

Diagnostic Suite Standard Operating Procedure (SOP) – V2.0 July 2024

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1. Purpose of Document

- 1.1 To outline the function and purpose of the Diagnostic Suite (EEG service) (Electroencephalography) service at Young Epilepsy (YE).

2. Aims of the Service

- 2.1 To provide a high quality, evidenced-based, patient-centred service.
- 2.2 To provide referring clinicians with diagnostic reports and where applicable advice to facilitate diagnosis and medical management plans.
- 2.3 Ensure that all diagnostic suite resources are utilised efficiently and effectively.
- 2.4 Ensure access is available to all service users (e.g. SLA contracts with NHS Trusts including private patient service provision).
- 2.5 The service is compliant with CQC requirements and any relevant professional body national guidance and standards.

3. Scope of the Service

- 3.1 To provide the diagnostic service of routine electroencephalography (EEG), sleep EEG (melatonin-sleep deprived), ambulatory EEG and home-video-EEG telemetry investigations (1-4 nights).
- 3.2 National performance Indicators e.g. all patients referred to this diagnostic facility will receive their investigation in line with the NHS diagnostic (within 6 weeks of referral).
- 3.3 The EEG diagnostic service provides out-patient service provision, and this is delivered within the YE Diagnostic Suite based in the Neville Childhood Epilepsy Centre (NCEC) at Young Epilepsy, Lingfield.
- 3.4 The out-patient service is provided to a number of NHS hospitals through service level agreements (SLAs) with YE, including private paying patients.

4. Work Flows

- 4.1 EEG referrals are accepted via Paediatricians, Consultants Paediatric Neurologists.

- 4.2 Forms can be downloaded at www.youngepilepsy.org.uk/for-professionals/health-services-at-young-epilepsy and are sent electronically to youngepilepsy.diagnostics@nhs.net. Detailed clinic letters are also accepted alongside contact details of the family (mobile and email) to expedite the appointment booking process.
- 4.3 All referrals are saved on the YE secure server and entered onto an EEG activity pipeline spreadsheet.
- 4.4 Prompt clinical triaging is performed by the 2 senior Clinical Scientists who identify the clinical urgency in consultation with the referring clinician and in accordance with the YE urgent criteria (see appendix 1) and appropriate SLA agreement/s.
- 4.5 Families are contacted directly by a member of the diagnostics team (usually by telephone) to arrange an appointment. An electronic appointment letter and associated patient information sheet and directions are sent directly to the family after confirming the appointment on the telephone.
- 4.6 The appropriate diagnostic test then takes place at an agree date/time.
- 4.7 Results are compiled in a detailed technical and clinical report. The technical report is completed by the clinical scientist/physiologist team and the clinical report by the consultant neurologist/neurophysiologist.
- 4.8 Home videos where possible are requested from families and uploaded to the YE secure server via a password encrypted OneDrive Folder.
- 4.9 Reports are sent electronically via the youngepilepsy.diagnostic@nhs.net , a secure NHS.net email typically within in 1-3 working days of the test taking place (for HvT commonly within 1-2 weeks of completing a HvT recording).
- 4.10 Monthly EEG activity spreadsheets are shared with the YE Finance Team for invoice directly with the respective NHS referral services.
- 4.11 Private patient patients are required to pay prior to the investigation taking place and this is organised directly through the finance team at YE.
- 4.12 EEG data is saved in accordance with GDPR and NHS data protection policies.

5. Key Relationships

- 5.1 YE nursing, health care nurses and medical team, all based in the NCEC.
- 5.2 The YE business development team.
- 5.3 YE reception staff based in the NCEC.
- 5.4 Various NHS service providers including private referrers.
- 5.5 Patients, families and care givers.

- 5.6 Facilities, IT, finance, payroll, HR and cleaning services at YE.
- 5.7 Service contracts through Optima medical for EEG equipment and Neurogen for HVT equipment.

6. Staffing

- 6.1 The substantive staff includes the following:
 - 6.1.1 A Diagnostic Suite Manager (Clinical Scientist), HCPC registered, Chartered Scientist (CSci).
 - 6.1.2 A further senior Clinical Scientist (HCPC registered, CSci).
 - 6.1.3 Student Clinical Physiologist
- 6.2 Consultant Neurologists and Neurophysiologists (zero-hours contract) providing the clinical summary for all EEG diagnostic tests.

7. Equipment Requirements

- 7.1 EEG equipment is through Optima Medical Ltd and Neurogen Ltd and consists of:
 - 7.1.1 A routine EEG machine with dual camera capability based in the routine EEG room.
 - 7.1.2 2 sleep EEG systems (dual camera capability). This equipment is used in the dedicated sleep EEG room within the Diagnostic Suite and nursing area of the NCEC.
 - 7.1.3 2 ambulatory EEG systems.
 - 7.1.4 3 home-video-EEG telemetry systems.

8. Monitoring compliance and effectiveness

- 8.1.1 Diagnostic waiting times
- 8.1.2 EEG Reporting timescales
- 8.1.3 Regular audit
- 8.1.4 Ongoing patient/parent satisfaction
- 8.1.5 Annual referring clinician satisfaction survey

9. Updating and Review

9.1 This procedure will be reviewed at least every 2 years, more frequently if needed, in response to changes necessary.

10. Infection Prevention and Control

10.1 The Infection Control Policy for the Diagnostic Suite is adhered to at all times and is in keeping with National Standards for Neurophysiology Departments based in NHS environments and local YE requirements.

10.2 Disposable EEG electrodes are used for all EEGs performed.

11. Equality, diversity, inclusivity

11.1 Young Epilepsy's approach to Equality, Diversity and Inclusion (ED&I) relates to the children and young adults we support, as well as our staff, volunteers, partnerships and the wider community involved in the delivery of our work.

11.2 We believe the differences individuals bring with their own culture and range of life experiences, brings creativity, vitality and innovation to the organisation and directly benefits the children and young people we support.

11.3 The YE [Equality, Diversity and Inclusion Policy](#) outlines our commitment and responsibilities to provide an inclusive culture which treats all individuals with dignity and respect. This is founded on placing a high value on diversity and recognising the differences people bring and is underpinned by our [organisational values and behaviours](#).

12. Data Protection

12.1 Young Epilepsy endeavours to meet the highest standards when collecting and using personal information. We are committed to upholding the standards and regulations embodied in the Data Protection Act 2018 (DPA 2018) and the General Data Protection Regulation (UK GDPR). Personal data will therefore at all times be:-

- 12.1.1 Processed lawfully, fairly and in a transparent manner;
 - 12.1.2 Collected for specified, explicit and legitimate purposes and not further processed in a manner that is incompatible with those purposes;
 - 12.1.3 Adequate, relevant and limited to what is necessary in relation to the purposes for which they are processed;
 - 12.1.4 Accurate and, where necessary, kept up to date;
 - 12.1.5 Kept in a form which permits identification of data subjects for no longer than is necessary for the purposes for which the personal data are processed; and
 - 12.1.6 Processed in a manner that ensures appropriate security.
- 12.2 Young Epilepsy will furthermore:-
- 12.2.1 Be responsible for, and be able to demonstrate compliance with the DPA 2018 and the UK GDPR.

13. Reviewing this Policy

- 13.1 This policy will be reviewed annually and updated where necessary and shared and communicated to the relevant staff groups.

14. Appendix

- 14.1 Urgent referral criteria:
 - 14.1.1 Suspected infantile spasms
 - 14.1.2 Suspected Non convulsive status
 - 14.1.3 New onset of daily seizures (untreated - excluding childhood absences)
 - 14.1.4 Acute unexplained encephalopathy