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

Special Advisory Committee on Clinical Biochemistry (SAC)

Minutes

A meeting of the Clinical Biochemistry SAC was held on Thursday 28 May 2026 at 11:00am – 13:00pm via Microsoft Teams conferencing

Professor Sarah Coupland
Registrar

Minutes

Present:	Professor Eric Stephen Kilpatrick	Chair
	Dr Ian Godber	ALM President
	Dr Kevin Deans	Chair, Panel of Examiners
	Prof Dimitris Grammatopoulos	Genomics and Reproductive Science SAC
	Dr W S Wassif	Chair, ALM National Audit Committee
	Dr Martin Myers	GIRFT (Get it right first time) representative
	Dr Vinita Mishra	Senior Examiner, CSCT Panel of Examiners
	Dr Ryan Aidan	ACP Chemical Pathology SAC representative *(attending on behalf of Professor Twomley)*
	Dr Matthew Waite	RCPath trainee representative
	Dr Larissa Pais	Vice Chair, ALM Trainee Committee
In attendance:	Shelaine Kissoon	Governance and Committee Services Officer *(minutes)*
	Sarah Fundu	RCPath Data Analyst
Apologies:	Professor Patrick Twomley	ACP Chemical Pathology SAC representative
	Dr Bernie Croal	RCPath President

CB.06/26 **1. Welcome, declaration of conflict of interests and apologies for absence**

1.1 The Chair welcomed all members to the meeting. It was noted that Dr Ryan Aidan (ACP Chemical Pathology SAC representative) was attending on behalf of Professor Patrick Twomley.

1.2 Apologies for absence had been received and noted above.

1.3 There were no declarations of conflict of interest.

CB.07/26 **2. Minutes of the previous meeting**

2.1 The minutes of the meeting held on 28 January 2026 were reviewed and approved as a correct record.

2.2 The following matters arising were discussed:

a) EQA scheme

Dr Godber reported on discussions with the President, Dr Bernie Croal, regarding the proposed EQA oversight arrangements. Three years of funding had been agreed with the Department of Health through Professor Dame Sue Hill. Recruitment to a role within the College would be required. The Cellular Pathology NQAAP would operate separately with its own funding. The initiative remained at the planning stage. Discussions were ongoing regarding governance arrangements, engagement with

the devolved nations, and reporting pathways, including links with the MHRA and the Diagnostic Quality Board.

Dr Myers reported that discussions were also focusing on defining the future role of the groups and their governance. This included consideration of four workstreams to ensure the remit remained appropriately focused. He noted that the meeting had been positive.

b) Carter 4 report

Dr Godber provided an update on the Carter 4 review. He advised that, in his role on the relevant RCPath committee, he had reviewed and commented on one of the five draft chapters. He noted that publication, which had originally been expected in mid-June, had been delayed, and that no revised publication date had been provided.

Dr Myers reported that GIRFT had made three formal approaches to Lord Carter seeking involvement in the review process; however, no response had been received. As a result, GIRFT had not contributed to the preparation of the report or the review of the draft chapters.

c) NHS Procurement and IVD Consultation

Dr Myers provided an update on NHS procurement. He reported that a new appointment had been made to lead the clinical procurement element of the work and that stakeholder roadshows had been undertaken to gather views on the procurement of equipment, managed services, and point-of-care testing. He advised that the feedback received would inform the development of guidance on incorporating quality into procurement and contractual arrangements. This was in response to concerns that had been raised regarding the management of quality within managed service contracts.

It was noted that the work remained at an early stage, with guidance anticipated within the following six to twelve months.

2.3 The action log was reviewed, and the following updates were noted:

a) Reliability of workforce data for Clinical Biochemistry

Ms Fundu provided an update on the Workforce Census and the Direct Service Survey (DSS). She advised that the DSS had closed earlier in the year and that the Workforce Census had recently closed, with the data currently undergoing cleansing prior to analysis. The analysed data would then be passed to Felicity Kenn, Workforce Policy Officer, to prepare a summary report, which would be shared with the SAC for review before being finalised.

Professor Grammatopoulos provided an update on work to gather data on the academic clinical biochemistry workforce. He reported limited progress to date but advised that requests had been made through the Research Delivery Network and medical schools to identify staff involved in research and teaching. He hoped to provide further information at the next meeting.

