

### Our mission statement is to promote excellence in the practice of pathology and to be responsible for maintaining standards through training, assessments, examinations and professional development, to the benefit of the public.

The Royal College of Pathologists is a professional membership organisation with charitable status, concerned with all matters relating to the science and practice of pathology. Similar medical royal colleges exist for other specialists, such as surgeons, physicians and anaesthetists. We are not, as is sometimes supposed, a teaching college with students.

The College was founded in 1962 and received its Royal Charter in 1970. The total membership is 9976, of which over 7900 are based in the United Kingdom. Fellowship (denoted by the letters FRCPath) is obtained either by examination, by submission of published research work or by invitation of Council. College Fellows work mostly in hospitals, universities and industry. Our Fellowship includes several Nobel Laureates. There are currently 39 members of staff working in different departments at the College.

The main specialties of pathology that the College represents are clinical biochemistry, cytopathology, dermatopathology, clinical embryology, forensic pathology, genetics, haematology, histocompatibility and immunogenetics, histopathology, immunology, medical microbiology, metabolic medicine, neuropathology, oral pathology, paediatric pathology, toxicology, transfusion medicine, veterinary pathology and virology.

#### **Our objectives**

As indicated in the Royal Charter, the aims of the College are to:

- advance the science and practice of pathology
- further public education in the field of pathology
- promote research in pathology and disseminate the results.

The ways in which we do this include:

- setting standards for and overseeing the education and training in pathology
- setting standards of practice and organising workplace-based assessments and examinations
- monitoring workforce statistics and the appointment of pathology consultants
- updating our members via scientific meetings and symposia
- ensuring and monitoring a programme of continuing professional development for members and non-members
- developing and publishing guidelines on aspects of best practice
- maintaining standards of practice by promoting audit and quality assurance in pathology disciplines, and supporting accreditation for all pathology laboratories
- funding research, in association with industry and other partners in science
- advising Government departments, national organisations, medical and academic bodies on all matters relating to pathology
- promoting public understanding of laboratory-based medicine
- striving to increase public engagement and awareness of pathology.



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#### **President's** report



The first paragraph of my report last year concluded with the words 'It is clear that we face difficult times ahead'. Regrettably, I was right; but the College has risen to the challenge.

#### Maintaining standards by examinations

The core business of the College is to promote high standards in pathology. We constantly have to keep our curricula up to date and this year has seen the approval by the General Medical Council (GMC) of updated curricula in all the main specialties. In the process we were informed of a legal problem that necessitated the development of completely separate curricula in paediatric pathology, forensic pathology and neuropathology, all previously sub-specialties. This generated a huge volume of work but the process is now well under way, thanks to the efforts of College staff and Fellows working closely together. Credit is also due to the Examinations Department for a different reason: as President, I am rarely made aware of their existence, so smoothly and accurately do their processes run. Next year's challenge, as our candidates remind us, is to try to keep costs – and hence examination fees – down.

This College is unique in having a high proportion of non-medical scientists amongst its Fellows, so we continue to be closely involved in the Department of Health's 'Modernising Scientific Careers' programme. Our main role is in the development of curricula and examinations for laboratory scientists at the highest levels of training. This is well developed in some specialties, less so in others, but progress continues to be made in all areas.

#### Maintaining standards by revalidation

The Professional Standards Unit has had its workload extended by the development of medical revalidation, working with the Academy of Medical Royal Colleges, GMC and Department of Health. The complexity of this project is generated largely by the huge diversity of medical practice. This College has more variety than most, with 19 different routes to Fellowship by examination. How can a system of revalidation be developed that confirms

good practice equitably despite such diversity? Last year's work is currently being tested in national pilots of revalidation and a way forward is emerging. It will demand more work in the coming year, but that is what patients expect and we must deliver. This is key to ensuring the maintenance of high standards, which is why the College exists.

#### Maintaining standards of analysis

The College has acquired another role in the maintenance of quality, as the Joint Working Group on Quality Assurance is now formally a College committee. The 'JWG' oversees external quality assessment of laboratories. It has started to work on ways to improve the definition of analytical standards, to ensure that problems are rapidly corrected and that information on laboratory quality is made available where it is needed. The College has continued to have input into the development of clinical accreditation schemes, including Clinical Pathology Accreditation Ltd, which is now owned by the United Kingdom Accreditation Service.

#### Maintaining standards through a financial crisis

This year, much College activity has been expended trying to ensure that standards of pathology are maintained in the face of the economic downturn. The pressure to improve productivity by service reconfiguration has increased dramatically and with it has come increased involvement of the private sector in the delivery of pathology services. The concern of the College is the quality of the service, not how it is owned; but the introduction of the profit motive inevitably introduces fears that standards might be cut to boost profits. The fact that this is not unique to the private sector is highlighted by a recently proposed NHS contract for a 'numbers only' pathology service in primary care, specifically excluding any clinical guidance on test use or interpretation. Lord Carter's reports had warned of this pitfall and on this occasion a College intervention led to the proposal being dropped. But it is a constant struggle to ensure a sufficiently sophisticated understanding of quality in pathology amongst those responsible for commissioning the service. The College has published a statement on the reconfiguration of pathology services.

Our work to explain the importance of good pathology

to members of the public also continues, with another highly successful National Pathology Week and a developing Public Engagement Programme.

#### Maintaining standards for the bereaved

Sadly the last year has seen the reappearance of problems with the prolonged retention of some post-mortem tissue samples. However, unlike the problems ten years ago, almost all this year's problems related to forensic examinations, deaths with a strong suspicion of a criminal cause, despite such cases representing less than 2% of post-mortem examinations in the UK. An underlying problem seems to be a lack of clear obligations for decision-making and communication when samples are stored as potential evidence under the authority of the police. We have modified our guidance and the Human Tissue Authority has ordered a national audit, but we maintain that the solution lies in a change in the law. My predecessor, Professor Sir James Underwood, described the Human Tissue Act 2004 as "a sledgehammer that misses the nut". Tissue stored as potential criminal evidence is proving to be a nut that was missed.

I have commented on a few aspects of the work of the College that have been at the forefront of my attention in the past year, aspects that I hope illustrate the breadth of the important work that the College undertakes. But I cannot encompass the detail or the true diversity of the College's work in these few words. For that, you will have to read the whole of this Report, and even then I know that the authors find that space constraints do not allow them to do justice to the College's work.

Throughout this diverse activity, I hope that one common thread is apparent. It is not always stated explicitly, but it is invariably there in our attitudes. What we do is directed not towards our own benefit, but towards the delivery of the best possible healthcare for the patient.



Professor Peter Furness
President

# Setting and maintaining standards

#### Training and educational standards

The College's Training and Educational Standards Department is responsible for setting the standards for pathology training in the UK. Much of our work is regulated by the General Medical Council (GMC), and we are supported by the College Advisory Training Teams (CATTs) in Chemical Pathology, Histopathology, Medical Microbiology and Virology, which oversee specialist pathology training. Much of the CATTs' work this year had centred on preparing the curricula and assessment systems for Postgraduate Medical Education and Training Board (PMETB) final review, and formulating applications for new pathology subspecialties (see below).

**Key achievements** In June 2010, PMETB completely approved the curricula and assessment systems for histopathology (and its subspecialty cytopathology), chemical pathology, medical microbiology and virology, medical virology and medical microbiology.

In April 2010, we submitted to the Department of Heath our Stage 1 application for CCT specialty status as separate specialties for diagnostic neuropathology, forensic histopathology and paediatric pathology. We have now started work on the Stage 2 applications.

The final draft version of the infection curriculum will shortly be going to the Academy Infection Training Committee for final approval. After that, the draft curriculum will be circulated to specialist societies for feedback, edited and sent out for national consultation.

**Working together** The CATTs, on behalf of the Modernising Scientific Careers programme, are in the process of producing specialty training curricula for higher scientific training.

In April 2010, the Academy took on the role of promoting the Medical Training Initiative. The College is working to establish how the Academy could provide support for this.

#### **Looking forward**

- ▶ We continue to develop a quality-assurance reporting mechanism to the GMC through the Annual Specialty Report (ASR) and work will shortly begin on the next ASR for August 2009 to July 2010
- ▶ Dermatopathology is preparing to submit their Stage 1 application to the Department of Health, to be recognised as a subspecialty against a histopathology or dermatology entry on the Specialist Register.
- ▶ PMETB has approved the Acute Common Care Stem (ACCS) programme and the Department is part of a small working party set up to produce an extended ACCS programme.

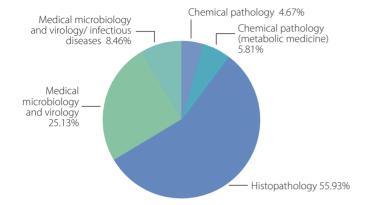
Dr Kevin West and Dr David Bailey Locum Directors of Training and Educational Standards



**Dr Kevin West** 



#### Registered trainees by specialty



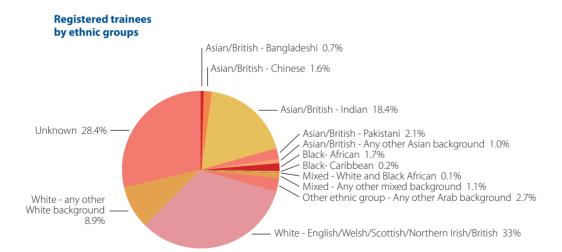


Table 1
CCT (Certification of Completion of Training) that the College recommended to PMETB (up to 26 March 2010) and GMC (from 1 April 2010)

Specialty	CCTs recommended
Chemical pathology	4
Chemical pathology (metabolic medicine)	5
Histopathology	102
Histopathology (forensic pathology)	1
Histopathology (neuropathology)	8
Histopathology (paediatric pathology)	2
Medical microbiology and virology	46
Total	168

The Joint Royal Colleges of Physicians' Training Board (JRCPTB) reported recommending 61 haematology and six immunology CCTs in the same period.

Table 2
Certificates of Eligibility for Specialist Registration that the College recommended to PMETB (up to 26 March 2010) and GMC (from 1 April 2010)

Specialty	CESRs recommended
Chemical pathology	1
Medical microbiology and virology	1
Histopathology	6
Neuropathology	1
Total	9

#### **Examinations and assessments**

Examinations and assessments are the principal means by which trainee pathologists are tested to ensure that they are appropriately trained.

The Examinations Department oversees the College examinations, which are taken in two parts. Part 1 is largely a test of knowledge of the specialty area and Part 2 is designed to assess the trainee's ability to use that knowledge in practical diagnostic pathology.

Increasingly in their training now, medically qualified trainee pathologists undergo less formal assessments designed to test their ability to undertake particular practical and clinical procedures, and contribute to patient management. Trainees are also required to undergo multi-source feedback (MSF) to provide a rounded view of their attitudes and capabilities by the people they work with. The assessments and the system (LEPT, Learning Environment for Pathology Trainees) for recording the results are the responsibility of the Assessment Department.

**Key achievements** This year we have had to report how the College examinations and assessment system met the standards of the training regulator, the Postgraduate Medical Education and Training Board (PMETB). Working together with the Department of Training and Educational Standards, we submitted the training curricula in all the specialties for medical trainees for which the College has prime responsibility, and formal approval was received in June 2010.

The College also runs the examination system for trainees in haematology and immunology, so the Examinations Department also submitted documentation to PMETB on those examinations jointly with the Joint Royal Colleges of Physicians Training Board, and was successful in receiving approval.

Last year, the College commissioned an evaluation of the workplace-based assessments and Year 1 assessments undertaken by pathology trainees from a team from Peninsula Medical School, led by Dr Julian Archer. The report summarises a significant quality-assurance analysis of the College's data and determines the utility of workplace-based assessments and Year 1 assessments (OSPE).

The web-based LEPT system (providing online documentation

of workplace-based assessments and MSF) was launched during Autumn 2009. It also supports the Annual Review of Competence Progression (ARCP) process by providing an online Educational Supervisor Structured Report (ESSR) form. It enables trainees to document their learning and build up a portfolio to demonstrate their experience.

**Looking forward** Many users have found the LEPT system similar to other e-portfolios and have found it easy to use. However, we are working with the Training and Educational Standards Department to develop training and interactive videos or screenshots to enable it to be used more effectively.

We are also working together to provide a welcome day for new trainees to pathology. This will aim to introduce them to the College and the ways in which their training is monitored and assessed.

The Examinations Department has been asked to look at the possibility of providing an examination in the scientific principles of genetics for clinical geneticists. This is being explored with the examination panel that currently runs the genetics exams for pathologists.

Dr Trevor Gray
Director of Examinations and Assessment

#### Revalidation, CPD and clinical audit

**Revalidation** The College continues to make a full contribution to the implementation of revalidation by the General Medical Council in its work with its sister organisations in the Academy of Medical Royal Colleges (AoMRC). This involves informal and formal consultations and policy development. We have completed the development of specialty guidance to assist in interpreting pathology framework and supporting information. Revalidation is now being piloted and we are working with the 'pathfinder' sites, in particular our paired site at University Hospital Leicester. This will inform our development of an advisory structure to support revalidation processes.



