibrate and what isn't and to ensure full documentation of your calibration procedures To add to agenda for IQC workshop</p>	SD	ASAP
<p><u>12. Quality dashboard update</u> Dashboard currently paused by NHS England as data collecting agency employed. However still need to clarify 2/4 week TAT's criteria to ensure the data collected is comparable. Previous discussions approved the Manchester criteria. NL actioned to re circulate Manchester labs current TAT document to all committee members, after which it will need Executive approval then CRG.</p>	NL	ASAP
<p><u>13. Reports- utility, format and interpretation</u> GN advised by the Joint Committee of Genomic Medicine that the NGS genetic test reports need to be clearer regarding test specificity and whether or not the diagnosis has been excluded. Often non genetic clinicians read these reports and it needs to be made much clearer what the interpretation of the finding is. Decided that a workshop would be organised to decide what should be written in these reports in line with NGS UKNEQAS pilot scheme for molecular pathology and in conjunction with UKGTN for germline testing.</p>		
<p><u>14. Reference materials</u> The committee has decided not to endorse reference samples provided by Horizon</p>		

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<p>Each lab to make their own educated choice on how they will validate tests. Decided that it would be inappropriate to invite Horizon to accreditation workshop</p> <p><u>15. AOB</u></p> <p>GN- National catalogue of laboratory tests to include genetic tests. GN currently working through. Meeting in Jan 15 to launch catalogue</p> <p>LC- RCPATH Retention and Storage document up for review</p> <p>GF- RCPATH Never incidents document up for review</p> <p><u>16. Date of next meeting: TBA, Venue: Birmingham</u></p>		
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