Members highlighted the importance of providing timely feedback to survey respondents to encourage future engagement. Ms Fundu agreed to obtain an update on the progress of the report and the arrangements for its circulation to the SAC and College members.

Post-meeting update: Ms Fundu subsequently advised that the Clinical Biochemistry Workforce Report remained in progress. Felicity Kenn was currently working on other workforce reports and would contact the Chair in due course

regarding the Clinical Biochemistry report. Once finalised, the report would be published on the RCPath website under the 'Our Workforce reports' section.

b) National Analytical Performance Specifications (APS)

The Chair provided an update on the Analytical Performance Specifications Advisory Group. He advised that the group had met three times to date, with representation from relevant national and international organisations. Initial discussions had focused on defining the scope and objectives of the group, including the approach to developing APS. The group had not yet progressed to defining specific APS targets for individual tests but was developing a plan for the work.

Dr Myers highlighted a newly announced international initiative through ISO/JCTLM relating to the definition of APS for laboratory measurements based on medical requirements. Dr Godber emphasised the importance of ensuring alignment with existing initiatives and avoiding duplication of effort. He referred to the EFLM Committee on Clinical and Analytical Performance Specifications. The Chair clarified that the EFLM group was primarily focused on the methodology for establishing APS, whereas the Advisory Group was aiming to develop a practical clinical tool.

The SAC agreed that collaboration and communication between relevant organisations would be important to ensure alignment and avoid duplication of effort. The Chair noted the valuable contribution of international colleagues to the Advisory Group and expressed optimism that this work would provide a lasting benefit to the profession.

c) Managing demand for interpretative comments

The Chair informed the SAC that the document on managing demand for interpretive comments had been circulated for consultation. He advised that the proposed process was for a two-week SAC consultation, following which any amendments would be incorporated before a further four-week consultation with RCPath members. Dr Godber confirmed that the document, in its current form, had been presented to the LabMed Executive Committee, which had agreed to proceed as recommended. The Chair proposed that the document should be co-badged by the RCPath and ALM to support collaborative working and avoid duplication of effort between professional organisations. Dr Godber welcomed this approach.

d) Laboratory interaction with patients

The Chair noted that the managing demand for interpretive comments document included a section on laboratory interaction with patients but advised that a separate document on laboratory interaction with patients had not yet been developed. He suggested that this could be taken forward as a future action.

e) Revised Minimum Retesting Intervals

The Chair advised that Tim Lang had requested nominations from clinical biochemistry, preferably from younger members, to join the group reviewing and revising the document. It was noted that Dr Waite had been nominated by the SAC.

Dr Waite confirmed that the Minimum Retesting Interval Action Group had commenced work, with completion anticipated by the end of June 2026.

CB.07/26 3. Learning updates

3.1 Examinations

Dr Deans provided an update on recent examination results, covering the autumn 2025 and spring 2026 sittings.

For the autumn 2025 examinations:

- Part 1: 25 of 27 candidates had passed (93%). Following standard setting and post-examination quality review, two questions had been removed due to identified issues.
- Part 2 Module 1 (OSPE and practical): 11 of 25 candidates had passed (44%). The results had been reviewed in detail, including scrutiny of borderline candidates and verification of marking processes, and were considered appropriate.
- Part 2 Module 2 (cases, critical appraisal and viva): 23 of 27 candidates had passed (85%).

For the spring 2026 examinations:

- Part 1: 24 of 31 candidates had passed (77%). One question had been removed following post-examination review, as two potentially correct answers had been identified.
- Part 2 Module 1 (OSPE and practical): 15 of 33 candidates had passed (45%). The results had been reviewed and were considered consistent with the required standard.
- Part 2 Module 2 (cases, critical appraisal and viva): 22 of 23 candidates had passed (96%).

Dr Deans confirmed that the usual examination quality assurance processes had been undertaken, including standard setting, post-examination analysis, review of flagged questions, and scrutiny of borderline candidates.

The SAC discussed the lower pass rates for Part 2 Module 1. Dr Deans advised that pass rates had historically fluctuated and that smaller candidate cohorts could contribute to variation. He noted that further analysis was required to explore potential factors, including candidate background, stage of training, and previous experience. He agreed to review areas where candidates had experienced difficulties and provide feedback to support trainees, supervisors, and training programmes.