**Dr Trevor Gray** 







**Professor Peter Furness** 

We are also participating in the development of other aspects of revalidation of particular relevance to the College:

- ▶ membership of an intercollegiate group which has received funding to develop a common specification for an online system to support revalidation
- ▶ running a separately funded project in forensic pathology, which may have particular difficulties in developing revalidation because of the lack of conventional employer/employee relationships
- ▶ membership of an AoMRC group developing the use of medical notes in revalidation, to ensure that advice given by pathologists is part of the patient record
- ► conducting a pilot of multi-source feedback funded from AoMRC revalidation funds

**Continuing professional development (CPD)** The Professional Standards Unit has, with funding from the AoMRC, completed a review of the CPD scheme. This has enabled us to ensure the scheme is fit to meet the challenges of revalidation. The funding has allowed an increased staff resource in the department, to enable the review to be undertaken internally.

A new *Guide to the CPD Scheme* has been published, which incorporates changes to the scheme including moving to a rolling five-year cycle and a new policy on special circumstances in accordance with policies developed with our sister Colleges, in readiness for revalidation.

**Guideline development** We have collaborated with the Working Group on Cancer Services to publish five datasets and three tissue pathways, with a further three tissue pathways at consultation stage. We have also responded to 130 NICE consultations in accordance with deadlines. The College is working with NHS Evidence to ensure that the College is accredited as a guidance provider where appropriate.

Dr Lance Sandle
Director of Professional Standards

#### **Professional Performance Panel**

The Professional Performance Panel, composed of the most senior Officers of the College, meets to oversee the work of the Professional Standards Unit in respect of concerns about the quality of service delivered by specific pathologists or pathology laboratories. In recent years, the emphasis has been largely on departments where the standard of service has been questioned, rather than individuals, though on initial referral it is often difficult to determine where the problem lies. We have a Memorandum of Understanding with the National Clinical Assessment Service to address this.

We have given advice on the appropriate methods for evaluating standards on a number of occasions. But it is gratifying to report that most of these problems have been resolved locally and this year we have been directly involved in undertaking relatively few on-site assessments.

During the year, our new approach to defining the nature and seriousness of diagnostic discrepancies has been used in earnest for the first time. As hoped, it has delivered much improved information on the underlying problems, although plans for further refinement continue.

**Looking forward** The Professional Performance Panel is not directly responsible for the Professional Standards Unit's work on medical revalidation in pathology, but the two are closely linked and we anticipate that a major challenge for the coming year will be to develop training for appraisers to recognise consistently what is and is not acceptable performance in pathology. Whether medical revalidation generates an increased workload for the Panel, remains to be seen

Professor Peter Furness Chair

#### Steering Committee for Interpretive External Quality Assurance

**Our mission** This Committee monitors the activities of general and specialist histopathology external quality assurance (EQA) schemes in the UK, reviewing their annual activities and approving changes to their standard operating procedures.

**Key achievements** This year we have continued our successful oversight of schemes, confirming the satisfactory operation of the great majority of schemes, which provide opportunities to produce evidence of continuing professional development (CPD) and of activity that will contribute to recertification.

Working together We have worked closely with the National Quality Assurance Advisory Panel (NQAAP) for Histopathology, which monitors the performance aspects of histopathologists, and streamlined our overlapping roles. We also arranged educational activities for all our scheme organisers at our annual plenary meeting. In addition to histopathology, we have involved our haematological colleagues in activities and discussions. We continue to liaise with Clinical Pathology Accreditation (UK) Ltd to enhance the already high standards under which schemes operate.

**Looking forward** EQA is a major contributor to the evidence required for revalidation, which includes a need for mechanisms to recognise substandard performance, the current role of the NQAAP. For this reason, College Council has agreed to the merger of these two groups in Spring 2011. The educational role of EQA will continue alongside the performance-monitoring activity of NQAAP in a more efficient and streamlined process. This merger will ensure that the College has robust mechanisms in place for validation of the continuing acquisition of evidence for recertification.

Dr Ray McMahon Chair

#### Joint Working Group for Quality Assurance

**Our mission** The Joint Working Group for Quality Assurance (JWG) is a multidisciplinary group accountable to The Royal College of Pathologists for the oversight of performance in external quality assurance schemes (EQA) in the UK. Membership consists of the Chairs of the National Quality Assurance Advisory Panels (NQAAPs), the Institute of Biomedical Science, the Independent Healthcare Sector, the Department of Health and Clinical Pathology Accreditation (UK) Ltd.

#### **Key achievements**

- ▶ Several cases of unresolved instances of persistent poor/ substandard EQA performance have been managed through the Group.
- ▶ The Group's minutes and other relevant documents are now on the College website.
- ▶ A 'traffic light' system for grading poor performance in EQA is being assessed: green for no problems, amber for an episode of poor performance managed by the EQA provider/scheme organiser, red for persistent poor performance managed by the Panel, and black for unresolved persistent poor performance managed by the JWG. The exact details of the system, including consequences of reaching any given colour, are still being finalised.

**Looking forward** In 2010–2011, we aim to finalise the traffic light system, inform all EQA providers/scheme organisers and implement the new system. We will also ensure that cases of persistent poor performance in EQA, whether resolved at the Panel level or not, are managed quickly and robustly.

Dr Alec Howat Chair



Dr Ray McMahon



Dr Alec Howat



## Pathology in practice

The College represents all the different areas of pathology through its many Specialty Advisory Committees (SACs) and Sub-committees. It also deals with cross-specialty matters such as ethical issues in pathology.

#### Clinical Biochemistry SAC

**Our mission** The SAC in Clinical Biochemistry advises Council, Executive and President in all matters concerning clinical biochemistry, including: the training of doctors and scientists in clinical biochemistry; examinations; matters relating to registration and revalidation of doctors and scientists; continual professional development; accreditation issues; maintaining and setting standards of professional practice; research and development in clinical biochemistry; providing advice for guidelines and other documents from the Department of Health, NHS and other professional bodies and, importantly, to improve the public perception of the discipline of clinical biochemistry.

**Key achievements** This year we have been piloting implementation for 'recording of clinical advice' in conjunction with the College's Professional Standards Unit.

We have also successfully submitted to the Postgraduate Medical Education and Training Board an overall change in the practical examination of FRCPath into Part 2. This new format will commence in Spring 2011.

We have produced new guidance on out-of-hours training for

clinical biochemistry, and successfully implemented the National Assessors' Registration Scheme for Clinical Scientists.

**Working together** Collaboration between this Committee, the Association for Clinical Biochemistry (ACB), The Royal College of General Practitioners, the Institute of Biomedical Science (IBMS), this College's Lay Advisory Committee and the British Society for Haematology led to the publication of the Medicines and Health Products Regulatory Agency's (MHRA) Devices Bulletin 2010 (02), *Management and Use of IVD in Point of Care Testing Devices*.

Dr Danielle Freedman with the College's 2010 Flynn Lecturer, Dr John Land from University College London, at the ACB FOCUS meeting in Glasgow



The College is a stakeholder in the national 'Modernising Scientific Careers' initiative and we have worked closely with a Department of Health (DH) team led by the Chief Scientific Officer, Professor Sue Hill.

We are also involved in the DH National Laboratory Medicine Catalogue initiative, and are in consultation with the Pathology Harmonisation Project, looking at such areas as reference intervals.

We have representation on the National Institute for Health and Clinical Excellence (NICE) Diagnostics Committee, numerous NICE guidelines committees and the International Federation for Clinical Chemistry's Taskforce on Kidney Disease. We have also collaborated with the ACB in national clinical biochemistry audits.

#### **Looking forward**

Many members of this SAC continue to be actively involved in their Strategic Health Authorities, working on the Pathology Modernisation/Reconfiguration agenda. We are also keen to work with other SACs to advance the Clinical Leadership agenda.

We are working with the British In Vitro Diagnostics Association (BIVDA), Association for Clinical Pathologists (ACP), ACB and IBMS on the 'Labs Are Vital' project, continuing to raise the profile of laboratory professionals, particularly targeting the healthcare community in primary and secondary care.

Together with the ACB, our specialty – especially the trainees – was very proactive during National Pathology Week 2009, and we hope to build on this success in 2010.

#### Dr Danielle Freedman Chair

#### Genetics and Clinical Embryology SAC

**Our mission** The SAC, which also includes Metabolic Chemistry, aims to:

- ▶ assure the content and standard of examinations for FRCPath in the best interests of patients
- ▶ promote the highest possible standards of training
- ▶ monitor and assess the impact of new developments (e.g.clinical, scientific, legal) on professional practice and patient care.

**Key achievements** We have had a vintage year in genetics (cytogenetics and molecular genetics) with a large number of candidates successful in both Part 1 and Part 2 examinations. Clinical embryology has also seen a significant number of 'grandfathered' entrants to the College.

**Working together** Curricula developments are in progress following the successful implementation of the genetics pilot for Modernising Scientific Careers in 2009, leading to FRCPath in genetics or FRCPath in molecular pathology. Work on the latter qualification is being undertaken with the Histopathology SAC. In addition, a diploma-level RCPath (laboratory-focused) genetics examination (with input from The Royal College of Physicians) is in development for clinical trainees who wish to obtain this qualification.

The SAC has also identified members or other co-opted professionals to provide genetics representation for the following work:

- ▶ the National Laboratory Medicine Catalogue (NLMC), to provide a catalogue of tests that meet key quality criteria
- ▶ the Map of Medicine (MoM), to provide guidance as to which tests should be employed in a particular patient-care pathway.

These complimentary initiatives, which will mesh with the new NICE proposals, are particularly timely for genetics, with demand for tests increasing from both existing and new service users whose test requests may fall outside the 'Specialised Service National Definitions Set' for medical genetics.

**Looking forward** We anticipate ever closer cooperation within genetics and related disciplines to allow us to contribute to the delivery of examinations that reflect new training opportunities and to highlight the value of genetic tests within patient care pathways.

#### Dr Jonathan Waters Chair



Dr Danielle Freedman



**Dr Jonathan Waters** 



**Professor Michael Wells** 

#### Histopathology SAC

**Our mission** We strive to develop histopathology to meet the challenges of patient care in the 21st century and to ensure continuing excellence in our specialty.

**Key achievements** We have increased our interaction with the Human Tissue Authority (HTA) and participated in a meeting on the impact of the Human Tissue Act on research. The College is now represented on the HTA's Histopathology Sector Working Group, which will meet on a regular basis.

We have provided advice to our Fellows and other parties on a number of issues, including the handling of breast cosmetic reduction specimens and leaving tubes and cannulae *in situ* at post mortem.

We have contributed to the development of the medical examiner curriculum.

**Working together** Two working groups have been established: the first, chaired by Dr Anne Thorpe, is revising workload guidelines. A survey of histopathology Fellows has been carried out and the final report will be based on a time-based unit of calculation. The second working group, chaired by Dr John Goodlad, is developing a higher specialist training programme (FRCPath) for scientists in the molecular pathology of acquired disease.

We are carrying out an audit of altered cancer diagnosis at multidisciplinary team meetings with two pilot sites: Birmingham and Manchester.

There is increasing collaboration between this Committee and our counterpart in The Royal College of Pathologists of Australasia.

**Looking forward** Professor Ian Tomlinson has produced a report on the delivery of molecular pathology and in the coming year the complementary strands of delivery and training in molecular pathology will be brought together.

#### Professor Michael Wells Chair

#### Working Group on Cancer Services (WGCS)

Our aim is to ensure high standards of pathology, particularly in the reporting of cancers, through the production of datasets and quidelines.

**Key achievements** This year we published new datasets on soft tissue, primary bone, pancreaticobiliary, thyroid and endometrial neoplasms. Neuroblastoma, GIST and parathyroid datasets are due for consultation imminently. Revisions of lymphoma, skin and lung cancer datasets are in progress. The Specialty Advisory Committee (SAC) ratified an accelerated procedure for the minor revision of datasets.

Uropathology tissue pathways were published. Neuropathology tissue pathways are due for consultation and bone and soft tissue pathways are being produced.

We modified the authors' guidelines in line with requirements for NHS Evidence accreditation and to comply with AGREE standards (www.agreecollaboration.org). With the SAC, we wrote an interim statement on TNM7 implementation and are consulting further with subspecialty leads.

**Working together** We are working with the National Cancer Intelligence Network to align pathology data in reporting proformas with information required for the national cancer dataset and will soon publish the results of a survey of pathologists' current practices in data collection and transfer.

The Group is collaborating with The Royal College of Pathologists of Australasia (RCPA) to align core content of cancer reporting proformas.

**Looking forward** After completion of the TNM7 consultation, we will start the annual cycle of dataset revision. New datasets have been commissioned for anal, adrenal and liquid haematological malignancies, carcinoma of unknown primary and mesothelioma. We are developing new ophthalmic datasets with the RCPA and exploring alignment of reporting proformas with North American pathology organisations.

#### Dr Lynn Hirschowitz Chair

#### Cytopathology Sub-committee

The Cytopathology Sub-committee provides expert advice on all aspects of cytology and continues to respond to the changes in cytology provision and practice.

