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College President

A time of important decisions for medicine and pathology

As I come to write my Presidential report for the *Bulletin* I realise how quickly three months comes around and the slow, and often frustrating, pace of change. I don't therefore apologise for revisiting the well trodden themes of recent *Bulletins*, as these are important times for pathology as well as the rest of medicine and decisions made now will have implications for us for years to come.

We expect Lord Carter's report to be presented to the Secretary of State in March and its contents will be known by the time you read this if, as we hope, it is published at the same time. While we don't know what the report will contain, it is clear from the comments that Lord Carter has made both in our own *Bulletin* and in the public arena that he is very much looking towards an emphasis on the quality of the service, economies of scale and the development of networking. The opportunities for any significant financial saving seem to be fairly remote as the efficiencies of the service become apparent. The problems the report will face reflect the nature of how the NHS has developed and the ability of Foundation Trusts to follow their own path. We wait to see what inducements can be used to encourage reform in the way that many of us feel important.

The logical way forward is through the Commissioners, but for them pathology remains a low priority. The College will continue to strive to educate them and involve them in the pathology diagnostic process. As part of our drive to influence the development of the service, we had a very successful and important meeting in January looking at the introduction of new tests, with a view to working with the Department of Health and the National Institute for Health and Clinical Excellence to develop the equivalent of a national formulary for tests that will aid the planned introduction of the new techniques' investigations, rather than duplicate the hurried and *ad hoc* introduction that we saw with HER-2 testing.

There is also currently a flurry of interest in the development of IT, which was of course one of Lord Carter's themes, with a realisation through Connecting for Health that pathology IT is a potential area for quick wins. This can only be something with which we concur and support, and I would hope that sometime in the early summer we can look at a stakeholder meeting for compu-

terisation along the same lines as the meeting organised for testing.

Pathology under-represented in *Our NHS Our Future* review

The review, *Our NHS Our Future*, continues with meetings for NHS staff, patients and members of the public across England putting forward their views as to how the local NHS will deliver health services in the future. These views will be channelled into each Strategic Health Authority's vision for locally delivered health care which will be published in the spring, and will be part of the larger *Next Stage Review* that Lord Darzi is undertaking.

We continue to feel that pathology has not had the attention it deserves in the review, and I have encouraged our Regional Councils to explore locally what their SHAs are doing. The College's vision is on our website and will provide a coherent and consistent approach to put forward. This is being developed by the Specialty Committees and very much parallels the vision of Lord Carter and his team in the development of networking and the collaborative delivery of services.

Part of the vision is extending diagnostics from secondary and tertiary care to primary care out in the community, and we are co-operating with the Department of Health and The Royal College of General Practitioners in benchmarking primary care pathology. The point that we will continue to reiterate is the importance of quality and standards in the provision of diagnostics, wherever they are situated.

Don't forget the workforce database

Of course we are all aware that we cannot provide a service without an adequate workforce, and the College is striving hard under its new Director of Workforce Planning, Tim Stephenson, to develop the electronic workforce database launched by his predecessor, Chris Foster, in the autumn. As of January, only 2% of medically qualified College

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members have logged on and updated their details, and I ask you all to do that. I apologise for any indigestion caused over the cornflakes by my picture on the back of the January *Bulletin*, and can guarantee if sufficient members log in we won't repeat the exercise!

Leadership and professionalism

As Lord Carter said in his interview in January, pathology often punches below its weight in terms of its importance to the NHS, its use of resources, and its impact on healthcare. This, in part, reflects what often seems like a lack of willingness to engage locally to put our message across. Provision of a high quality service is important but so is engagement in the future modelling of the service. I had the good fortune to attend a meeting in January on 'Frontiers in Laboratory Medicine', co-sponsored by the Association of Clinical Biochemists, where I spoke about leadership, management and professionalism in pathology, and made the point that although pathologists are excellent managers in resource utilisation and service provision, it is important to take the next step and become involved in clinical leadership and in the development and evolution of the service.

I have been very impressed, however, with the number of members who have taken on roles as medical and clinical directors and would certainly encourage this as a way forward. Both Sir Liam Donaldson, the Chief Medical Officer, and David Nicholson, the Chief Executive of the NHS, have recently spoken out in encouraging medical involvement in clinical leadership, and I can only reiterate and reinforce that point.

