

HEE Workforce Planning 2014/15 – Call for Evidence

To submit your evidence please complete this form. Please make your submissions relevant to the categories provided in the boxes provided. We have categorised the known drivers of demand and supply under the following headings, and believe this to be a comprehensive description of the variable involved.

You can provide extracts of reports into the free text boxes below, or submit a whole report with this form by clicking on the email at the bottom of this form. Please mark clearly in the email which of the below categories the report/evidence relates to, including any relevant page numbers. Where an extract is provided, please reference the source.

Please use Part 3 to submit any information/evidence that does not fit the below categories. You can also leave any comments/observations in the free text box.

Before completing the form below please submit your contact details here:

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Form submission:

Once completed please submit the form via email to <u>hee.workforceplanning1@nhs.net</u> making sure all supporting documents are also attached to the email.

Please make the subject of the email: HEE Workforce Planning 2014/15 Call for Evidence - The Royal College of Pathologists

Data Protection and Freedom of Information

The information you send us may be made available to wider partners, referred to in future published workforce returns or other reports and may be stored on our internal evidence database.

Any information contained in your response may be subject to publication or disclosure if requested under the Freedom of Information Act 2000. By providing personal information for this review it is understood that you consent to its disclosure and publication. If this is not the case, you should limit any personal information provided or remove it completely.

If you want the information in your response to be kept within HEE's executive processes, you should make this clear in your submission, although we cannot guarantee to be able to do this.

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PART 1 – Future Service and Workforce Models

1. Drivers of Future Service Demand

- Needs identified by patients and the public
- Activity and epidemiology
- Quality. Innovation, prevention and productivity
- Funding
- Other

2. Future Service Models

3. Future Workforce Models

- Associated knowledge and skills and assessments of the supply and demand position*
- Associated values and behaviours and assessments as above*
- Workforce structure, team structure, skill mix, new roles.
- Workforce performance and productivity

*NB: – this may include views on the efficacy and quality of education processes in equipping staff with these skills, knowledge, values and behaviours.

Paediatric and Perinatal pathology is a skilled occupation. Paediatric and Perinatal Pathology in the UK is a GMC CCT specialty in its own right (since 2012). The specialty requires a component of basic Histopathology training (at least satisfactory completion of Stages A and B of training) encompassing surgical pathology, autopsy and cytopathology.

The specific knowledge, skills and behaviour required of practitioners in Paediatric and Perinatal Pathology have been set out in the form of a curriculum for training in the specialty. Please see the 'Curriculum for specialty training in Paediatric and Perinatal Pathology' 2012, pages 1-9 for further details.

http://www.rcpath.org/Resources/RCPath/Migrated%20Resources/Documents/T/Paediatric %20Final%20Curriculum%20with%20Cover.pdf

Paediatric and Perinatal Pathology is a complex sub-specialty which is often erroneously perceived as solely consisting of post mortems on children.

A child goes through a continuous phase of overlapping developmental stages, including immune function, neural development and growth not limited by genetic and environmental factors. This complex process can lead to a range of pathology, not confined to congenital abnormalities. Furthermore, new treatments can lead to secondary pathology, for example chemotherapy can lead to secondary tumours or changes, which may not be recognised for years. All these areas, from the perinatal period up to teenagers, come under the remit of the Paediatric Pathologist.

Paediatric and Perinatal Pathology is a distinct specialty now recognised with its own





curriculum and training programme. A wide variety of specific skills and knowledge are required. It involves diagnosing a broad range of surgical pathology in addition to autopsy work. This requires a good understanding of human development, pathophysiological mechanisms, genetics and their treatment.

The potential to influence the treatment of a child cannot be overstated and is often one of the unrecognised benefits of this career.

A national shortage of appropriately qualified Paediatric and Perinatal Pathologists exists nationally, across all regions and has done so periodically for the last 20 years.

PART 2 – Forecast of future supply and demand – volumes

If you want to input evidence into the forecasting of future numbers you can report your perspectives on either;

- i) the high level indicators; supply, demand, and any forecast under / over supply, or if available Part 2.1
- ii) the more granular components of these three components e.g. retirement rates, output from education relative to attrition Part 2.2

2.1 Summary forecasts

- Forecast Workforce Demand
- Forecast Workforce Supply and Turnover
- Forecast Under / Over Supply

There are 66 consultants currently practicing in Paediatric and Perinatal Pathology in the UK including 48 full-time, 18 part time and 3 locums.