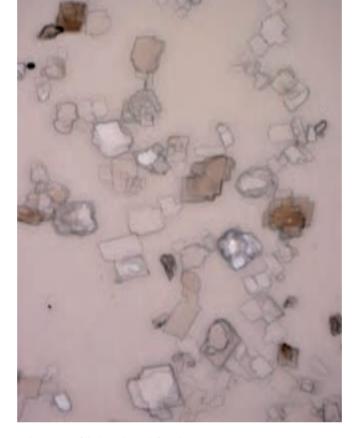
**Education and training** Our guidelines on reporting thyroid cytology and tissue pathways for exfoliative and fine needle aspiration cytology have been published on the College website. They will inform examination setting, benefit CPA (UK) inspections and ensure the maintenance of clinical standards.

Concern remains about candidates' performance in the cytology component of the Part 2 FRCPath examination, particularly the non-gynaecological cytology component. Although cervical cytology will be optional in stage C training and a Part 2 examination in conventional cytology will be offered for the last time in Autumn 2010, non-gynaecological cytology remains a core component of training and perceived deficiencies in training are under active discussion by the Histopathology and Cytology College Advisory Training Team.

**Working together** In consultation with the Institute of Biomedical Science, it has been proposed that synovial fluid cytology should be added to the repertoire of specimens reported by appropriately trained biomedical scientists. The College, jointly with the British Society for Clinical Cytology, has undertaken a survey of the cytology workforce to assess current and inform future provision of the specialty.

**Looking forward** Initial results of the Manual Assessment Versus Automated Reading In Cytology (MAVARIC) study of cervical cytology automation in England cast doubt on the value of automated technology in the NHS Cervical Screening Programme, but we will continue to monitor the continuing rationalisation of cervical cytology laboratory services, particularly in relation to the impact on training and provision of HPV testing.

Dr John Smith Chair



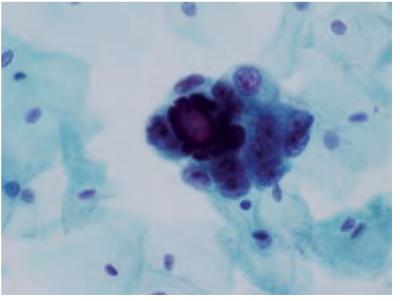
A direct smear of cholesterol crystals from the degenerate centre of a bursa on the foot



Dr Lynn Hirschowitz



Dr John Smith



Serous carcinoma of the ovary in a liquid-based cervical cytology specimen



Dr Maureen Walsh

#### Dermatopathology Joint Sub-committee

Mission Our Sub-committee represents both dermatologists and pathologists who have an interest in dermatopathology.

We aim to ensure that all dermatopathologists, whatever their background, report to the same high professional standards.

**Key achievements** We continue to move forward with the replacement of The Royal College of Pathologists' Diploma in Dermatopathology with the FRCPath in Dermatopathology.

We are also in the process of submitting an application to the Postgraduate Medical Education and Training Board/General Medical Council (GMC) for recognition of dermatopathology as a new subspecialty entry (under either histopathology or dermatology) on the GMC Specialist Register.

#### **Education**

- ▶ Dermatopathology in the UK continues to be popular, with many courses organised.
- ▶ As part of the new National Specialist Dermatopathology External Quality Assessment (NSDEQA), there is usually an education component to the meeting with a lecture in dermatopathology.
- ▶ Many centres run a variety of courses in dermatopathology for trainees, general and specialist pathologists.
- ▶ The British Society for Dermatopathology also runs a training day and a joint meeting with the British Association of Dermatologists.
- ▶ Regular updates are held jointly with the British Society for Dermatopathology and The Royal College of Pathologists.

Working together We continue to work closely with the British Association of Dermatologists and our European colleagues in both pathology and dermatology to raise the standard of dermatopathology throughout Europe.

#### **Looking forward** We aim to:

▶ move forward with getting dermatopathology recognised as a subspecialty by the GMC

- ▶ continue to foster good relations with international colleagues in dermatopathology
- ▶ continue to set standards for dermatopathology practice in the UK.

#### Dr Maureen Walsh Chair

#### Forensic Pathology Sub-Committee

The Sub-committee works closely with the British Association in Forensic Medicine (BAFM), the National Policing Improvement Agency, the Forensic Science Regulator of the Home Office and the mass fatality teams of the Home Office and Department of Health (Imaging) on aspects related to the delivery of clinical practice and standards.

**Key achievements** Over the last year, we have been active in two key developments for forensic pathology practitioners throughout the UK. First, we have been engaged in the process of gaining independent recognition as a distinct branch of pathology, reflecting the current view of the College, and stakeholders, with regards the role of forensic pathology within the criminal justice system. Our working group is drafting the Stage 2 application to apply for the discipline's own Certificate of Completion of Training (CCT).

Our second workstream relates to the pilot study for revalidation for forensic pathology. Funding has been secured to undertake an 18-month study to make recommendations to assist UK forensic practitioners in all forms of employment to revalidate smoothly.

Working together to ensure quality We continue to work with other groups and agencies in setting standards for medicolegal practice. The joint Home Office/Royal College of Pathologists' code of practice, as well as mortuary standards documentation, are nearing completion. We are assisting the College with updating the guidelines related to the role of a pathologist in a mass-fatality incident.

**Education** Forensic pathologists continue to contribute to College and learned society meetings with medicolegal content. Another symposium on 'Coroner's Autopsy' is to be hosted by the College in September 2010 and will again be largely delivered by forensic pathologists.

#### Professor Guy Rutty Chair

#### Neuropathology Sub-committee

This Sub-committee works closely with the British Neuropathological Society in advising on aspects of clinical practice and developing standards.

**Education** The panel of examiners in neuropathology, led by Dr Xuereb, has been developing standardisation of assessments. Strategies for ensuring the continued validity and reliability of the assessments are being implemented.

**Key achievements** The most important initiative has been the submission of an application to recognise the status of neuropathology as a distinct specialty. In 2009, the College agreed that neuropathology would become aligned to its own Certificate of Completion of Training (CCT) under the Postgraduate Medical Education and Training Board. The application process is complex and has been led by Dr Xuereb.

Colleagues have recently contributed to revising codes of practice for clinical neuropathology. Advice has been prepared for retention of the brain and spinal cord in post-mortem examinations in which criminal proceedings are likely. Dr Smith and Dr Dawson led the creation of guidelines for brain examination in patients with traumatic brain injury, and Dr Dean led a revision of tissue pathways for disease of the nervous system.

**Looking forward** We are developing guidance on scenarios specific to the conduct of post-mortem examinations for different diseases affecting the nervous system.

We are also involved with developments to establish a national approach to post-mortem brain banking. This is seen as a vital component of research into brain disease in the UK. Led by Professor Ironside, links have been established with the Neuropathology and Brain banking Clinical Studies Group in the National Institute for Health Research Dementias and Neurodegenerative Diseases Research Network and the UK Brain Banks Network.

#### Professor James Lowe Chair

#### Immunology SAC

**Mission** The purpose of the Committee is to:

- ▶ advise Council, making recommendations on actions and policy relevant to immunology
- ▶ promote the profile and development of the specialty and of pathology generally
- ▶ contribute to workforce planning
- ▶ provide input to external organisations, including Departments of Health
- ▶ liaise with other professional, advisory and educational bodies
- ▶ support specialty training at all levels
- ▶ promote quality and high standards as fundamental principles in immunology.

#### **Kev achievements** We have contributed to:

- ▶ the Joint Royal Colleges report, Allergy: Still not meeting the unmet need
- ► PMETB/GMC training curriculum approval (led by the Joint Royal Colleges of Physicians' Training Board)
- ▶ specialised allergy services definition
- > specialty revalidation standards
- ▶ national childhood allergy pathways development (led by The Royal College of Paediatrics and Child Health)
- ► specialty representation with Clinical Pathology Accreditation (UK) Ltd and the National Pathology Benchmarking Service
- ▶ NICE guidelines, appraisals and health technology assessments.



**Professor James Lowe** 







Dr Kay Poulton

Working together SAC members, representing the College or other bodies, collaborate widely with immunology service users and professionals working in (or allied to) the specialty. Advisory input to College structures is augmented by strong external working links with stakeholder bodies such as The Royal College of Physicians, specialist professional societies and patient organisations. Specific inputs to specialty career training are made through:

- ▶ FRCPath examination restructuring
- ▶ curricular development (Medical, Modernising Scientific Careers)
- ▶ deanery annual and penultimate year trainee assessments
- ▶ defining out-of-hours training requirements.

**Looking forward** Challenges will include:

- ▶ revalidation
- ▶ the National Laboratory Medicine Catalogue and European Invitro Diagnostic Medical Devices Directive review projects
- ▶ allergy's continuing unmet needs
- ▶ defining core content for undergraduate curricula
- ▶ the financial downturn and pathology reconfiguration.

#### Dr Richard Herriot Chair

#### Histocompatibility and Immunogenetics Sub-committee

**Our mission** Our group, a sub-committee of the Immunology Specialty Advisory Committee (see above), serves as a reference point to provide appropriate clinical comment on matters arising that affect matching for transplantation, and upon immunogenetic testing as an aid to diagnosis or treatment.

**Key achievements** This year has seen a significant increase in the histocompatibility testing of potential organ donors for solid organ transplantation programmes. This is a consequence of the national reorganisation of deceased donor transplant coordination, and the instigation of national organ retrieval teams.

Working together Fellows of the College have been working together with the British Society for Histocompatibility and Immunogenetics and the British Transplantation Society to produce national guidelines for the detection and characterisation of clinically relevant antibodies in allotransplantation, which were published in May 2010. This document describes the scope of all laboratory tests performed in this area, and provides information on the interpretation of tests to obtain a graded assessment of immunological risk to the patient before and after transplant. The aim of the document is to maximise the safe and effective use of all available donors.

**Looking forward** In the coming year, it is expected that the number of transplants performed in the United Kingdom will further increase, as strategies to promote organ donation mature. Programmes supporting this campaign include the living donor programme, paired/pooled kidney exchange schemes and antibody incompatible transplantation.

#### Dr Kay Poulton Chair

#### Medical Microbiology SAC

**Our mission** To discuss and advise Council on all matters relating to the practice and development of medical microbiology.

**Key achievements** In collaboration with the College Advisory Training Team (CATT), we have developed advice on out-of-hours training within microbiology. We have initiated a comprehensive review of the achievements of the 'Blue Skies' process and have started a process to shape the discipline in response to the changing environment of the provision of healthcare.

**Working together** We have revised and updated our terms of reference and membership, ensuring representation from specialist societies, devolved administrations and Ireland. With support from the Virology Sub-committee, we have provided materials to support events for National Pathology Week.

**Looking forward** Together with the CATT and specialist societies, we will be developing plans to provide post-CCT credentials in the sub-discipline of medical microbiology.

We will also be working closely with the CATT and the Joint Committee for Infection and Tropical Medicine to develop the concept of the 'infection specialist', to adapt to the changing landscape of service provision.

We will tackle the problem of providing better support for academic microbiology.

#### Professor Stephen Gillespie Chair

#### Virology Sub-committee

#### **Our mission**

The role of this Committee is to discuss all matters relating to the practice and development of clinical virology in the UK.

#### **Key achievements**

- ▶ We have developed draft guidance for Clinical Pathology Accreditation (UK) Ltd on specialist virology testing, which is currently being considered by the Specialty Advisory Committee (SAC) on Medical Microbiology.
- ▶ Committee members have developed a generic PowerPoint presentation on blood-borne viruses and syphilis in relation to the pathologists' role in antenatal screening, which is on the National Pathology Week website and is available for use by all, with local customisation.
- ▶ Dr Bill Carman led the successful development of several elearning virology modules.

**Working together** We work closely with the College's Advisory Training Team on Virology, SAC on Medical Microbiology and Examinations Department, and the Clinical Virology Network.

**Looking forward** The Virology Sub-committee will be discussing issues around service reconfiguration options as part of the Department of Health's Pathology Modernisation initiative, in order to support this process.

#### Dr Tim Wreghitt Chair





Professor Stephen Gillespie



Dr Tim Wreghitt

## 9

Dr Michael Ashworth

### A watercolour of a post-mortem specimen from 1872, 'Lung abscesses', signed HB Tuson. The post-mortem was carried out on a patient at Great Ormond St Hospital for Children and original examination report is in the GOSH archive

#### Prenatal, Perinatal and Paediatric Pathology SAC

**Mission** The purpose of this Committee is to advise the College on service provision and training in paediatric pathology and to consider the impact of developments in other fields on the specialty. It is a cross-discipline Committee, with representatives from microbiology, chemical pathology and haematology, reflecting the unique nature of pathology in children.

**Key activity** Last year, a lot of paediatric microbiologists' and histopathologists' time was taken up with H1N1 influenza. A great deal of the attention of the Committee has also been directed at obtaining separate subspecialty status for paediatric histopathology. The application is now with the Department of Health and a decision is expected by the end of the year.



The curriculum for training in perinatal and paediatric pathology has been rewritten and will be submitted for approval for the Postgraduate Medical Education and Training Board for approval, with the aim of implementing it from the end of 2011. This aims to supply high-quality candidates to fill vacant consultant posts.