The Tooke Report and NHS:MEE

On 8 January, Professor Sir John Tooke published his final report on the Enquiry into Modernising Medical Careers. In addition to his initial recommendations, his final report included the recommendation to create a new body called the NHS: MEE (NHS Medical Education England). This body would relate to a greatly strengthened medical workforce advisory machinery and would hold the overall budget for postgraduate medical education, which would be ring-fenced and would act as a professional interface between policy development and implementation for postgraduate medical education and training. This would help promote national cohesion in England and would work with equivalent bodies in the devolved administrations to facilitate UK-wide collaboration.

We have written to the Secretary of State strongly supporting this move. While we accept this is a

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major development while the Health Committee continues to deliberate on the MMC programme, and Lord Darzi's *Next Stage Review* has not yet reported, we believe that this would provide the necessary foundations for Lord Darzi's vision of delivery outcomes for patients that would be amongst the best and safest in the world.

I also believe, with regard to training, that Ministers should look closely at the implementation of the European Working Time Directive for doctors in training, recognising the effects the reduction in working hours

has had on both training and patient care, and believe they should begin to look at the separation of training and service commitment and their relative contribution to the Working Time Directive. This seems to be the only way that many specialties can get adequate clinical exposure through service provision, while at the same time undertaking parallel but separate training.

Healthcare-associated infection

Following the recent reports on 'Clean Safe Care' and 'Hospital Organisation, Specialty Mix in MRSA', we are pleased to see that the whole area of healthcare-associated infection is being taken seriously. We now have the three committees through the Department of Health, The Social Partnership Forum and the House of Lords, which has a select committee to look at controlling the spread of communicable disease, and the College has been asked to become involved in all three areas. I hope that where appropriate we can also involve the relevant specialist societies.

There is much going on and I hope that we can move on from the rather feeble debate aimed at doctors' ties, cuffs and watches that we saw in the autumn and start concentrating on wider issues.

Clinical Excellence Awards

The list of national Clinical Excellence Awards was published at the end of October and College Members did well. It is always a difficult and rushed time of year but the College has now completed the process of recommendations and citations for next year's awards. I am grateful for the considerable efforts put in by the Regional Councils' Awards Advisory Committees and their respective Chairs. We try to make the process as open and transparent as possible, and encourage self-nomination through the Regional Councils.

It is always difficult, as the process starts before the previous year's awards are announced, and many members who fail to achieve an award often feel dispirited and do not resubmit subsequently.

This is the wrong approach and I would certainly encourage anyone in this position to reconsider next year. It is clear that awards are often not gained at the first time of asking and may require submission on more than one occasion to be successful. We start the process in July, when the Regional Councils constitute their local committees and inform members of the timetable for the local process. While we encourage self-nomination, I think it also important to identify those who we wish to encourage to put their names forward. I am still surprised by the modesty of some of our very active members!

I would also encourage those who are not yet eligible for national awards to apply for local awards as it is this initial step that puts you on the pathway to the national process, and does give local recognition for the major efforts that many of our members put into the service.

National Pathology Week

I can't, of course, have a Presidential *Bulletin* column without mentioning National Pathology Week, for which progress is coming on apace. I am very impressed by the efforts that members are putting in and by the enthusiasm with which our specialist societies and allied groups are offering ideas and commitment. You will get regular mailings from Ruth Semple, our Exhibition and Outreach Project Manager, on this and I exhort you to think about what you can do locally and contact Ruth so that she can explain what the College can provide by way of support. As part of this process, we are look-

ing at a logo for the College that can be used with the crest and will help brand National Pathology Week. This is part of our development of the visual identity of the College, of which you will hear much more.

Members become Fellows

At the AGM in November, various changes to the College's Charter were approved. One major step was the abolition of the 'Member' category of the College. As from 1 January 2008 all Members became Fellows and should now use the appropriate post-nominals. This is the culmination of the debate that we have had over the last 18 months and over the next few months those to whom it applies will receive new certificates and we will agree the formal process of its recognition. The changes also recognised Associates of the College, which will formalise membership of the College for those passing Part 1, and Affiliates. These latter will generally be members of the professions allied to medicine who work with College members, but are unable to attain Fellowship of the College by any of the current routes. Many of these Affiliates will benefit by a closer relationship with the College, for CPD and so on, and conversely many have much to offer from which the College can also benefit. This is a major development and step forward for the College.

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College House dinner: invitation

Wednesday 18 June 2008 at 6.45pm for 7.15pm

Painters Hall, 9 Little Trinity Lane, London EC4V 2AD

This is the only College dinner open to all College fellows and members. Guests will be invited from the pathology community, including past College Presidents and representatives from other societies. Please fill out the application form enclosed with this mailing to secure your place or email michelle.merrett@rcpath.org for a form.

