

# The Royal College of Pathologists' election priorities for Scotland 2026

## February 2026

The Royal College of Pathologists (RCPath) is a professional membership organisation with more than 11,000 fellows, affiliates and trainees. The College works with pathologists at every stage of their career and is committed to setting and maintaining professional standards and promoting excellence in the teaching and practice of pathology, for the benefit of patients.

RCPath members include medically and veterinary qualified pathologists and clinical scientists in 17 different specialties, including cellular pathology, haematology, clinical biochemistry, medical microbiology and veterinary pathology.

The RCPath [Scotland Regional Council](#) comprises specialty members who provide professional leadership in Scotland.

Members of the council advise local NHS, other healthcare providers and local government on the provision of pathology services including compliance with acceptable standards of pathology practice as defined by the College.

Members of the College work in laboratory medicine – around 95% of clinical decisions and pathways are based on laboratory testing.

Pathologists are essential to prevention, diagnosis and treatment to improve patient care. The work of pathologists supports patients throughout their entire life.

They use their expertise to support every aspect of healthcare from interpreting laboratory results to making diagnoses, guiding treatment and directing clinical care. They also play a critical role in education and research, and in devising new treatments to fight infections and diseases like cancer and diabetes. In this document, we look at the key challenges facing pathologists and call on Scotland's new government to address these areas.

It is widely accepted that healthcare must shift from hospital care to primary and community services to remain effective and sustainable. This shift will emphasise early intervention and will require the planning of services based on population needs. This approach is supported by the College.

Pathology services will be pivotal to delivering this vision – a robust workforce, carrying out clinical and research duties supported by modern, resilient IT, to deliver tests and treatments to meet the needs of the people of Scotland.

## Shortages in the consultant workforce

- 83% of Scottish College members responding to the 2025 RCPATH workforce census<sup>1</sup> report said that current staffing levels are nowhere near sufficient to secure the long-term sustainability of Scotland's pathology services or to cope with rising clinical demand. This level of under resourcing places the future viability of pathology services in Scotland at risk.
- The consequences of this workforce crisis are severe. Patients face avoidable delays in diagnosis and treatment, while the wider economy absorbs the cost through increased ill health, reduced productivity and growing economic inactivity.
- Vacancy rates across a number of pathology specialties are much higher in Scotland. For example, 60% of consultant clinical immunologist roles<sup>2</sup> and 35% of consultant paediatric and perinatal pathologist<sup>3</sup> roles remain vacant. Forensic pathology vacancies are also highest in Scotland – and there is no service at all in Aberdeen – contributing to delays in post-mortem results and adding to the distress of families.
- Consultant pathologists and consultant specialists in laboratory medicine disciplines such as biochemistry, immunology, haematology, genetics, histopathology and



microbiology ensure the most appropriate tests are used effectively for the diagnosis and management of patients with conditions, such as cancers, autoimmune diseases (e.g. type 1 diabetes and Crohn's disease), certain allergies and haematological disorders (e.g. leukemia and infections). These tests include tissue biopsies, blood specimen testing and DNA-based / molecular tests.

- Pathology services are central to delivering the shifts identified in The Population Health Framework for Scotland (2025–2035)<sup>4</sup> and The Health and Social Care Service Renewal Framework (SRF),<sup>5</sup> including prevention, early intervention and community-focused, patient-centred care. These reforms will increase demand on the pathology and laboratory medicine workforce. A robust workforce plan is needed to retain and recruit the clinicians the NHS needs to deliver services and to address health inequalities.
- Crucially, more fully funded training places are needed to train consultant pathologists and scientists. Efforts must also be made to retain pathologists. These could include increased protected time for professional development in research and innovation and progressing automated and digital technologies.

## **Increase protected time for consultant and clinician-led research and innovation in pathology and laboratory services**

- Shifting focus to prevention and community-based care will require redeveloping testing and clinical reporting pathways to enable efficient and accurate laboratory diagnostics services.
- This will require the support and input of pathologists and laboratory medicine consultants who have expertise in reporting and test result interpretation. Diagnostic pathway development is another area that will need the contribution of pathologists.
- Pathologists and scientists routinely work to validate and verify new tests, which can then be implemented into clinical pathways to improve patient care, while maintaining quality and patient safety in testing.



- Pathologists and laboratory medicine experts routinely provide interpretive results reports, which are increasingly being directly received by patients. This can provide opportunities to streamline and enhance preventative care. Ensuring pathologists are embedded in health service / pathway design and population health teams (teams that use health data to identify health needs and target interventions) will also help tackle inequalities.
- Consultant staff need protected time dedicated to innovation and research in laboratory medicine practice in addition to their routine clinical work.

## Enhancing digital and IT capability for better patient care

### IT

- Modern IT infrastructure is vital to deliver healthcare. For example, IT systems need to be capable of storing and sharing laboratory data securely. Integrating / connecting laboratory data safely both between laboratories, and into electronic patient records, would allow for timely and accurate representation of results, which is crucial for effective and efficient patient care.
- IT systems in laboratories need capacity to store large amounts of data, for example, genomic data. This data can be used by pathologists to study patterns across the population and identify underserved or high-risk groups who would benefit from interventions to prevent ill health.
- The College welcomes the rollout of a national laboratory information management system, but we need to ensure this is universally adopted in a way that brings true standardisation and interoperability across the health boards and related stakeholders.
- Disparity in the ability of different health boards to implement new models of working and/or improvements due to lack of IT infrastructure and IT resource remain huge challenges. Investment is needed to remove these disparities and ensure equity.
- Enabling the interoperability of IT systems is key to utilising the full potential of healthcare data to better streamline patient care. The benefits of this would be seen both in terms of community-based care, acute care and preventative care initiatives.



## Digital pathology

- Digital pathology – the collection, management, sharing and interpretation of pathology information in a digital environment – improves patient care. It enables the seamless exchange of cases between organisations and enhances access to expert advice. It supports the pathology workforce by making the diagnosis and monitoring of disease much more efficient through the sharing of data.
- However, digital pathology is currently delivered at a local level of individual health boards with no central funding. This has led to the duplication of effort across pathology departments and variation in the maturity of digital deployment across health board areas.
- Developing a national digital pathology strategy along with a funding stream is essential to delivering sustainable and resilient networked pathology services.
- The integration of digital pathology systems with existing IT infrastructure remains a challenge. Funding must be allocated to upgrade IT systems and infrastructure to support digital pathology adoption, especially in regions that currently lack this capability.

## Harness the potential of artificial intelligence

- Not only have the number of tests that are carried out increased with time but, in addition, the complexity of testing continues to increase at pace. Artificial intelligence (AI) has the potential to assist pathologists across some diagnostic pathways, and it can also be used for more routine work, allowing clinicians to focus on complex scenarios.
- Enabling the wider and effective adoption of AI requires the strengthening of digital infrastructures and capabilities across the NHS. At present, basic IT functions are struggling to work.
- Critical to success is translation into practice with safeguards around confidentiality, regulation and standards for AI use. Close working with other UK nations around



regulation and safety is important to maintain Scotland's progress and success in the timely implementation of these new technologies.

- Adoption of new technologies requires clinical expertise from pathologists and laboratory medicine consultants to ensure that any new diagnostic pathways are set up effectively with a clear patient safety focus. Pathologists lack resources, time and capacity to implement this technology into services and training programmes. These issues must be tackled if the benefits of AI are to be fully realised in the NHS.

## References

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