**Working together** We have provided assessors for the National Confidential Enquiry into Patient Outcomes and Death, which is looking at surgery in children. We have also had input into the *Guidelines for Investigating Sudden Unexpected Postnatal Collapse*.

**Looking forward** The coming year will see the development of a new programme for paediatric and perinatal pathology training. Paediatric pathologists are also actively involved in the development and assessment of the minimally invasive and molecular autopsy.

#### Dr Michael Ashworth Chair

#### **Toxicology SAC**

We advise Council on issues concerning the adverse effects of chemicals in humans. These chemicals may be drugs, natural products or synthetic compounds, but the essence of toxicology is to understand the mechanism of adverse reactions in humans and estimate the risk to the population and the environment. We aim to ensure that the College is kept informed of toxicological issues and to provide expert advice as required.

**Key achievements** In May, we sponsored a successful meeting where approximately 50 participants were brought up to date on recreational drugs. The meeting highlighted the medical and socioeconomic problems associated with the use of non-medicinal drugs and reviewed the analytical methodology currently available to detect drug abuse. Topics ranged from alcohol abuse, particularly binge drinking, drugs associated with crime and sexual assault, to cannabis and the so called 'smart drugs', which may enhance cognitive function.

**Working together** We continue to interact with other professional and learned societies and have strong links with the British Toxicology Society, the British Society of Toxicological Pathology, the Association of Clinical Biochemistry, The Royal College of Physicians, the Royal Society of Chemistry, the British Pharmacological Society and the Register of Toxicologists.

**Looking forward** Within toxicology, there are many subspecialties and we continue to develop these areas for our trainees. A new syllabus is being developed for reproductive toxicology and revision of the medical toxicology syllabus is planned for next year. We also hope to support another academic meeting around the topic of sports medicine.

Dr Heather Wallace Chair

#### **Veterinary Pathology SAC**

**Our mission** This Committee represents a diverse group of veterinary surgeons and scientists who work in academia, the pharmaceutical industry, disease surveillance and commercial diagnostic laboratories.

**Key achievements** The highlight of the Committee's year was the organisation of a joint academic meeting between the British Society of Toxicological Pathologists and The Royal College of Pathologists on the pathology of mouse models used in research. The meeting, organised by Professor Cheryl Scudamore, attracted over 60 pathologists and other scientists. It concluded with a discussion on how we should look to develop training opportunities in comparative pathology to fill the critical skills gap in this area of pathology, which underpins much biomedical research. Veterinary Fellows of the College also participated in meetings of the British Society of Veterinary Pathologists, British Society of Toxicological Pathologists, and Association for Veterinary Teaching and Research Work.

**Working together** We work closely with the College's Specialty Advisory Committee on toxicology and have reciprocal representation on Council, thereby ensuring collaboration on shared issues of concern, such as the training needs of young veterinary pathologists and toxicologists. We also hope to build on this year's joint meeting by sponsoring other events of interest to comparative pathologists with veterinary and medical backgrounds.

**Looking forward** Challenges for the year ahead are to maintain the identity of the College's examinations in veterinary pathology against the increasing popularity of the examinations offered by the European College of Veterinary Pathologists, and to act as a voice for veterinary pathologists within the veterinary profession through the establishment of links with The Royal College of Veterinary Surgeons.

Professor Ken Smith Chair

#### Standing Committee for Clinical Science

**Our mission** The role of this Committee is to develop and promote the contribution of clinical science and the clinical scientist to pathology and laboratory medicine.

We have facilitated two major achievements in the last year.

National Assessor Scheme for Clinical Scientists The College has now launched this scheme, which will provide employers with assessors to sit on appointment panels and regrading exercises for clinical scientist appointments in Agenda for Change bands 8c, 8d and 9. This College initiative has been approved by the Department of Health and replaces the National Assessors list previously coordinated by the Department of Health. We have requested lists of proposed assessors from professional bodies and asked them to circulate details of the scheme to their members, who may wish to self-nominate using the application forms on the College website.



Dr Heather Wallace



Professor Ken Smith







Professor David Marks

Healthcare scientists and FRCPath We have facilitated discussions on the eligibility of biomedical scientists for entry for FRCPath examinations. The recommendation that biomedical scientists are in principle eligible to study for and take the FRCPath examination subject to them satisfying College regulations has been endorsed by College Council.

#### Working together

- ▶ We have facilitated improved collection of workforce data with the professional bodies.
- ▶ There are ongoing discussions regarding the development of Modernising Scientific Careers plans.
- ▶ We have input to committee discussions from the Federation of Healthcare Scientists

**Looking forward** The most important aspect of our forward plan is to monitor and actively contribute to Modernising Scientific Careers.

#### **Dr Tim Wreahitt** Chair

#### **Fthics Committee**

This committee considers matters referred to it concerning the ethics and practice of pathology (not in areas covered by research ethics committees). For the last year we have continued to take a proactive approach on emerging issues, aiming to gain representation on key groups deciding public policy and best practice. Issues related to consent, probity and confidentiality are commonly debated. Our terms of reference were reviewed and approved by Council in March 2010.

#### Towards a College policy concerning assisted suicide The Intercollegiate Ethics Committee discussed this issue as there is evidence that public opinion is changing and The Royal College of Nursing had changed its policy on the subject. We felt strongly that we should discuss the issue, and found no ethical objection to a doctor assisting with a patient's wish to end their life (under certain

specific circumstances) but we did not reach a consensus about whether the law should be changed. The issue was aired at Council and it was decided not to take a position at present but to revisit it within 3 years.

National consultations We discussed a Nuffield Council consultation on the provision of human tissue for medical research and will draft a combined response with the Research Committee. This included an opinion about payments to subjects for participating in 'first in man' trials.

**Clinical issues** We responded to a request from the Joint Professional Advisory Committee to examine the ethics of nonrelated blood donors donating therapeutic granulocytes after stimulation with granulocyte colony stimulating factor. This advice was forwarded to the UK Blood Services, which will use it to formulate their policy. We also responded to a consultation concerning consent for blood transfusion from the Advisory Committee for the Safety of Tissue, Blood and Organs.

**Future work** The majority of our work comes from 'referrals' from the President or other College committees, but we will continue to be proactive in giving our ethical advice where we think it can help policy-making in related disciplines. Many bodies are unaware that we are an easily accessible resource for the provision of ethical advice.

#### **Professor David Marks** Chair

Working in partnership

The College works closely with other medical royal colleges and professional associations via many working groups and intercollegiate and joint committees.

#### Intercollegiate Committee on Haematology

This Committee coordinates activities between The Royal Colleges of Pathologists, Paediatrics and Child Health, and Physicians, and the British Society for Haematology.

Many of the issues that we are asked to address concern the general professional aspects of being a haematologist. To support this work, the British Committee for Standards in Haematology (BCSH) has in the last year established a Professional Practice Committee that is able to seek views from the BSH's membership.

**Working with others** We have contributed to the development of the new curriculum in haematology, submitted by Paul Harrison as Chair of the Haematology Specialist Advisory Committee of the Joint Royal Colleges of Physicians'Training Board. The curriculum was accepted without requiring any changes – a major achievement. We have also worked with The Royal College of Physicians on the further development of a number of haematology-related pathways for the 'Map of Medicine'.

**Education and training** We organised a successful meeting for trainees that was aimed at promoting a career in academic haematology. The meeting covered topics such as: applying for

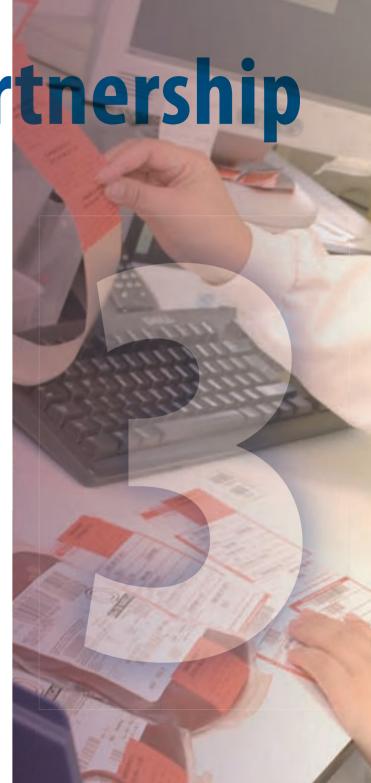
a research grant, choosing a MD versus a PhD, and guidance on developing a research programme after completion of academic training. The feedback from the 38 participants was very positive.

**Looking forward** We aim to help develop quality assurance schemes to support appraisal for haematologists in the areas of morphology, and the interpretation of laboratory tests of haemostasis. We will also explore the feasibility of establishing a programme of national audits in haematology, together with the BCSH.

Dr Mike Galloway Chair



Dr Mike Galloway





Dr Derek Norfolk

#### Transfusion Medicine Sub-committee

This Sub-committee reports to the Intercollegiate Committee on Haematology, joint with The Royal College of Physicians. Our mission is to advise Council, through the Specialty Advisory Committee on Haematology, on all matters concerning recruitment, training, examinations and developments in blood transfusion in the UK

We represent all the UK countries and are multidisciplinary - our members include doctors, clinical scientists and biomedical scientists. External organisations represented include the Institute of Biomedical Science (IBMS), Serious Hazards of Transfusion (SHOT) and the British Blood Transfusion Society.

#### **Kev achievements**

- ▶ Continued support for UK Chief Medical Officers' Better Blood Transfusion initiative, by promoting liaison between key groups.
- ▶ Publication of UK Transfusion Laboratory Initiative document (joint with the IBMS and SHOT).
- ▶ Supported development of a hospital-based transfusion training portfolio for medical haematology trainees.
- ▶ Organised an academic meeting on transfusion (see below).

#### **Looking forward**

- ▶ A major academic meeting, *Transfusion Tomorrow*, will be held at The Royal College of Pathologists in November 2010.
- ▶ Public engagement remains a priority and events are planned for National Pathology Week 2010.
- ▶ Providing input to medical revalidation agenda for transfusion medicine specialists.
- ▶ Monitoring the progress of Modernising Scientific Careers.
- ▶ Dealing with problems in training and recruiting transfusion medicine specialists in the UK, which we believe will be a major issue.
- ▶ Ensuring training in transfusion medicine is appropriately represented in undergraduate and postgraduate medical curricula.

#### Dr Derek Norfolk Chair

#### Joint Committee on Medical Genetics

The JCMG is the forum in which The Royal College of Physicians, The Royal College of Pathologists and the British Society of Human Genetics meet to promote and maintain the highest standards of practice and education, in both clinical and laboratory applications of genetics in health.

**Key achievements** The JCMG has worked with professional groups on major documents including the evolving Modernising Scientific Careers (MSC) programme, the response of key groups to the House of Lords' Science and Technology Committee 2009 report on genomic medicine and is about to publish the revised document on consent and confidentiality.

The first year of the MSC pilot in medical genetics training is almost complete and, despite initial difficulties, is now seeing encouraging results. The more generic nature of the training reflects the ethos of integration of molecular services into the pathology reorganisation and should provide significant benefit to all NHS pathology services.

**Looking forward** Medical genetics knowledge, technology and opportunities continue to expand exponentially. The current financial climate challenges us to maximise available resources. However, the consequences of financial cuts are already apparent with removal or reduction of funding to core components, including the National Reference Laboratories (NRLs) and the National Genetics Education and Development Centre (NGEDC).

The themes of the House of Lords' report included the development of personalised medicine, integration of new technologies and commercial collaboration. To achieve these aims, there needs to be significant educational input across all medical and non-medical science communities, expansion of training resources in bioinformatics and a programme to evaluate the new technologies, all areas the NRLs and NGEDC could have supported.

Establishment of the Human Genomic Strategy Group following the report is in its early days, but the long-term potential should be clearer by next year. The JCMG, Public Health Genetics Foundation and UKGTN are together looking at practical issues centred on mainstreaming genetics into medicine.

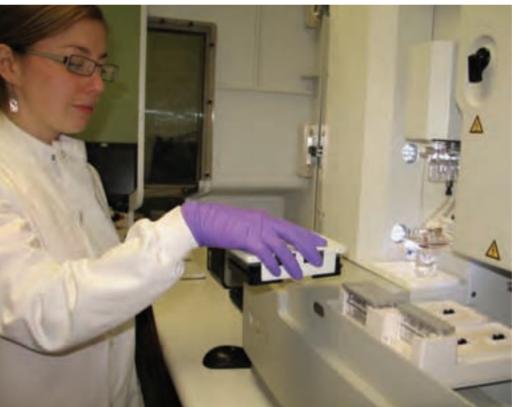
New technology, including microarrays and next generation sequencing, are now starting to have an impact on medical genetics services and these benefits will also become apparent soon. One serious concern is the possibility of European legislation under the IVD Directive, which could restrict NHS laboratory genetic testing. This is high on our agenda.

#### Dr Trevor Cole Chair



Loading an automated array hybridisation station with patient DNA

Loading patient samples onto a DNA analyser





**Dr Trevor Cole** 

## 9

**Professor Andy Wardlaw** 

#### Joint Committee on Immunology and Allergy

The JCIA, a joint committee between this College and The Royal College of Physicians (RCP) is a neutral forum for members of the immunology and allergy community to share information and develop common positions around clinically related issues. Over the last year there have been two major developments: the RCP working group set up to examine progress made in implementing the recommendations of the 2007 House of Lords' Committee on allergy, and the development of an accreditation process for allergy services.

