The Royal College of Pathologists
Pathology: the science behind the cure

RCPath – Paediatric Pathology response to HEE's Strategic Framework Call for Evidence 2021

Demographics and Disease

Long-standing issues with workforce at all levels and of all groups, including pathology, radiology and associated specialities. The lack of appropriate numbers of paediatric pathology consultants, paediatric pathology trainees, trained laboratory and mortuary staff has a significant impact on ability to maintain the service at the high quality rightly demanded. This is compounded by deficits in workforce in radiology (affecting radiologists and radiographers) and other associated specialities which feed into perinatal post-mortem work.

c.5.1.c. Impact on workforce number demand:

- *Strong demand increasing impact*

d.5.1.d. Degree of impact on need for new skills:

- *High Impact*

e.5.1.e. Degree of impact on need for new roles:

- *High Impact*

f.5.1.f. Degree of impact on need for new ways of working:

- *High Impact*

g.5.1.g. In what time horizon will the most significant impact be felt on workforce demand?

- *0 - 5 years*

Appropriate numbers of laboratory professionals, including medical specialists and clinical and biomedical scientists, are required within each Children's hospital laboratory or regional paediatric pathology network. For example, at least one whole time equivalent clinical biochemistry consultant, medically qualified or consultant clinical scientist, is recommended. Consultants are needed in all paediatric laboratory medicine specialities such as haematology, microbiology, virology, immunology and genetics. The numbers of other clinical and biomedical scientists required will vary, depending on workloads.

c.5.1.c. Impact on workforce number demand:

- *Moderate demand increasing impact*

d.5.1.d. Degree of impact on need for new skills:

- *High Impact*

e.5.1.e. Degree of impact on need for new roles:

- *High Impact*

f.5.1.f. Degree of impact on need for new ways of working:

- *High Impact*

g.5.1.g. In what time horizon will the most significant impact be felt on workforce demand?

- *0 - 5 years*

Additional factor/s: Recruitment and retention of specialist registrars, with appropriate numbers of consultants to provide required training is needed. This takes time and in the short-term factors such as overseas recruitment may need to be considered.
Degree of Impact on workforce demand: High Impact

Public, People, Patient and Carer

Feedback or guidance from governmental and focus groups such as HSIB, SANDS, child death review groups, which have resulted in requirements for more specialist examination - such as placental examination by perinatal pathologists rather than general pathologists - without increased capacity for specialist services, which has resulted in variation in practice between areas. These inevitably increase pressure on services which are already stretched. Without increasing numbers of all staff levels and all types (clinical, laboratory, administrative) the service demand will continued to exceed capacity leading to greater turnaround times and suboptimal service in many cases.

c.5.1.c. Impact on workforce number demand:

- *Strong demand increasing impact*

d.5.1.d. Degree of impact on need for new skills:

- *High Impact*

e.5.1.e. Degree of impact on need for new roles:

- *High Impact*

f.5.1.f. Degree of impact on need for new ways of working:

- *High Impact*

g.5.1.g. In what time horizon will the most significant impact be felt on workforce demand?

- *0 - 5 years*

Social media and internet accessibility of parents resulting in increased expectation of services. Increased pressure on services

c.5.1.c. Impact on workforce number demand:

- *Strong demand increasing impact*

d.5.1.d. Degree of impact on need for new skills:

- *High Impact*

e.5.1.e. Degree of impact on need for new roles:

- *High Impact*

f.5.1.f. Degree of impact on need for new ways of working:

- *High Impact*

g.5.1.g. In what time horizon will the most significant impact be felt on workforce demand?

- *0 - 5 years*

Socio-economic and environment

Centralised nature of paediatric pathology services need to be tailored to local requirements including recognised risks of adverse pregnancy outcome associated with ethnicity and lower socioeconomic groups. There may be a need to increase capacity in areas where there is increased requirement reflecting the pathologies which may be more prevalent in groups with certain backgrounds – e.g. Birmingham, large centre covering a large population which has a broad ethnic mix which therefore may require more complex genetic input, etc. The workforce needs to be able to parallel demands, patient needs and developments in personalised medicine.

c.5.1.c. Impact on workforce number demand:

- *Strong demand increasing impact*

d.5.1.d. Degree of impact on need for new skills:

- *High Impact*

e.5.1.e. Degree of impact on need for new roles:

- *High Impact*

f.5.1.f. Degree of impact on need for new ways of working:

- *High Impact*

g.5.1.g. In what time horizon will the most significant impact be felt on workforce demand?

- *0 - 5 years*

Staff and Student/trainee

Chronic understaffing for paediatric pathology. For medical staff there are a high number for vacancies (16 WTE vacant, 61 consultants and 1 SAS grade doctor in post, of whom 34% work less than full time. 9 trainees are in post, 21% of whom are less than full time. The lack of appropriate numbers of paediatric pathology consultants, paediatric pathology trainees, trained laboratory and mortuary staff has a significant impact on ability to maintain the service at the high quality rightly demanded. This is compounded by deficits in workforce in radiology (affecting radiologists and radiographers) and other associated specialities which feed into perinatal post-mortem work.

c.5.1.c. Impact on workforce number demand:

- *Strong demand increasing impact*

d.5.1.d. Degree of impact on need for new skills:

- *High Impact*

e.5.1.e. Degree of impact on need for new roles:

- *High Impact*

f.5.1.f. Degree of impact on need for new ways of working:

- *High Impact*

g.5.1.g. In what time horizon will the most significant impact be felt on workforce demand?

