



The Royal College of Pathologists

PRESS RELEASE

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Summary statement from The Royal College of Pathologists in response to the Carter Report published today Wednesday 2 August 2006:

“If we don’t modernise pathology – for example, cervical smears, blood tests, biopsies for cancer, diabetes testing – as this Report says, then patients in the UK won’t benefit from the same standard of diagnosis that other countries in Europe and the west offer. This means that doctors will find out what’s wrong with patients later and less accurately, which means the treatment won’t be tailored to the disease possibly in time, or as well as it would have been if it was diagnosed earlier.

This Report is very cautious about privatisation. The Royal College of Pathologists welcomes that caution. We need the Government to take heed of the whole of this Report.”

The Royal College of Pathologists’ response to the Independent Review of NHS Pathology Services in England, by Lord Carter of Coles Wednesday 2 August 2006 (3 pages in this response)

The Royal College of Pathologists welcomes the long-awaited Report by Lord Carter of Coles, and acknowledges the hard work and extensive consultation that has gone into producing it. We are gratified by the extent to which Lord Carter recognises the quality of the current pathology service provided in England. The report recognises that pathology is continuing to provide an effective service in a climate where demand is inexorably rising, where budgets are tight, facilities are often poor and that the service continues because of the great professionalism and commitment of the staff, despite, in many circumstances, poor logistical support. The report acknowledges that pathology has provided no impediment to achieving the eighteen week targets, and recognises the problems inherent in providing a phlebotomy service, in sample delivery and transport and of piecemeal provision of IT services over which pathology has generally little control.

While we acknowledge that the current provision of pathology services can easily meet demand, we are also aware that there is no room for complacency, and we agree that there is opportunity for change in working practices that can lead to economies, and a more efficient and rapid service, without compromising the quality, and the current high level of support for teaching, training and research.

We are pleased that Lord Carter recognises the importance of the totality of the NHS service, highlighting the dangers of fragmentation that could lead from an indiscriminate development of plurality providers, with the adverse effect that this would certainly have on patient outcomes.

We endorse his statement that there should be a level playing field between the NHS and Independent Sector Providers in competing to provide the service. We are aware that there are many areas in England where the configuration of the service would not be attractive to the Independent Sector, and do not feel that they should have ‘carte blanche’ to cherry pick the high volume service, low cost in areas where transport costs are low and logistics easy. This could only impact adversely on the base line costs of the residual NHS pathology services to the ultimate detriment of the service in general and on overall costs. We do, however, accept that some joint working with the Independent Sector could be of value, because of access to resource and capital, and for the expertise in logistics and business management. We do also support Lord Carter’s statement that “economies of scale are only effective to a certain point, and that it has been shown, particularly in North America, that services can be too large to the ultimate detriment of patient care”.

We are interested by the suggestion that the service should not only look at Managed Pathology Networks, but that these should be established as free standing organisations, having many of the characteristics of NHS Trusts, although not constituted as statutory bodies. We do agree that this could provide an organisational framework that would set the pathology services aside from parent NHS Trusts, with the vagaries that that clearly has on budgets, equipment provision and the ancillary services that are so important for the pre and post analytical aspects of the service.

We will continue to strive for the common application of the National Quality Framework. We support the importance of establishing an appropriate cost-base for the service that will require the full co-operation of the profession in developing sensible tariffs that reflect the diverse nature of the service throughout England.

We do not currently see that in the current proposed system for health resource groups in pathology (HRG4), as currently being developed by the Payment by Results team.

We strongly support the concept of the development of pilot projects, looking at the service in urban, rural and metropolitan environments. This will highlight the specific logistics required to provide a service in such different areas, and the use of such a scheme to pilot pathology networks in such widely disparate geographical areas will help develop a responsive service. This will allow us to explore ways in which greater efficiency can be achieved by altering the service that each laboratory provides across the network, and the optimum size of such groupings. Such a service will allow us to develop service level agreements that specify quality standards, and an appropriate level of reimbursement for the specified service volumes that reflect local circumstances.

The College has already embarked on a number of the initiatives that Lord Carter has highlighted, having already recognised these as important developments for the future of the service.

- We recognise the importance of identifying new technology that can be introduced in a controlled, adequately costed and homogenous fashion.
- We have also embarked on a project to look at standardisation of results and reference ranges with other specialist groups.
- We are discussing how the genetic service and the pathology services can work together.

- The report highlights the importance of demand management and again we recognise the importance of this, although acknowledge that it will be difficult to achieve without properly functioning and effective IT systems.
- Over all this, we see the importance of quality assurance and the maintenance of standards, and the importance of a flexible and responsive accreditation process that covers all pathology services irrespective of their size or problems.
- The College is also developing an electronic database that will allow us to have a proper understanding of the diversity of the pathology workforce, covering both medical, clinical scientist and biomedical scientist groupings, and do strongly believe the future of the service will depend on the close integration and working of these three groups.

We are pleased that the Report acknowledges the importance of the Department of Health in properly supporting these initiatives, covering such areas such as end-to-end IT connectivity, dissemination of clinical best practice, a standardised reimbursement mechanism that would encourage continued investment in new tests and new technology, and a reform of the workforce, with intelligent and flexible workforce planning. In particular, we endorse the development of arrangements for promoting contestable services, with the establishment of a level playing field between the public and independent sectors.

We particularly support the underlying concept of the Review that states that the service should depend on the best quality and value and not just cost, and the College looks forward to working with the Department in the development and evaluation of the pilot projects, as we strongly support the concept that before any significant developments in reforming the supply of pathology occur, these must be properly evaluated and should certainly precede any development of a commissioner led model of provision.

We acknowledge and thank Lord Carter and his team for the hard work that they have put into developing their Review, and in particular the fact that he has responded to the many representations that he has received from providers of the service. We particularly support his acknowledgement of the importance of an integrated NHS Pathology Service that is fit for purpose, and is not fragmented by the indiscriminate and uncontrolled introduction of the Independent Sector.

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