#### Implementing the House of Lords' recommendations

The RCP working group reported in June 2010. The main recommendation of the original report was that each region should have at least one allergy centre, based on a 'hub and spoke' model. The North West was chosen as an exemplar. The main conclusion of the working party was that progress had been made in setting up a North West Allergy Centre, although this was based on a network model. Some progress had been made addressing the other recommendations of the original report, but allergy services in the UK remained patchy and under-resourced.

**Accreditation** The accreditation process came out of a proposal from the Clinical Immunology and Allergy section of the British Society for Immunology. It was developed by the JCIA because of the role of the RCP in standard-setting and its neutral status. After 12 months, we are now in the process of piloting a web-based version of the process. Once the results of the pilot are available, we will seek RCP approval for the JCIA to manage the process under the auspices of the College.

#### Professor Andy Wardlaw Chair

#### Joint Committee for Infection and Tropical Medicine

**Our mission** To discuss and advise the Councils of The Royal College of Physicians and The Royal College of Pathologists, on all matters relating to the practice and development of medical microbiology, infection and tropical medicine.

We have recently revised our terms of reference and membership, ensuring representation from specialist societies, Departments of Health and the devolved administrations.



The launch of the RCP's report at the House of Lords, June 2010

**Key achievements** We have completed the review of the infection material for the 'Map of Medicine' project.

**Looking forward** The Joint Committee, working together with the Specialty Advisory Committee (SAC) on Microbiology, College Advisory Training Team (CATT) and the specialist societies, will be developing plans to provide definitions of the post-CCT credentials in sub-disciplines of medical microbiology.

The SAC will be working closely with the CATT and the Joint Committee to develop the concept of the 'infection specialist' to adapt to the changing landscape of service provision.

In the coming year, we will attempt to improve contacts between academic infectious diseases and microbiology, and develop new plans to support those wishing to develop skills in these disciplines.

#### **Professor Stephen Gillespie** Chair

#### Intercollegiate Group on Nutrition (ICGN)

The College has hosted the ICGN since its inception in 1996. The Group, which is a formal member of the Academy of Medical Royal Colleges, comprises representatives of 12 medical Royal Colleges and the Faculty of Public Health, with observers from the British Dietetic Association, British Dental Association and the nursing and pharmacy professions. Our objectives are to set standards for knowledge, competencies and skills in human nutrition, and to deliver training to doctors to ensure their safety and competence to practise.

**Undergraduate education** We hosted meetings to which all UK medical schools were invited, to discuss strategies for improving the quality and delivery of nutrition education. The resulting implementation group has achieved the following to date:

▶ development of a core nutrition curriculum for undergraduate doctors, freely accessible from the ICGN website (www.icgnutrition. org.uk) and signposted in the latest version of the General Medical Council's (GMC) Tomorrow's Doctors

- ▶ a preliminary strategy for the development and sharing of elearning resources
- ▶ signposting from *Tomorrow's Doctors* to the ICGN website for further information, including the core curriculum
- research across UK medical schools into the quality of nutrition education for medical students.

Postgraduate education Following an ICGN initiative, the final Foundation Year 1/2 curriculum contains a specific nutrition module. The Intercollegiate Courses continue.

**Training** Government policies generate a clear need for a range of nutrition professionals working in the community. We are working with the Department of Health to identify the training needs for this workforce and the role of doctors in delivering it. Our Group is also a member of the Nutrition Professions Confederation, which aims to provide a common focus for all professions practising nutrition.

#### **Professor Pat Troop** Chair





Gillespie



Professor Pat Troop

Participants at the ever-popular Intercollegiate Human Nutrition



# UKand International regions

The College divides the UK into eleven administrative regions, each with a Regional Council. There are also International Advisors covering different regions of the world.

#### **East of England**

**Key achievements** The East of England Pathology Service Transformation Board includes senior members of the College and there is much enthusiasm from Council members and their constituents to be involved in implementing the principles of the Carter Report, which has to maintain quality at its core. The Strategic Health Authority's Medical Directorate supports professional development groups, active in the subspecialties of pathology. They meet regularly, often combining a business meeting with educational presentations. These groups will be critical in any redesign of regional services.

Regional Council has been extremely well supported by its members this year, giving a strong local focus to the College. We are fortunate in having three College Officers in our region and are particularly proud of Suzy Lishman's College Medal and Tim Wreghitt's Healthcare Scientist of the Year award.

The region delivered excellent events for National Pathology Week, inspired by Tim Wreghitt's leadership and our Council members, with equal enthusiasm expected for 2010.

**Looking forward** There are many challenges ahead in the region, including concerns over some single-handed posts and the shortage of clinical biochemists notwithstanding the financial imperatives.

I thank my fellow Council members for their support and energy during my term of office. I have enjoyed the role of Chair immensely and feel genuinely sad at demitting office at the end of the year. I am confident the new Council will rise to the agenda of the next three years.

Dr Susan Stewart Chair



**Dr Susan Stewart** 

#### London

We represent College members in the London area and convey their views to College, as well as acting as a conduit in the reverse direction. Our usual format is two Council meetings per year, interspersed with educational half-days, totalling four events per annum. This format has proved popular, and enables our London members to meet informally during the educational events.

Our latest education half-day was shared with the South East England Regional Council in June 2010. The topic was 'Pathology 2010 – Opportunities and challenges'. We were fortunate to have national speakers on pathology modernisation, addressing revalidation and discussing clinical leadership in pathology. It was very well attended and the feedback was excellent.

This year we have managed to reinforce even closer ties with the London School of Pathology. There was unanimous Council support in encouraging plans to use the College's Carlton House Terrace premises, if possible, to host the training programmes as well as the School's annual prize day. This would encourage trainees to identify with the College.

We are proactive in participating in the modernisation of the pathology services in London, and are adamant that high standards of pathology practice are protected and maintained in any reorganisation of services.

This year, in November, Dr Mallika Sekhar will be replacing Dr John Wong as Chair.

#### Dr John Wong Chair

#### Northern England

The Regional Council creates the opportunity for a group of people to focus on pathology for a few hours, four times a year. Discussions range from what they experience on a daily basis to what they would like in the future. It forms a rich source of advice for the Chair and informs and influences College Council.

This year, 'Quality, Innovation, Productivity and Prevention' (QIPP – or QIPPP, with an extra P for 'pathology'!) emerged. While there are natural concerns over disruption and separation from the front line of healthcare, the opportunity to look at new ways of providing the service came to the fore. Specific concerns over training and education and 'cherry picking' remain, and the size of the savings may be a stretch target too far. Yet colleagues were proud of what pathology has achieved and this was an opportunity to raise its profile.

The topic of revalidation crops up at every meeting, and generates sceptical interest. It has been a quieter year on the education front, but there remain strong differences of opinion on whether we are training generalists or specialists.

The meeting is a very useful forum for exchanging ideas and

giving publicity to and garnering commitment to events such as National Pathology Week and other College initiatives.

#### Dr John Drury Chair

A showcase for pathology specialties at the Royal Free Hampstead NHS Trust during National Pathology Week. The 'marketplace' included a stall run by the Department of Clinical Biochemistry offering point-of-care cholesterol testing, blood pressure measurement and consultation with a doctor.







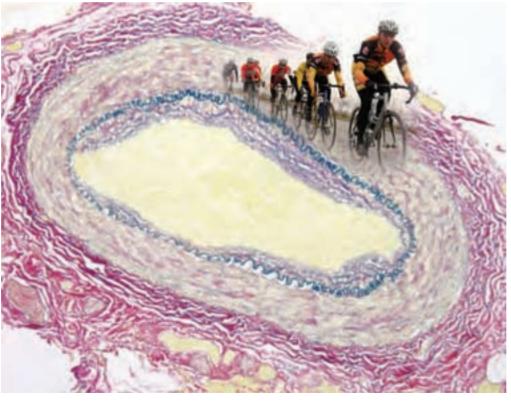
Dr John Drury



Interactive pathology display at



An exhibit from the Countess of Chester Hospital's 'PathArt' show during National Pathology Week: 'Preparation for 2012', demonstrating an artery as an imaginary racing track



#### Countess of Chester Hospital

#### North West England

#### **Kev achievements**

- ▶ Our well-established links with the Greater Manchester Pathology Network, one of the largest in the UK, have facilitated several successful projects, including supporting developments in cancer diagnosis, infection control, standardisation of test profiles and improved IT connectivity through GP order-requesting and reporting and laboratory-to-laboratory links.
- ▶ With assistance from the Manchester Pathology Network, we organised a garden at the 2009 Tatton Flower Show. It won a Silver Medal and was extensively covered by the press and media, including BBC North West. It was a useful publicity vehicle for National Pathology Week, which also attracted great interest and was a big success.
- ▶ We organised a successful joint symposium with Manchester Medical Society entitled 'Errors in Pathology'.
- ▶ Our Job Description Review Panel worked quickly to approve job descriptions and ensure sufficient SPAs (supporting professional activities) were incorporated into job plans.

#### **Working together**

- ▶ We are seeking mechanisms to work with the local Strategic Health Authority and be represented on the New Regional Modernisation Group.
- ▶ We continue to work with the College's Professional Standards Unit and Tutors to assist in coordinating the local process for revalidation.
- ▶ We represent the College on the North West Clinical Pathway Groups, aiming to strengthen the involvement of diagnostics in Lord Darzi's review, Our NHS, Our Future.
- ▶ We have developed close links with the Pathology School Mersey Region by co-opting its Head to our Council.
- ▶ We are engaging with Pathology Modernisation Groups throughout the region to ensure the delivery of high-quality, patient-centred services at the right time and in the right setting.

Dr Mohammad Al-Jafari Chair



Dr Mohammad Al-Jafari

#### Northern Ireland

The membership of the Northern Ireland Regional Council gives voice to specialty and geographic representation throughout the region. The current Council elections will maintain this and a suitable nomination has been made for the post of incoming Chair.

Northern Ireland Pathology Network The Northern Ireland Pathology Network was launched by the Chief Medical Officer in October 2009. We have held well-attended, informative and challenging Annual Symposia themed around its inception and progress to date, open to all those involved in the planning, management and delivery of the service. Several of our members participate in the Network structure, ensuring ongoing professional communication and advice. The 2010 symposium highlighted forthcoming economic pressures and the need for active clinical leadership from pathologists to respond to them.

**National Pathology Week** National Pathology Week 2009 was a great success, in collaboration with the Belfast W5 Science Centre, with a range of hands-on events attracting a high number of schools and enthusiastic young people. Similar arrangements are planned for 2010, based on the theme of 'Pathology: The building blocks of life'.

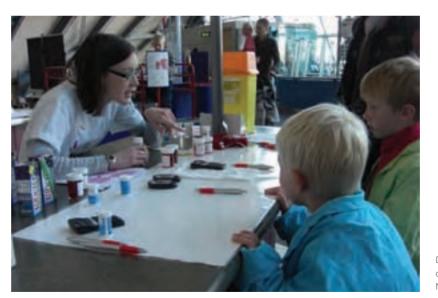
**Local reform** We continue to contribute to discussions on the reform of local medical advisory structures. A central medical advisory committee will be retained and a cadre of specialty advisors put in place in due course. The Northern Ireland Department of Health will determine trainee numbers with the Heads of School and Training Programme Directors. There will remain open access for professional input from the Pathology Network, Regional Council and individual Fellows.

Dr Derek Allen Chair

#### Scotland

**Our mission** The Scottish Regional Council (SRC) of The Royal College of Pathologists exists to represent Scottish pathology on all aspects relating to education, training, quality, professional standards and public relations, both within Scotland and the UK.

**Key achievements** Continued contribution has been made to a variety of consultations relevant to the practice of pathology, originating from key government agencies and outside organisations. Members have been involved in helping formulate progress with revalidation arrangements, new proposals for death certification and contributing to a variety of College policy statements. Ongoing input continues into recruitment at specialty trainee level, consultant appointments via the external advisors' system and curricula development.



Dr Derek Allen

Dr Jane McNeilly from Glasgow demonstrating point-of-care testing at National Pathology Week 2009



**Dr Bernie Croal** 

Working together Pathology reorganisation across Scotland continues to develop, with the further formation of specialty-specific managed networks. The SRC continues to forge important links with these networks, which are increasingly being seen as the direct interface between Scottish Government and frontline delivery of pathology services. Additional representation on the Scottish Academy of Medical Royal Colleges and the Scottish Joint Consultants Committee ensure that a pathology voice is present and contributing to national issues. Public engagement in association with National Pathology Week has grown in the last year, with many events held across the country.

**Looking forward** The challenge of the financial downturn is clearly the biggest issue to face the discipline for a number of years. The SRC must help ensure that a quality pathology service is allowed to be sustained within the context of likely significant budgetary restraints.

#### Dr Bernie Croal Chair

#### South East England

**Key achievements** We have established meaningful dialogue with the two Strategic Health Authorities (SHAs) in our region in respect of the Pathology Modernisation agenda. In April, the Chair was invited to a workshop to set up a Pathology Modernisation board for the South Central SHA. We also have a representative on the national Pathology Futures Group.