In the next 5 to 7 years, 12 of these consultants will be 65 or over, and, in addition, with changes to the NHS Pensions scheme, it is unclear how many will leave before retirement age (in the recent survey, 12 consultants said they were planning to take early retirement, from 2014 to 2018).

At present, there are 9.5 WTE vacant consultant posts. There are currently a sufficient number of training posts but suitable trainees are difficult to identify for these posts.

The current estimate is that the specialty requires a pool of 6-8 trainees once the consultants are appointed in the vacant consultant posts (currently 9.5 WTE posts).

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Since the training programme in Paediatric and Perinatal Pathology runs for a minimum of three years, the specialty requires 3-4 entrants into specialty training every year.

There are currently 11 trainees in post.

There is a shortage in this specialty because of the emotionally intense nature of the work, the requirement for post-mortem work including coronial cases, the need for 3 years specialty training and the relative lack of private practice opportunities.

Action has been taken to ameliorate this in the following ways: national recruitment with options for rotation to centres with special interests and; proposed mandatory exposure to the specialty for trainees in general Histopathology early in their career.

The number of training posts required in 2015 depends on the success of the October round of recruitment. It is expected to recruit a <u>minimum</u> of 4-5 new trainees.

2.2 Detailed / Component forecasts

Forecast Workforce Demand

- Service Demand drivers
- Change in use of temporary staff
- Addressing historic vacancies
- Skill Mix / New Roles
- Workforce Productivity

Important and regular contacts are made with neonatologists and other specialist paediatricians and paediatric surgeons.

The rapid development of prenatal diagnosis has led to fruitful collaborations with geneticists, radiologists, and fetal medicine specialists. And the advent of molecular genetics offers many new opportunities for diagnosis, research and, ultimately, therapy. All of which means there are opportunities to begin to understand aspects of both normal and abnormal development, rather than being limited by descriptive morphology.

The speciality of paediatric and perinatal pathology offers a range of career options. There are general histopathology posts in district general hospitals, with sessions in perinatal pathology; predominantly fetal and perinatal pathology posts at senior lecturer or consultant grade in academic departments of pathology; and equivalent posts in maternity hospitals. Most of our children's hospitals have pathology departments with two or more senior posts.

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Some of these units provide a regional fetal and neonatal pathology service, as well as specialist pathology services for the children's hospital.

There are also opportunities for teaching. Most paediatric/perinatal pathologists have an active teaching role at both undergraduate and postgraduate levels. And the development of the new curriculum offers opportunities for project-based small group teaching in both the pre-clinical and clinical course.

Forecast Supply from HEE commissioned education

- Assumed training levels
- Under recruitment
- Attrition
- Employment on completion of training

Entry to a Paediatric and Perinatal Pathology training programme is at ST3 level and training is for a minimum of three years.

The specialty requires around 3-4 entrants per year to supply the NHS diagnostic service and academic Paediatric and Perinatal Pathology.

There is on average two retirements each year.

Therefore, the specialty expects that two out of every three entrants into the specialty each year will take up consultant posts in the NHS and we anticipate sufficient job opportunities for these newly accredited Paediatric and Perinatal Pathologists, although the choice of centre/location is unlikely ever to be wide.

The inaugural national recruitment round yielded two successful entrants in 2014. The second round will take place in October 2014.

There are currently 9.5 WTE vacant consultant posts and it is envisaged that there will be plenty of opportunities for employment on completion of training for the next 2-10 years.

Forecast Supply – Other Supply and Turnover

- From other education supply
- To/from the devolved administrations
- To/from private and LA health and social care employers
- To/from the international labour market
- To/from other sectors / career breaks and 'return to practice'
- To/from other professions (e.g. to HV or to management)

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- Increased / decreased participation rates (more or less part time working)
- Retirement

Paediatric and Perinatal Pathology recruits from two sources:

- 1. trainees in general histopathology who have successfully completed Stages A and B of the histopathology training programme including passes in the Year 1 Histopathology assessment and Part 1 FRCPath examination i.e. normally at ST3 level, and;
- 2. already accredited specialists in Histopathology who want to train in paediatric pathology.

Entry is at ST3 level and the training programme lasts a minimum of three years.

The devolved administrations join England and Wales in a UK (national) recruitment and selection scheme. Since this started in April 2014, the specialty has recruited two trainees from histopathology.



PART 3 – General / Other Evidence not included elsewhere

Consultants (WTE) currently in post:

NB Birmingham Children's 2, Birmingham Women's 2.8, Great Ormond Street 3.5



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