Dr Deans provided an update on proposed changes to the Part 2 examination structure. He advised that a proposal was being developed for submission to the GMC and emphasised that trainees should continue to prepare for the current examination format until any changes were formally approved and communicated. He also highlighted planned examination preparation workshops at the LabMed UK training day.

The SAC discussed future examination delivery arrangements. Dr Deans advised that the College's long-term plan was to move towards test centre delivery, subject to procurement processes and implementation timelines. He acknowledged the importance of providing candidates with sufficient notice of any changes to allow appropriate arrangements to be made.

The Chair thanked Dr Deans for the comprehensive update.

3.2 <u>Training</u>

Dr Mishra reported that the cardiometabolic medicine workshop had taken place, with positive feedback received, and advised that further discussions were ongoing regarding the future training model. She provided an update on inherited metabolic disease (IMD) training, noting discussions around the timing of training within the programme and the challenges faced by regions with limited specialist provision. It was suggested that secondment opportunities to other centres could support access to training.

Dr Mishra highlighted the progress of chemical pathology webpage, which had been developed to provide information about the specialty, and advised that digital

strategy, including the role of digital technologies and artificial intelligence in laboratory practice, would be considered further.

She also advised that the CSTC had discussed examination preparation and the importance of ensuring trainees had achieved the required laboratory training experience before undertaking Part 2 examinations.

CB.08/26 4. Trainees' update

4.1 Association for Laboratory Medicine (ALM)
Dr Pais reported that there were no significant updates from the ALM Training Committee, aside from discussions regarding the recent examination. She advised that the Freddie Flynn training day was scheduled for November 2026, with further planning to take place in due course. She also reported that the committee was in the process of developing new Terms of Reference, which would include a focus on digital learning and trainee involvement in digital content.

4.2 RCPath Trainees' Advisory Committee (TAC)
Dr Waite reported that there were no specific updates from the TAC. He highlighted trainee discussions regarding cardiometabolic medicine and concerns that the development of cardiometabolic consultant roles could potentially reduce the laboratory component of future consultant chemical pathology posts.

The SAC discussed current pressures on consultant chemical pathologists, including increasing clinical workload, workforce planning challenges, and uncertainty regarding future consultant workforce requirements. The importance of workforce data in aligning trainee numbers with service needs was emphasised.

The SAC noted the ongoing challenge of coordinating trainee progression with consultant workforce planning. It was suggested that greater visibility of consultant vacancies and job plans, potentially through the College website, would help trainees better understand career opportunities and plan their training accordingly.

Dr Mishra advised that consultant job descriptions could be submitted to the College for review and that College assessors could be involved in consultant appointment processes, although these were not mandatory requirements.

CB.08/26 5. Best Practice Recommendation

5.1 G158 The communication of critical and unexpected pathology results
Dr Godber confirmed that the guidance document had been published and is available on the College website.

5.2 G027 Code of practice for clinical biochemists/chemical pathologists and clinical biochemistry services
Dr Grammatopoulos reported that work on the guidelines was progressing well. He advised that there had been good engagement from colleagues. The first meeting had taken place a few months earlier, with discussions focused on taking the work forward.

CB09/26 6. Activities

6.1 Academic activities
The SAC discussed academic activities and the need to re-establish coordination of educational activities following the previous role holder stepping down. Dr Grammatopoulos suggested developing a joint educational programme with the Genomics and Reproductive Science SAC, focusing on preventative and personalised medicine and integrating genomic and clinical data.

Dr Grammatopoulos agreed to act as an interim lead for academic activities while the role was re-advertised.

6.2 Specialty specific webinars
Item discussed under CB09/26 (6.2) above.

6.3 Pathology Portal
The SAC discussed the Pathology Portal and sought clarification on its purpose and potential involvement of the SAC. Dr Godber explained that discussions had taken place with Professor Jo Martin regarding expanding the portal to include more chemical pathology and biochemistry content. He noted that the portal was not primarily aimed at chemical pathology trainees but was intended as an educational resource to support undergraduate teaching and encourage interest in pathology.