A number of appointments to vacant College Tutor posts in the region were made during the past year and all posts in the region are now filled.

A boundary change in the north of our region was agreed with the Trent Regional Council in order to align the Regional Council and SHA boundaries

**Working together** A successful joint meeting with London Regional Council, entitled 'Pathology 2010: Challenges and Opportunities' was held in June. Dr Ian Barnes, National Clinical Director of Pathology, was one of the speakers.



Delegates at the Association for Clinical Biochemistry's 2010 'Management and Leadership Course', held at the University of Surrey and organised by Stephen Halloran MBE, member of the South East England Regional Council



Professor Vincent Marks, former College Vice-President and former President of the Association for Clinical Biochemistry, at a gathering held in June to celebrate his 80th birthday. He is one of the world's leading authorities on the measurement of insulin and police investigators worldwide have called upon his expertise whenever a crime, or suspected crime, involves insulin or hypoglycaemia.

A number of events were held across the region during National Pathology Week.

Our Council contributed to a consultation exercise on the future of postgraduate medical and dental education in the South Fast Coast SHA

**Looking forward** We look forward to continued involvement in plans for pathology modernisation in the region and the launch of Modernising Scientific Careers.

Two new enthusiastic Regional Coordinators have been appointed for National Pathology Week 2010.

Dr Andrew Stacey Chair

#### South West England

This Regional Council forms a collaborative interface between the central College Council and all the pathologists working in the region. It endeavours to enhance communication between pathologists in what is a geographically one of the largest regions in England.

**Key achievements** With a view to developing new ways of organising pathology services, we utilised the expertise of several local colleagues who had worked overseas and hosted a very successful seminar in October 2009 in which alternative models for pathology funding delivery were presented, based on experience in Europe, Australia and Northern America. The President, Professor Peter Furness, also contributed to this very well-attended meeting.

The two pathology schools in the region have been successful in developing multi-disciplinary study days, which were greatly appreciated by the trainees who attended. Most recently a management component has been included.

Reconfiguring pathology services The Strategic Health Authority (SHA) has initiated a process aiming to reconfigure the region's pathology services. Continuing our perception that engagement with the SHA was of paramount importance, a process which we had initiated well before the current intense focus of reorganisation came to the fore, we have been successful in ensuring that Regional Councils are strongly represented in the group advising the SHA on potential changes.

It is our key objective that any changes that take place must not be at the expense of quality or training. It is also crucial that any alternative form of delivery of pathology services is configured appropriately to suit the particular geographical circumstances of our region.

Dr Patrick Sarsfield Chair



Dr Andrew Stacey



**Dr Patrick Sarsfield** 







Dr Ian Frayling

#### **Trent**

Much of our work is being carried out via email and the internet. Engagement with Fellows'on the ground' remains a problem and a priority. A significant issue is turnover of the majority of Council members in 2010 and the need to recruit new members and a Chair.

**Communications** A variety of strategies have been implemented in our Council. College Tutors have been brought into a communication strategy that sees the Tutors contacting all Fellows in their Trust several times a year, and feeding back comments and issues to us. The effectiveness of this approach is being evaluated.

**Devolved functions** Systems for Clinical Excellence Awards, job descriptions, continuing professional development (CPD) and workforce are devolved to individuals on the Council in an appropriate manner, without involving other members of Council unless problems arise. Our region's compliance rate for CPD returns and portfolio review remains high, thanks to the organisation of the College's CPD Advisor. College Tutors have also worked hard to achieve this excellent result.

**Regional boundaries** The Regional Council has finalised adjustments to its boundaries to bring them into alignment with Strategic Health Authorities, seeing Northampton move into Trent and Sheffield move to Northern England.

**Looking forward** Our immediate objectives of the Trent Regional Council are to implement a new Council in 2010 and ensure continuity of function by secondments for key outgoing members, and to continue to evaluate the regional website as a focus of communication for Council members.

Professor James Lowe Chair

#### Wales

**National changes** NHS Wales changed fundamentally in October 2009. The 14 acute hospital Trusts and 21 local health boards were replaced by 7 integrated local health boards, each having responsibility for both primary and secondary care. The National Pathology Program Board has been established, to ensure integrated service planning and delivery across Wales, and professional advice will be provided from the Welsh Assembly's Laboratory Services Sub-Committee (LSSC).

**Working together** The Chair of LSSC sits on our Council, as do a number of members of the Standing Specialty Advisory Groups, and our Chair sits on the LSSC, so we are well placed to help in delivering pathology services in Wales. Given, too, that via the Academy of Medical Royal Colleges in Wales the Regional Council has another direct link to the Welsh Assembly, this is another route for ensuring that the College has a strong voice in Wales. For sure, there is no shortage of ways in which anyone might wish to make points to 'the powers that be'.

**Public engagement** Drs Katherine Syred and Esther Youd did sterling work in organising events for National Pathology Week 2009, and we look forward to more projects in November 2010.

**Looking forward** Membership of the Welsh Council has continued to strengthen over the last year, and we hope to welcome more members, especially haematologists or clinical scientists.

Dr Ian Frayling Chair

#### **West Midlands**

**Working together** Council Members are involved in workforce planning, CPD and as College Tutors. Other Fellows in the region continue to make a valuable contribution by approving job descriptions, sitting on the Regional Clinical Excellence Awards committee and attending Advisory Appointments Committees – to name but a few College activities that we all rather take for granted. We have an enthusiastic National Pathology Week coordinator who, with two colleagues, will coordinate events and increase its profile across the region.

**Training** Close links are maintained with the Pathology School West Midlands Workforce Deanery. There is a continued recognition of the need to support educational and clinical supervisors in their roles, and the challenges posed by the new Learning Environment for Pathology Trainees system (LEPT) system will be addressed by future training. The Deanery will visit the individual training programmes in our Region, to provide assurance that it is of the highest quality possible.

**Education** The University of Birmingham Medical School continues the work to redesign the undergraduate curriculum, with contribution from a number of local Fellows, and there is recognition of the fundamental importance of pathology as a basis for clinical practice.

**Looking forward** Engagement with the Strategic Health Authority has had positive results, with two events held this spring to promote collaboration between pathology services and to develop a 'Quality, Innovation, Productivity and Prevention' workstream for pathology. Both these elements are of increasing importance in enabling us to meet the challenges that we undoubtedly face, and there remains much to be done. Craig Webster has been appointed as the next Chair.

Dr Debbie Mortiboy Chair

#### International Committee

**International links** In the past year, we have organised visits to Oman and Kuwait, to make recommendations on the training programmes for pathologists and improve relations with colleagues. Contacts will be improved further by creating new national College representatives linked to multi-national Regional International Advisors. We are also organising a meeting in Spring 2011 to establish a North American group of Fellows, which could foster links across the Atlantic

**Non-EU trainees coming to the UK** The Royal College of Pathologists has agreed to increase the workforce to deal with the changes in responsibilities for the management of non-EU trainees wanting to come to the UK through the Medical Training Initiative. We are discussing ways to manage this initiative with other colleges and the Academy of Royal Colleges.

**Developing services and training** In May 2010, we organised a successful meeting of the many individuals and bodies in the UK with an interest in helping to develop services and training in low and middle income countries. One aim of this meeting was to establish the College as a coordinating and information centre.

The Malawi project started in 2009 to support volunteers to go to Blantyre to help develop postgraduate education in haematology and microbiology. Following this successful pilot, and additional funds from the British Council to extend activities to Ghana, there are now plans to include other laboratory specialties and to link with a similar programme in Blantyre operated by Scottish histopathologists.

Memoranda of understanding have been developed with South Africa, West Africa and Malta to collaborate in teaching and training.

We have supported the development of the College of Pathologists of Eastern, Central and Southern Africa, which will be launched in Kampala this September.

The College is supporting the development of a new training programme for biomedical scientists in Ethiopia in collaboration with the University of Leicester and others.

Dr Archie Prentice Chair



Dr Debbie Mortibov



Dr Archie Prentice



## College activities

#### **National Pathology Week**

National Pathology Week (NPW) is the highlight of the College's public engagement programme. Sponsored by Siemens, the second NPW, held from November 2–8 2009, was a huge success, with over 430 events held around the country. The theme was 'Pathology: the heart of modern healthcare', focusing on the role of all pathology specialties in the diagnosis and treatment of heart disease, as well as emphasising the central role of pathology in healthcare.

**Regional Coordinators** For the first time in 2009, each College region appointed a coordinator to provide local support to event organisers. These Coordinators were, in turn, supported by the central College team, who provided weekly updates, resources, ideas and advice. This network of champions gave pathology professionals in all parts of the country easy access to NPW resources.

**Working together** As well as bringing together pathologists and scientists from different disciplines, NPW provided opportunities to work with other organisations. The highlight of London's NPW was a multidisciplinary scenario event with the British Heart Foundation at the Royal Institution. Hundreds of school students participated in interactive events in science centres around the country.

**National Pathology Week 2010** This year NPW is taking place from November 1–7. The theme is 'Pathology: the building blocks of life', focusing on both the health of mothers and babies and the basic science of pathology. NPW 2010 is set to be even bigger and

better than in previous years. Hundreds of exciting events are being planned and thousands of pathologists and scientists will work together to highlight the central role of our specialty in modern healthcare.

Dr Suzy Lishman, NPW Lead Ruth Semple, Public Engagement Manager Samantha Jayaram, Press and Communications Manager

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Dr Suzy Lishman

Pathology: the heart of modern healthcare

#### **Public engagement**

#### **Our mission**

By means of a public engagement programme, the College aims to

- ▶ increase the public's understanding and interest in pathology, enabling them to make better decisions about their healthcare
- ▶ support the teaching and learning of science in secondary schools
- ▶ support and encourage pathologists to become involved in science engagement activities in their local communities.

**Key achievements** The highlight of the College's public engagement programme, National Pathology Week 2009, was a tremendous success, with over 430 events delivered across the UK.

Four science communication training days took place last year, and we now have over 100 pathologists and scientists trained in communicating pathology to a range of audiences.

The annual Furness Prize for Science Communication was introduced last November to reward trainees who have undertaken sustained high-quality public engagement activities.

We delivered a high profile scenario event, 'Heart Attack', at Cheltenham Science Festival

**Working together** We collaborated with The Hunterian Museum on a six-month public programme to support the Royal Society's 350th anniversary, called 'The Lens of Life'. The programme highlighted key figures in medical microscopy and we delivered a family workshop, 'Disease Detectives', three times, in collaboration with the Institute of Biomedical Science (IBMS).

We partnered with the Schools Science Conference for a successful National Science Week event in March.

Over 200 students aged 15 to 18 discovered how science is applied in different healthcare specialties, particularly pathology. With the IBMS and the Association for Clinical Biochemistry, we delivered a 'Cafe Scientifique' on the issues surrounding point-of-care testing, focusing on diabetes.

**Looking forward** We hope to take part in more science festivals throughout the year and work with more informal learning organisations, thereby extending our reach across the UK.

Ruth Semple Public Engagement Manager



The team behind the 'Heart Attack: behind the scenes' event, organised in partnership with the British Heart Foundation, held at the Royal Institution during National Pathology Week.



**Ruth Semple** 



**Neil Formstone** 

#### Lay Advisory Committee (LAC)

**Our mission** The LAC is the conduit between the College and the public and undertakes its role very conscientiously. Our members have engaged in activities that help them to understand the current public attitudes and thinking towards pathology services. They feed this information into the College to ensure that when policy decisions are made, they are considering the public/patients' viewpoint and their impact.

**Our work** This year we welcomed five new members, who have established themselves well in the activities of the College. Their personal knowledge and experiences enabled us to expand the scope of our work and engage in a broad range of issues – including revalidation, the Carter Report, 'shaken baby syndrome' and many others. This could not have been achieved without the continuing cooperation and positive attitude of the College staff and Fellows with whom we work.

**Working together** We continue to collaborate with many other organisations, and all our Committee members represent the College on external bodies that have an interest in the activities of the College. We have helped to organise seminars that aim to raise public awareness and have also engaged with College staff and Fellows, assisting them in their interactions with patients.

**Looking forward** With a new Government and a change in the structure of the NHS in England, our Committee will be engaged in ensuring that proper consultation and a greater understanding of pathology services is included in the reconfiguration. Clinical choices cannot be made without understanding what 'choice' really entails and our role must be one of continuing to educate the public, so that they have the information needed, in a format understandable to them

Neil Formstone Chair

#### Conferences and Academic Activities

The Committee has worked hard to create more successful symposia for the College, with events attracting great attendance. The quality remains high and we have used delegates' feedback to strengthen our standards and to fine-tune our activities. This year we concentrated on the smaller specialties such as veterinary pathology and toxicology, and looked aspects of research. We also welcomed meetings and events held in collaboration with other organisations.

Dr Kevin West ended his three-year term as Director with the very successful 'Road Traffic Fatalities' conference, which brought together pathologists, police officers, coroners and solicitors to discuss the development of a specific road-traffic post-mortem.

