



Training and education (UG PG CPD)

-None

- Research and clinical trials issues
 - None
- New developments and issues affecting service delivery
 - Imaging /digital/minimally invasive autopsy continues to develop.
 - Private companies are setting up CT autopsy centres e.g. iGene in Sandwell in the Midlands.
 - The College has developed views on digital autopsy in conjunction with RCRadiology and is working to insure governance issues are addressed in this rapidly advancing area.
 - There is huge political pressure to expand this service.
 - Funding remains an issue for roll out to the general population.
- Service configuration and profile (local, vs regional vs national)
 - Almost all PMs in England and Wales are now coroners cases.
 - Service provision is being increasingly strained due to a lack of PM pathologists.
 - Reasons for this include:
 - Poor payments
 - Lack of NHS Trust support
 - PMs no longer a compulsory component of training
 - Hutton inquiry into forensic pathology is now looking at whole coronial service.
 - Most stakeholders favour a national PM service under the NHS umbrella.
 - Cost will be an issue.
- Overview of College Documents 'owned' or contributed to by the specialty - with details of plans for review e.g. datasets, pathways, other standards documents
 - All "autopsy scenarios" in process of being updated in line with NICE guidance.
 - Lung/Industrial disease & Sudden Cardiac Death already well underway.
 - Advice on PM with "implantable device" done
 - Ebola guidelines done
- Workforce planning and recruitment to the specialty
 - This remains a major issue though little hard data is available on how many PM active consultants there are.
 - A college survey to acquire this data would be useful.
 - The Hutton report is aware of the situation.
- Suggestions for educational events that might be hosted by the College
 - Autopsy training days as have occurred before.

In compiling the report opportunity should be given to specialist organisations and the wider community of practice to have inputs - this will vary between specialty areas

-HTA developing guidance on disposal of foetal tissue for DOH.

-This may have consent issues regarding consent training etc.

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