



THE LIVEWELL SYNDICATE · POLICY

Results *communication.*

How results are reviewed, released and explained, and
how abnormal and critical results are escalated.

The Livewell Syndicate Ltd

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TYPE	REF	VERSION	DATE	REVIEW
Policy	CC-08	5.1	03/10/2026	30/09/2027

Knowledge gives you control over your health.

Controlled document

Document control.

ITEM	DETAIL
Policy code	CC-08
Policy title	Results communication policy.
Purpose	Sets out how every result is checked before release, how results are explained to clients, and how abnormal and critical results are acted on and escalated.
Applies to	All staff of The Livewell Syndicate, and anyone acting on its behalf.
Policy lead	Cynferth J. Turrian, Executive Director and Clinic Manager.
Critical results	Daniel Snow, Managing Director, on call seven days a week. Cynferth J. Turrian covers when he is unavailable.
Result validation	Daniel Snow, Managing Director (physiologist, not a clinical review).
Authorised by	Cynferth J. Turrian, Executive Director and Clinic Manager. Date: 03/10/2026
Approved by	Daniel Snow, Managing Director. Date: 03/10/2026
Version	5.1
Date issued	3 October 2026
Next review	30 September 2027, or sooner if practice, law or circumstances change. Review carried out by Cynferth J. Turrian.
Law and guidance checked	3 October 2026

Amendment record

DATE	SUMMARY
3 October 2026	Version 5.1, issued 3 October 2026.

Related documents: CC-03 Consent to Care and Treatment Policy; CC-10 Virtual and Video Consultation Policy; SG-02 Safeguarding Policy; IG-03 Information Governance and Data Protection Policy; CO-01 Business Continuity and Emergency Preparedness Policy; CG-08 Significant Event Analysis (SEA) Policy; CC-09 Specimen Handling, Cold Chain and Transport Policy; Delivering Difficult Results: Internal Guidance (BBN/2026/08).

Definitions.

TERM	MEANING
Validating director	Daniel Snow, Managing Director, a physiologist. He checks every result and its draft commentary before release. This is a check for errors and safety, not a clinical or medical interpretation.
Results platform	BloodGPT, which receives results from the laboratory, drafts written commentary using artificial intelligence, holds each result until it has been validated, and then releases it to the client's secure portal.
Normal result	A result inside the laboratory's reference range.
Abnormal result	A result outside the reference range that does not meet the laboratory's critical limits.

TERM	MEANING
Critical result	A result that meets the laboratory's critical limits because it may need urgent medical attention, such as a very high potassium or a very low haemoglobin. Inuvi applies the limits in the Royal College of Pathologists' guidance (Royal College of Pathologists, 2025).
Person on cover	The director on call for critical results at that moment. Normally the Managing Director; the Executive Director when he is unavailable.

Principles.

1. No result reaches a client until it has been validated. Commentary drafted by the results platform is a draft only. The validating director checks each result and its draft commentary, corrects errors, removes anything that reads as a diagnosis or treatment advice, and then releases it. He does not add clinical interpretation of his own.
2. Critical results are acted on the same day, every day of the week. There is no weekend or bank holiday gap.
3. Results go to the client and nobody else. They are never given to an employer, and are given to a GP only at the client's request, except as the Consent to Care and Treatment Policy (CC-03) allows.
4. This process is not an emergency service. A result cannot show whether someone is unwell right now. Clients are told that if they feel unwell they should call 999 or NHS 111, and not wait to hear from The Livewell Syndicate.
5. The Livewell Syndicate does not yet have a contracted medical provider. No doctor reviews results, and staff give no clinical advice. Clients are told this before they order. When a contracted medical provider is in place, doctor review will be added to this policy through a new version, starting with employer funded programmes.

Routine results.

6. The laboratory analyses the sample and sends the result to the results platform. The laboratory refers some specialist tests to another accredited laboratory, and these take longer.
7. The results platform drafts commentary using the result and the client's health questionnaire, if they completed one.
8. The validating director checks every result and its draft commentary, and releases it within 1 working day of the result reaching the platform. At weekends and on bank holidays, results are validated where possible.
9. The result is released to the client's secure portal. The client receives an email with a secure sign in link. The email contains no result information.

10. Clients can ask questions by emailing results@livewellsyndicate.com, or book a video consultation in which the Managing Director explains what their results mean. The consultation is not medical advice. A short note of each consultation is kept, as the Consent to Care and Treatment Policy (CC-03) sets out.
11. If validation cannot be completed within 1 working day, The Livewell Syndicate tells the client about the delay by the end of the next working day.

Abnormal results.

12. The commentary explains the finding in plain English and suggests what the client should do and how soon, for example a repeat test or seeing their GP. It never gives a diagnosis.
13. Where a result is a significant new finding, The Livewell Syndicate telephones the client within 1 working day of release to make sure they have seen it and to recommend that they see their GP. Staff follow the internal guidance Delivering Difficult Results (BBN/2026/08).
14. Where a result does not fit the client's circumstances, or may have been affected by the sample, such as haemolysis or biotin supplements, a repeat test may be recommended.

Critical results.

15. Inuvi applies the critical limits in the Royal College of Pathologists' guidance, and has confirmed this in writing. Inuvi telephones the person on cover about every critical result, at any time of day, seven days a week. The person on cover makes sure the laboratory always has their current contact details. The directors agree in advance, and record, who is on cover.
16. As soon as the person on cover receives a critical result, they telephone the client the same day.
17. Staff do not give clinical advice, because The Livewell Syndicate does not hold the client's full medical history.
18. The client is told plainly what the result is, that it needs urgent attention, and that they should go to Accident and Emergency, call 999, call NHS 111 or see a GP the same day. If the client feels unwell, they are told to call 999.
19. If the client cannot be reached, the person on cover:
 - tries every telephone number held, at least three times within the next two hours;
 - sends a text message and an email asking the client to call urgently, without giving the result; and

- where the result suggests a risk to life, calls 999 or the police to ask for a welfare check, sharing only the information needed to protect the client.
- 20. Attempts continue until the client is reached or the welfare check has been completed.
- 21. Every step is recorded, with times, in the critical results log.

Samples that cannot be analysed.

- 22. If the laboratory cannot analyse a sample, the client is told within 1 working day of the laboratory's notice, with the reason and the options for a repeat, as the Returns and Cancellations terms set out.
- 23. Any sample with no result 5 working days after collection is chased with the laboratory, and the client is kept informed.

Employer funded programmes.

- 24. Individual results go only to the employee. The employer receives only an anonymised report on the programme, and only where the group includes five or more people.
- 25. Critical and abnormal results in an employer funded programme follow exactly the same process. The employer is not told.

Records, monitoring and review.

- 26. The critical results log records the time the result was received, each contact attempt, what the client was told, any welfare check and the outcome.
- 27. At each quarterly governance review, the Clinic Manager and the Managing Director review every critical result and a sample of routine results, checking that validation took place and that timescales were met. Any missed timescale is reviewed under the Significant Event Analysis (SEA) Policy (CG-08).
- 28. The agreement with the laboratory must match this policy on critical result notification. The laboratory's written confirmation of its critical limits is kept with this policy.
- 29. This policy is reviewed every year.

Law and guidance.

Health and Social Care Act 2008 (Regulated Activities) Regulations 2014, Regulation 12 (safe care and treatment) and Regulation 17 (good governance).

Royal College of Pathologists. (2025). Best practice recommendations: The communication of critical and unexpected pathology results (G158, version 2, draft for consultation). London: RCPath.

UK General Data Protection Regulation, Article 9(2)(c).