I took over as Director in November 2009 and have been working closely with the Committee, ensuring they liaise with Fellows from their respective disciplines and with their disciplines specific organisations to think of and plan high-quality meetings using the fantastic College facilities. Well-planned meetings and events not only attract large audiences, but also good sponsors. They also help to promote the College to the wider medical field.

#### The year's highlights

- ► 'Management of Viral Infections in the Immunocompromised' an extremely successful event, attracted over 80 delegates and secured £2000 sponsorship.
- ▶ 'Update in Diagnostic Dermatopathology' over 110 delegates.
- ▶ 'Liver Biopsy in the Assessment of Medical Liver Disease' this event proved so popular we are running it again in March 2011.
- ► 'Haematology Trainees Research Day' a joint venture with the British Society of Haematology
- ➤ 'Recreational Drugs' attracted over 50 delegates, despite the small size of the specialty.

**The future** We hope that the developing 2010/2011 programme will provide educational opportunities for many Fellows and Trainees. We are reintroducing public-orientated symposia to our schedule, as well as developing new training opportunities in areas such as revalidation and minimum analytical performance standards (MAPS), and hope to encourage the use of podcasting

in some events. We have also just secured funding for the purchase of an interactive response system, which will allow delegates to interact with the presenters on a personal handset, thus increasing the teaching, learning and evaluation experience.

If you have any ideas for symposia or wish to run an event, please initially contact the Events and Facilities Manager, Michelle Merrett. It is not as difficult as you might think and is very rewarding.

Dr Sanjiv Manek
Director of Conferences and Academic Activities

### **Functions and facilities**

**Facilities** The past year has been very busy for the College's Facilities Team – our rooms have been booked on a daily basis, and evening and weekend bookings have increased. We see a large volume of clients returning to the venue, which is a clear sign of the level of service we are offering, and our many new clients include the King's Fund, The Royal College of Surgeons of Edinburgh, Target Ovarian, The Foundation for the Study of Infant Deaths and the Hospital Infection Society.

Our discounted rates for College Fellows have been popular and we are always delighted to welcome them to our conference facilities. We introduced discounted rates for Mondays and Friday, our quieter days, and they are slowly becoming as popular as mid-week.

Our state-of-the-art audiovisual facilities, which include video conferencing, podcasting and teleconferencing, are a huge attraction for many clients. With tighter restrictions on time and budgets, these services enable clients to link with people all over the world at a touch of a button.

We have now had a full year promoting our new Education Centre, and the design and layout of the facilities has proved extremely popular. It has been utilised not only as conference and training space but also as an open, modern environment for exhibitions, receptions and launch events.

**College dinners and ceremonies** The number of new Fellows welcomed into the College increased so much this year that we

now host two ceremonies in one day, twice a year, so that everyone can attend who wishes to. Also honoured at the ceremonies were Tracey Brown and Elizabeth Livingston as Friends of the College and Professor Parveen Kumar as an Honorary Fellow. Dr Suzy Lishman received the College Medal.

We were delighted to welcome Andrew Lansley MP as our guest speaker at the 2009 Annual Dinner, attended by those from other Royal Colleges and medical associations. Our September luncheon for senior and retired Fellows was once again very enjoyable; it is always a great day for socialising with friends and networking with new colleagues.

**The future** We hope to enhance our audiovisual facilities by introducing the use of remote voting system. This will allow delegates to interact with presenters by voting or answering questions on a personal handset, thus increasing the learning and evaluation experience.

The College facilities will continue to offer a versatile meeting space, specifically tailored events and spacious training rooms, with first-class support from the moment the event is booked.

# Michelle Merrett Events and Facilities Manager



Meeting rooms at 2 Carlton House Terrace



Dr Sanjiv Manek



Michelle Merrett



# **Publications**

**NHS Evidence** The Publications and Communications Committee has mostly been involved with preparing the way for the College's bid to become a NHS Evidence-accredited guidance producer. The College publishes many high-quality documents and we will make the necessary changes for them to comply fully with the exacting criteria required for accreditation. Cancer datasets and tissue pathways come closest and it is these that we are busily working on as supportive evidence to our accreditation application. We expect to have this submitted by January 2011.

**Public engagement** The Committee has also been actively supportive of National Pathology Week and Dr Suzy Lishman continues to give superb leadership in this venture. We have also produced careers leaflets, both for 16-18 year olds and medical students

**Publications and consultations** The *Bulletin*, of course, goes from strength to strength under the capable stewardship of its Editor, Professor John Croall, who I am pleased to say has accepted an invitation to extend his term of office.

The Directorate has published 19 guidance documents over the past year, including six Cancer Datasets for histopathology reporting, three Tissue Pathway documents, The Retention and Storage of Pathological Records and Archives (4th edition) and other best-practice guidance affecting each of the pathology specialties. This is testament to the huge amount of voluntary work carried out by Fellows in writing and revising documents. The College is

also indebted to those Fellows who give their time to participate in consultations. There is, however, much that we can and should do. to improve the numbers of colleagues who participate and this will be given further consideration in the coming year.

In 2011, we will also be examining our processes for accepting and handling documents received from external organisations. so that our involvement in the consultations of others is efficient. appropriate and timely.

**The website** The College website (www.rcpath.org) continues to grow, with over 1600 pages at the time of writing, and is the default point of publication for all College documents and other information. Our IT department is working on the infrastructure for a new website to be launched in the coming year. We aim for it to have an improved design, greater accessibility, simpler log-in and seamless integration with our secure new database, and to be a valuable resource for our members and the public.

The workload is growing and we look forward to helping the Directorate and the College to meet the task and embrace the opportunities that this will bring.

**Dr Peter Cowling Director of Communications** 

### **Press and Communications**

**Working with the media** The College's press office continued to be a central point of contact for journalists requesting information and interviews from pathologists. Queries came from TV production companies and print and broadcast media, including Channel 4's *Embarrassing Bodies*, *Casualty*, *Coronation Street* and Radio 4.

**National Pathology Week 2009** As well as supporting NPW organisers across the country, we worked in collaboration with the British Heart Foundation, Sense about Science and the Royal Geographical Society to develop a number of diverse and varied events, including debates, talks and a scenario-based event at the Royal Institution. Combined media coverage for NPW 2009 across all regional and national print titles reached over six million readers (circulation 2 411 000). Coverage started appearing in advance of NPW with the first press article appearing on 20 October and the final article published on 10 December.

**Joined-up working** The Communications and Public Engagement Department successfully collaborated on a number of public engagement events, including:

- ▶ Testing Times, a workshop developed with the Institute of Biomedical Science and the Association for Clinical Biochemistry for 12 to 16 year olds; the workshop examined the role of point-ofcare testing in managing diabetes and was held as part of Schools Science Conference in March 2009
- ▶ Disease Detectives, a workshop aimed at a family audiences and run in conjunction with the Royal College of Surgeons.

**Going forward** We aim to build on our good press and media relations by responding to requests in a timely and responsive manner. We will continue to work collaboratively on public engagement events and National Pathology Week, and begin preparatory work for the College's fiftieth anniversary in 2012.

Samantha Jayaram
Press and Communications Manager



Dr Peter Cowling



Samantha Jayaram





# Finance and accounts

### Treasurer's report

The College's income for the year amounted to £4,555,612. Subscription income of £2,174,348 still represents the largest single source of income. The number of College members has increased marginally from 9941 at the beginning of the financial year to 9976 at the year end.

During the year, the College received £37,419 from the Jean Shanks Foundation and £75,000 from Baxter BioScience to support Research Fellowships. In addition, the College received £75,000 sponsorship from Siemens in support of National Pathology Week. Council are most grateful to those that have given so generously to these appeals.

The College has been fortunate to receive project grant funding during the year for the development of the National Laboratory Medicine Catalogue and much work has been undertaken on the project. In addition, grant aid funding for e-learning for the training of medical examiners and e-learning for pathology trainees has been received. The majority of the expenditure on the e-learning projects will take place in the ensuing financial year.

The Education Centre opened in November 2008 and therefore this year was the first full year of operation. Income from this activity amounted to £214,132, which was below expectations, but compensated by lower expenditure. It is pleasing that enquiries and bookings for the future are strong and we therefore expect a greater level of income in the ensuing year. This activity is carried out by 2 Carlton House Terrace Limited, the College's wholly owned subsidiary company.

The project to upgrade the College's database was completed during the year. This database holds the membership records, examinations records, assessments system, trainees' registration system, continuing professional development system and financial records associated with the above, as well as holding the information that links to the On-line Handbook.

We are currently upgrading the College's main website, as well as introducing a new content management system, to be launched later in the year. The web pages are one of the primary methods of communicating what the College is and does to the wider public, and the redesign will improve accessibility, navigation and content. At the same time, the College database will be dynamically linked to the new website, providing a much greater level of customer service to users, as well as achieving administrative savings on day-to-day transaction processing.

The performance of the College's investment portfolio is independently benchmarked by the WM Company against their unconstrained charity universe. This universe represents the performance of UK charity funds with discretionary mandates. The portfolio returned a positive 18.7% in the calendar year to 31 December 2009, compared to the benchmark return of 18.4%, and placed the College in the top 20% of funds measured by WM on a time-weighted five-year basis and the top 40% of funds over a tenyear period.

Council has established a reserves policy whereby the unrestricted funds not committed or invested in tangible fixed assets or designated for specific purposes (the 'free reserves') held by the College should normally be sufficient to allow the

College to operate without income for up to 18 months. This level of reserves is essential because our income is not guaranteed and can be subject to significant fluctuations year on year. The College's reserves ensure that short-term changes in revenue will not materially affect the College's activities, secure the long-term funding of the College, and enable the College to meet its duties under statute and its Royal Charter to promote standards of education and practice of pathology. This level of reserves would also enable the College to address any unforeseeable ad-hoc expenditure arising from topical issues in pathology, which the College feels should be addressed. At 30 June 2010, the level of free reserves of £2.6 million equated to approximately 8½ months income cover.

Finally, I would like to thank Daniel Ross, Eugene Coyle, Sue Beckford and Kay Mansour, the in-house financial team, for their stewardship of College finances.

The accounts published overleaf are not the statutory accounts but a summary of information relating to both the statement of financial activities and the balance sheet. The full financial statements have been audited and contain an unqualified audit report. They were approved by Council on 9 September 2010 and have been submitted to the Charity Commission. Any member may request a copy of the full accounts by writing to the Chief Executive

Dr Charles Singer Treasurer

### Independent Auditor's statement to the Trustees of The Royal College of Pathologists.

We have examined the summarised financial statements for the year ended 30 June 2010.

#### **Respective responsibilities of Trustees and Auditors**

Council are responsible for preparing the summarised annual report in accordance with applicable United Kingdom law and the recommendations of the charities SORP.

Our responsibility is to report to you our opinion on the consistency of the summarised financial statements within the summarised annual report with the full annual financial statements and the Trustees' Annual Report.

We also read the other information contained in the summarised annual report and consider the implications for our report if we become aware of any apparent misstatements or material inconsistencies with the summarised financial statements.

We conducted our audit work in accordance with Bulletin 2008/3 issued by the Auditing Practices Board.

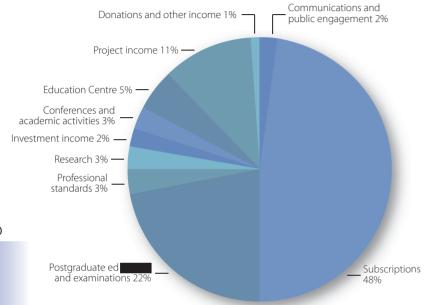
**Opinion** In our opinion, the summarised financial statements are consistent with the full annual financial statements and the Trustees' Annual Report of The Royal College of Pathologists for the year ended 30 June 2010.