It was agreed that further discussion with Professor Martin would be helpful to understand what resources were required and how the SAC could contribute. Dr Godber agreed to share any relevant communications with the Chair so that this could be explored collaboratively.

CB10/26 7. External representative update

7.1 Association for Laboratory Medicine (ALM)
Dr Godber provided a brief update on ALM activities. He highlighted preparations for the upcoming LabMedUK meeting in Birmingham and encouraged members to attend, noting that the programme would include a Q&A session with the four UK Chief Scientific Officers.

He also reported that the educational programme had been reviewed, with two residential courses planned: a managerial course in October 2026 and a training course for trainees in January 2026. Preparations for Euro Med Lab were progressing, with plenary speakers confirmed and the Scientific Programme Committee working on the remaining sessions.

The committee was also informed that the Flynn Award Lecture at EuroMedLab would be delivered by Dr Myers.

7.2 Association for Laboratory Medicine Audits
Dr Wassif provided an update on the ALM national audit programme, highlighting recently completed audits, including the National Audit of Lipid Testing and Lipid Prescribing Guidance and The Poisoned Patient audit.
He outlined upcoming audits covering calcium/PTH/vitamin D testing, BNP, and minimum retesting intervals.

The next national audit meeting would take place on 16 November 2026 at the RCPath. The scientific programme would focus on two key themes: lipid testing and lipid prescribing guidance, and poisoning. Results from the lipid and poisoned patient audits would be presented, alongside clinical perspectives on these topics.

Dr Wassif encouraged members to suggest future audit topics and welcomed expressions of interest from those wishing to contribute to future national audits.

7.3 Association of Clinical Pathologists (ACP)
Dr Ryan provided an update on ACP activities. He highlighted the upcoming Leadership and Management course at the end of September, which was expected to be well attended. He reported that applications had been received for the recent

educational awards, with student research funding awards due to be announced shortly.
Dr Ryan also discussed plans to develop a new format for the previous consultant and trainee joint meetings and educational sessions. A proposal was being considered for an annual face-to-face meeting focused on sharing current work, best practice, and developments within the specialty, with potential themes including quality control issues and topics arising from the recent patient forum.

7.4 Getting it Right First Time (GIRFT)
Dr Myers provided an update on national issues requiring input from the College and SAC. He highlighted concerns regarding the impact of G6PD deficiency on HbA1c interpretation, particularly in UK Black males, and reported that work was ongoing with NHS England, the Race and Health Observatory, and Exeter University to develop an algorithm and clinical pathway to identify individuals at risk.

The SAC discussed the wider issue of assay limitations, including the need for greater awareness of intended assay use and the implications of using tests outside manufacturer specifications.

Dr Myers also provided an update on vitamin B12 testing, highlighting ongoing concerns regarding assay performance, interpretation, and pathway gaps. He noted further work was required with NICE and other organisations regarding diagnostic thresholds, laboratory input into guidance, and analytical performance specifications.

The SAC noted the importance of a patient-focused approach to laboratory medicine and continued collaboration with relevant stakeholders to improve quality and clinical outcomes.

CB10/26 8. Professionalism

8.1 Workforce
Workforce discussions were covered under agenda item CB.07/26 (2.3a)

CB11/26 9. Specialty and Committee updates

9.1 Genomics and Reproductive Science SAC
Dr Grammatopoulos provided an update from the Genomics and Reproductive Science SAC. He noted that there were no specific items requiring discussion by this SAC at present. The next meeting was scheduled for 24 June 2026, where opportunities for joint presentations and events would be discussed. He agreed to provide feedback to the Chair following the meeting and highlight any areas where further discussion or involvement was required.

9.2 Prenatal, Perinatal and Paediatric Pathology SAC
No update was provided.

9.3 College Council
The Chair informed the SAC that an upcoming College Council meeting was scheduled for 18 June 2026. Any items of relevance to the SAC arising from the meeting would be shared with members.

CB11/26 10. Regional reports

10.1 Scotland
No update was provided.

10.2 Northern Ireland
No update was provided.

10.3 Wales
No update was provided.

CB12/26 **11. Any other business**
None.

CB.13/26 **12. Next meeting dates**
The next meeting is scheduled for Wednesday, 18 November 2026 (11:00pm-13:00pm)