- *0 - 5 years*

Lack of consultant staffing and time within available staff to train sufficient numbers of trainee pathologists. We need to train more paediatric pathologists to enable the current vacancies to be filled; however, those consultants in post require appropriate time to be able to train.

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d.5.1.d. Degree of impact on need for new skills:

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e.5.1.e. Degree of impact on need for new roles:

- *High Impact*

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- *High Impact*

g.5.1.g. In what time horizon will the most significant impact be felt on workforce demand?

- *0 - 5 years*

Possibility of utilising laboratory and mortuary staff to undertake some functions of pathologists' role (such as placental cut up, with or without supervised reporting). This would take time from the consultant paediatric pathologists to enable training to be undertaken, as above.

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d.5.1.d. Degree of impact on need for new skills:

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e.5.1.e. Degree of impact on need for new roles:

- *High Impact*

f.5.1.f. Degree of impact on need for new ways of working:

- *High Impact*

g.5.1.g. In what time horizon will the most significant impact be felt on workforce demand?

- *0 - 5 years*

Being able to recruit and retain staff - linked factors include leaving the EU with potential loss / decreased recruitment. This affects all groups of staff - medics, laboratory staff, APTs. Without recruitment and retention of staff, the chronic issues with workload will continue.

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g.5.1.g. In what time horizon will the most significant impact be felt on workforce demand?

- *0 - 5 years*

Over time, more females have entered medicine and therefore pathology and associated staff groups, with resultant increased numbers of trainees and consultants working less than full time. Apparent increased numbers in the speciality may not equate to whole time equivalent cover.

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g.5.1.g. In what time horizon will the most significant impact be felt on workforce demand?

- *0 - 5 years*

Science, digital, data and tech

Digital pathology. Time taken to train to obtain competency will impact on turnaround times. Work-life balance may be improved for some but members of the workforce at all levels will need to be present in the hospital to examine fresh specimens, create slides, undertake post-mortems, etc.

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g.5.1.g. In what time horizon will the most significant impact be felt on workforce demand?

- *0 - 5 years*

Genomics. Genomics in increasingly being utilised in paediatric pathology but there is a capacity issue with laboratories undertaking testing and also the impact this has on turnaround of other tests required. There will also be an increased need for training, not just for the surgical aspects of genomics but also the likely increasing role in post-

mortem examinations. Increased multidisciplinary team meetings in relation to genomic testing will also need to be considered.

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- *High Impact*

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g.5.1.g. In what time horizon will the most significant impact be felt on workforce demand?

- *0 - 5 years*

Post-mortem MRI / CT scanning as alternative to traditional invasive post-mortem examination. There are significant issues to being able to access scanners in most centres, along with limited numbers of consultant paediatric radiologists who have received training in interpretation of the findings. There are insufficient numbers of radiographers and radiologists to support this service.

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g.5.1.g. In what time horizon will the most significant impact be felt on workforce demand?

- *0 - 5 years*

National networks vs regional networks. National networking (Children Alliance) between paediatric pathology sites may assist in allowing sharing of knowledge and cover of absence (especially allied with digital pathology). However, care must be taken when regional pathology networks (single large laboratories) are established that paediatric pathology is not 'lost' within the greater pathology setting created as part of the integration of laboratories (ICS). Regional networks could potentially result in greater demand on the service (by all paediatric cases being reported by the specialist service when in the past some were reported by district general hospitals) without increased capacity.

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g.5.1.g. In what time horizon will the most significant impact be felt on workforce demand?

- *0 - 5 years*

Service models and pandemic

Waiting list initiatives and other mechanisms to decrease national NHS waiting time following the pandemic. There is no increase in capacity at any level - laboratory, mortuary, trainee pathologist, consultant pathologist, secretarial staff, which further impacts on an already stretched service giving rise to longer turnaround times.

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g.5.1.g. In what time horizon will the most significant impact be felt on workforce demand?

- *0 - 5 years*

Please provide details of where you feel the greatest workforce demand and supply gaps will be over the next 15 years. Where possible please be precise with regards to workforce groups/professions, services/pathways and place (geographic area), as well as timescales.

The demand is across all levels and given the lack of change in the past 15 years it remains to be seen whether this can improve over the next 15.

In 15 years' time, what one key thing do you hope to be able to say the social care and health system has achieved for people who need care and support, patients and the population served?

That the service has improved. It should be noted, there has been no change over the previous 15 years.

In 15 years' time, what one key thing do you hope to be able to say the health and social care system has achieved for its workforce, including students and trainees?

That the workforce is happy and competent.