Coulthards Mackenzie Chartered Accountants and Registered Auditors International House, 39–45 Bermondsey Street, London SE1 3XF 9 September 2010



Dr Charles Singer

### The Royal College of Pathologists Income 2009–2010



### The Royal College of Pathologists

Consolidated statement of Financial Activities for the year ended 30 June 2010

	Unrestricted general funds	Unrestricted designated funds		Total 30 June 2010	
Incoming resources	£	£	£	£	£
Incoming resources from generated funds					
Activities for generating funds	7,900	-	-	7,900	-
Investment income	79,835	-	6,734	86,569	161,343
Donations	42,756	-		42,756	181,796
Other income	10,529	=	=	10,529	10.857
Incoming resources from charitable activities					
Subscriptions	2,174,348	-	-	2,174,348	1,893,092
Postgraduate education and examinations	992,730	-	-	992,730	943,998
Conferences and academic activities	149,222	-	-	149,222	122,363
Research	-	-	131,158	131,158	254,509
Professional standards	31,424	-	116,530	147,954	71,963
Intercollegiate Human Nutrition Course	-	-	1,000	1,000	62,500
Project income	-	-	482,725	482,725	373,000
Communications and public engagement	12,029	-	102,560	114,589	62,963
Education Centre	214,132	-	-	214,132	106,237
Total incoming resources	3,714,905		840,707	4,555,612	4,244,621
Resources expended					
Cost of generating funds					
Cost of generating voluntary income	-	-	-	-	20,492
Fundraising trading: cost of goods sold					
and other costs	141	-	-	141	-
Charitable activities					
Postgraduate education and examinations	1,198,906	-	-	1,198,906	1,226,072
Research	-	-	81,330	81,330	524,060
Communications and public engagement	589,135	-	2,716	591,851	563,935
Professional standards	392,713	-	-	392,713	370,624
Conferences and academic activities	162,066	_	-	162,066	168,695
Education Centre	431,891	_	-	431,891	381,991
Advisory committees	285,686	_	_	285,686	288,052
Workforce	274,918	_	_	274,918	221,120
Intercollegiate Human Nutrition Course	27 1,510	_	71,795	71,795	19,335
Cost of books and memorabilia sold	_		71,755	71,755	455
Project expenditure	_		134,684	134,684	9,523
Quality management	-	-	134,004	134,004	62,002
Governance costs	77,909			77,909	82,927
Total resources expended	3,413,365		290,525	3,703,890	3,939,283
Net incoming resources before transfers	301,540	-	550,182	851,722	305,338
Gross transfers between funds	(3,906)	112,929	(109,023)		
Net incoming resources before					
other recognised gains and losses	297,634	112,929	441,159	851,722	305,338
Disposal of associated undertaking	-	=	-	-	528,858
Gains/(losses) on investment assests	296,880		23,099	319,979	(349,231)
Net movement in funds	594,514	112,929	464,258	1,171,701	484,965
Total funds brought forward	8,516,025	1,545,029	830,307	10,891,361	10,406,396
Total funds carried forward	9,110,539	1,657,958	1,294,565	12,063,062	10,891,361
				,,,,,,,	

### **The Royal College of Pathologists**

Consolidated balance sheet as at 30 June 2010

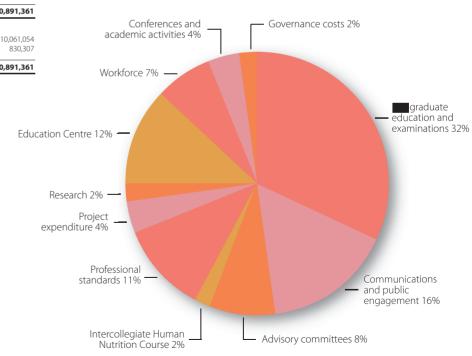
	Unrestricted general funds £	Unrestricted designated funds	Restricted funds	<b>Total 30 June 2010</b> £	Total 30 June 2009
Tangible fixed assets Investments	6,459,671 913,215	1,459,931	116,797	6,459,671 2,489,943	6,613,696 1,913,398
Total fixed assets	7,372,886	1,459,931	116,797	8,949,614	8,527,094
Current assets Stocks Debtors Cash at bank and in hand	13,006 224,520 3,798,250	- - 198,027	- 75,000 1,147,718	13,006 299,520 5,143,995	15,241 517,891 4,050.581
Total current assets	4,035,250	198,027	1,222,718	5,456,521	4,583,713
<b>Creditors</b> Amounts falling due within one year	(2,200,623)	-	(44,950)	(2,245,573)	(2,139,446)
Net current assets	1,835,153	198,027	1,177,768	3,210,948	2,444,267
Total assets less current liabilities	9,208,039	1,657,958	1,294,565	12,160,562	10,971,361
<b>Provisions for liabilities and charges:</b> Amounts falling due after more than 1 year	(97,500)	-	-	(97,500)	(80,000)
Net assets	9,110,539	1,657,958	1,294,565	12,063,062	10,891,361
The funds of the College Unrestricted funds Restricted funds	9,110,539	1,659,958 -	- 1,294,565	10,770,497 1,294,565	10,061,054 830,307
Total College funds	9,110,539	1,659,958	1,294,565	12,065,062	10,891,361

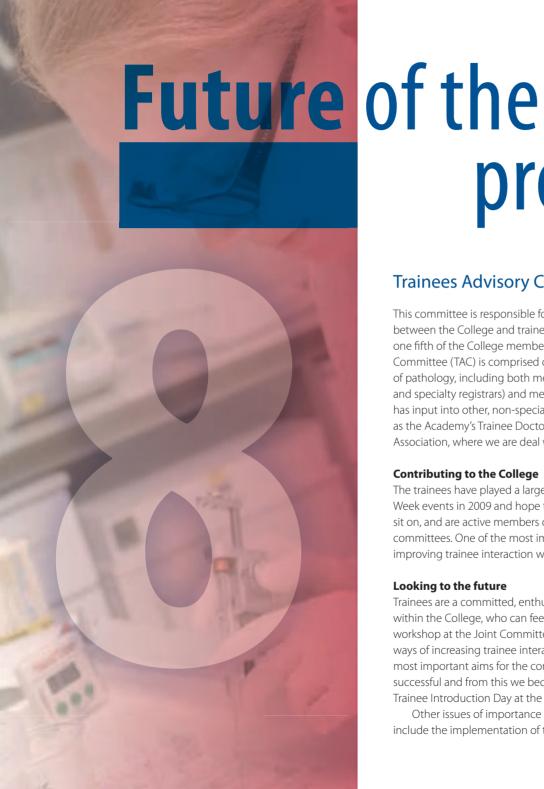
The financial statements were approved by Council on 9 September 2010 and signed on behalf of Council by

Professor Peter Furness President

Dr Charles Singer Treasurer

### The Royal College of Pathologists Expenditure 2009–2010





# profession

### **Trainees Advisory Committee**

This committee is responsible for facilitating communication between the College and trainees, who make up approximately one fifth of the College membership. The Trainees Advisory Committee (TAC) is comprised of representatives from all branches of pathology, including both medical staff (specialist registrars and specialty registrars) and medical scientists in training. The TAC has input into other, non-speciality, based trainee groups such as the Academy's Trainee Doctors Group and the British Medical Association, where we are deal with more generic trainee issues.

### **Contributing to the College**

The trainees have played a large role in National Pathology Week events in 2009 and hope to continue this in 2010. Trainees sit on, and are active members of, the vast majority of College committees. One of the most important tasks for the coming year is improving trainee interaction with the College.

### Looking to the future

Trainees are a committed, enthusiastic and highly motivated cohort within the College, who can feel disenfranchised. We have run a workshop at the Joint Committee on Pathology Training to discuss ways of increasing trainee interaction with the College – one of our most important aims for the coming year. The workshop was very successful and from this we became involved in planning the new Trainee Introduction Day at the College.

Other issues of importance over the next twelve months include the implementation of the new curricula in many

specialties, the roll-out of the pilot training programmes for clinical scientists and the effect of Modernising Scientific Careers. We will also be looking at the effect of the changes in junior doctors' funding and the impact this will have on training.

### Dr Sarah Hauxwell Chair



Dr Sarah Hauxwell

### **Research Committee**

We have been active in a number of initiatives.

### Key achievements and working with others

There has been an exercise asking for applications for new academic clinical fellows and lecturers in shortage areas run by National Institute Health Research. All pathology specialties were eligible and we hope that there have been successful applications.

The Medical Research Council's Pathology/Pharmacology programmes have now been awarded.

We were hopeful that we could secure a significant investment in histopathology via the excellent report of the National Cancer Research Institute (NCRI) pathology taskforce, in which the College played a large role. Unfortunately, funding for public sector investment is impossible at present so, despite NCRI's best efforts, this work is on hold.

After last year's successful contest for the College's Research Medals, we are about to start judging the next round. There is stiff competition but the prestige of winning is high. We encourage all trainees to submit their best research work.

**Looking forward** There have been early discussions between Cancer Research UK and Government over a molecular pathology initiative in cancer. The College is indirectly involved and we hope that funding may be secured for an initiative that would help develop molecular pathology in cancer in research and the NHS.

We have great concerns for the next five years, with major cuts in the university sector of around 25%. This will fall disproportionately on weaker specialties and may bring even greater reductions in university departments, as well as freezes on recruitment. The future is thus challenging, but we must continue to work hard to deliver the R&D agenda.

Professor Phil Quirke
On behalf of Professor Dlawer Ala Aldeen
Director of Research

### **Workforce Planning**

**Our mission** Our committee aims to ensure that the pathology workforce meets current and future demands, using accurate data and modelling to influence all relevant decision makers.

**Key achievements** Phase two of the Electronic Workforce Database (EWD) was launched to Clinical Directors and Heads of Departments. A joint survey with the British Society for Clinical Cytology for cytology and a survey of microbiologists and virologists are in progress. All Fellows are encouraged to access the database to populate new fields. Only 32% of Fellows have done this – our challenge is to motivate interest in the 70% who have not yet updated their data.

Working together We met the Workforce Review Team (WRT) to discuss a submission to the Migration Advisory Committee (MAC) for the UK Home Office's Shortage Occupation List (HOSOL). The HOSOL currently includes haematology, medical microbiology and virology. The RCPath recommends the MAC return immunology to the list, having provided evidence of shortage. Clinical biochemistry requested removal in 2009, while histopathology does not qualify for inclusion on the list. Genetic pathology was recommended previously for inclusion but MAC did not agree as the specialty was decommissioned as a training specialty in the UK, an issue which they said needs to be examined if there is believed to be a shortage in this specialty.

**Looking forward** The Department of Health has awarded the contract to Mouchel Management Consulting to establish a Centre for Workforce Intelligence (CfWI) as recommended by the Darzi report. Professor Dame Carol Black will chair the CfWI and a meeting was planned for July with College representatives.

In addition, the EWD will be repatriated to the College to ensure higher data-collection rates (as data collection will be invited when one uses the website) and to save costs.

Professor Tim Stephenson
Director of Workforce Planning



Professor Phil Quirke



**Professor Tim Stephenson** 

Dr Suzannah Lishman Dr Rachael Liebmann

Dr Charles Singer

Professor Peter Furness

Dr Danielle Freedman

Dr Archie Prentice

Dr Tim Wreghitt

**Assistant Registrar Treasurer** 

**President** 

Registrar

**Honorary Officers** 

## College appointments

**Director of Conferences and Academic Activities Director of Examinations and Assessment Director of Professional Standards Director of Communications** 

**Director of Research Director of Training and Educational Standards** 

**Director of Workforce Planning Editor of the Bulletin IT Coordinator Honorary Librarian** 

### Council 2009-2010

Dr Mohammad Al-Jafari

Dr Derek Allen

Dr Michael Ashworth (co-opted)

Dr Stephen Barrett Dr Bernard Croal Dr John Drurv Dr lan Frayling Dr Michael Galloway

Professor Stephen Gillespie

Mr Michael Hallworth

Dr Richard Herriot (co-opted)

Professor David Linch Professor James Lowe Dr Deborah Mortiboy Professor Guy Rutty Dr Patrick Sarsfield

Professor Ken Smith (co-opted, shared with Dr Wallace)

Dr Andrew Stacev Dr Susan Stewart Dr Anne Thorpe

Dr Heather Wallace (co-opted, shared with Professor Smith)

Dr Jonathan Waters (co-opted)



Dr Sanjiv Manek

Dr Lance Sandle

Dr Peter Cowling

Dr Kevin West)

Professor Dlawer Ala'Aldeen

(Locums: Dr David Bailey and

Professor Tim Stephenson

Professor Shelley Heard

Dr Trevor Gray

### Staff

Daniel Ross	Chief Executive	Edward Hulme	Managing Editor, Publications
Elspeth Evans	Deputy Chief Executive	Samantha Jayaram	Press and Communications Manager
		Shane Johns	PSU Coordinator
Fiona Addiscott	Workforce Planning Manager	Jawade Liaqat	Committee Coordinator
Adobea Akuffo	Training and Educational Standards Assistant	Stella Macaskill	Head of Professional Standards
Peter Anderson	Examinations Manager	Jenny Maddocks	Training and Educational Standards Coordinator/
Charlotte Balazs	Committee and Regional Councils Coordinator		Acting Training and Educational Standards Manager
Jay Barton-Costa	Deputy Examinations Manager	Kay Mansour	Assistant Management Accountant
Sue Beckford	Membership and Finance Administrator	Maxine Mantle	Executive Assistant to Chief Executive/Registrar
Anne Boxill	PA to President/Honorary Officers	Maria Marrero-Feo	Audit and Quality Coordinator, PSU
Alex Brinded	Examinations Coordinator	Helen Melluish	Examinations Coordinator
Joanne Brinklow	Head of Educational Standards	Michelle Merrett	Events and Facilities Manager
Eugene Coyle	Membership and Finance Officer	Kathryn Morris	House and Facilities Steward
Amanda Croft-Pearman	Fundraising Consultant	Ryan Nelson	IT Officer
Sandra Dewar	Assessment Manager/Acting Head of Educational Standards	Reshma Patel	Workforce Coordinator
Karina Dunne	Assessment Coordinator	Annabel Ries	Associate Editor, Publications
Lindsay Fortune	Training and Educational Standards Coordinator	Heidi Rogers	PSU Assistant
Kimberley Freeman	Communications and Public Engagement Coordinator	Ruth Semple	Public Engagement Manager
Spencer Green	House and Facilities Officer	Brian West	House and Facilities Steward
David Howe	IT Manager	Clare Winter	Events Coordinator
Eben Hugo	Website and IT Officer		



