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

IBMS Institute of Biomedical Science

The Association for Clinical Biochemistry & Laboratory Medicine
Better Science, Better Testing, Better Care

A joint response from The Royal College of Pathologists, Institute of Biomedical Science and Association for Clinical Biochemistry and Laboratory Medicine to the NHS electives recovery plan

15 February 2022

Overview

The Royal College of Pathologists (RCPath), Institute of Biomedical Science (IBMS), and Association for Clinical Biochemistry and Laboratory Medicine (ACB) welcome the Delivery plan for tackling the COVID-19 backlog of elective care in England. Collectively we will continue to guide and inform pathologists, Biomedical Scientists, Clinical Scientists and the wider laboratory workforce so that they can maintain high quality, safe practice for the benefit of patients in what will be a busy and difficult time.

The pandemic has brought into sharp relief the key role diagnostic services play in the delivery of all patient pathways. They are also vital in tackling the NHS backlog.

Commenting on the NHS Recovery Plan to tackle the elective care backlog over the next three years Professor Mike Osborn, President, The Royal College of Pathologists said:

‘Without investment in pathology, it will not be possible to tackle the diagnostic backlog.

‘The announcement sets out how the COVID-19 backlog of elective care will be tackled and it is encouraging to see the focus on investment in areas such as digital pathology, imaging and Artificial Intelligence.

‘However, the pathology workforce is key to reducing the backlog, especially in cancer diagnosis and is also crucial to, infection prevention and control and good antibiotic stewardship. It is vital that investment is targeted at pathology services to alleviate workforce pressure and meet increased demand.’

Dr Bernie Croal, President of the ACB said:

‘Pathology service delivery is crucially dependent on ensuring we have enough pathologists, scientists and other vital staff. Significant gaps already exist and are forecast to deteriorate in the coming years. A medium to long term solution is possible but we also need a “here and now” contingency to optimise service capacity and efficiency over the immediate next few years.’

IBMS President Debra Padgett said:

"In order to implement the recovery plan and reduce the backlog in care, we must acknowledge that - in order to provide high quality, safe and efficient healthcare - investment in diagnostics and the biomedical science workforce is equally important to investment in patient-facing services."

We have identified the following key areas that need to be addressed to help tackle the backlog:

Capacity

To deliver the plan, it is important to acknowledge that capacity at the patient-facing end of services cannot be increased without also increasing capacity in the diagnostic services. For instance, innovative approaches to cancer diagnosis and treatment such as colon capsule endoscopy require a matched plan for capacity support in diagnostic laboratories.

Workforce

- There has been historic and longstanding underinvestment in the pathology workforce resulting in the need to invest significantly across pathology services to alleviate workforce pressures and meet increased demand. There needs to be more training places and better information technology (IT) for day-to-day work so staff can work more efficiently and flexibly.

- The COVID-19 pandemic has once again highlighted the importance of laboratory tests and laboratory professionals within healthcare. As we emerge from the pandemic, it is vital that such services are reinforced and supported to optimise healthcare recovery both for COVID-19 related illness and for the healthcare backlog.

- The plan sets out aims for growing and supporting the workforce. We believe this will be the key to tackling the backlog in care. However, we would like to see a more specific reference to growing and supporting laboratory staff in the clinical and biomedical science professions.

  The plan only sets out the recruitment numbers for nurses and “support workers”. While it is stated that there will be recruitment in more than 350 careers across the NHS, Biomedical Scientists, Clinical Scientists and wider laboratory teams will play such a huge role in the recovery that a public commitment to increasing their numbers should be made.

  We would also like to see messaging on adopting the new ways of working available that can harness the full range of skills of Biomedical and Clinical Scientists in order to support advanced clinical practice. Biomedical and Clinical Scientists have to work differently to meet the demand and are in a unique position to support their medical colleagues.

- Recruitment, especially from overseas, needs to be urgently considered given we do not have enough UK based specialists/scientists to fill existing or predicted future vacancies, especially in remote and rural areas. Retention of existing staff is vitally important, especially in the short term – so a focus on wellbeing, delaying retirement, facilitating post retirement working and addressing pension issues that promote premature early retirement is urgently needed.

- Increased pressures on pathology services are inevitable. It is vital that staff wellbeing is protected to minimise sickness absence and that NHS occupational support services are equipped to deal with this.

Training

Training numbers need to increase across all disciplines for both pathologists and scientists. It is key that we continue our work with practice educators and training programme directors across the four nations to implement workforce strategies – such as procuring the training resources and capacity needed to increase the pathology and laboratory medicine workforce.

Better intelligence on workforce including number of existing posts, vacancies, training posts and workload trends will help to manage both national provision but also identify regional shortfalls. We are well placed and keen to work with government to address this data gap to support short and long term planning.

Infection Prevention and Control

The COVID-19 pandemic has highlighted the vital importance of managing infection, which has often been overlooked when compared to cancer and cardiovascular disease. It is critical to have good stewardship of antibiotics, and clear leadership on infection prevention and control. Our professional bodies are ideally placed to contribute to this and are working hard to do so.

Many of our professional bodies' expert members work on infection control and diagnostic testing, including for COVID-19. Throughout the COVID-19 pandemic our microbiology, virology and infection control teams continued to support patients and the public despite many Trusts being unable to fill microbiology posts, and the resulting workforce pressures. Capacity will always be required in this vital area and the current staffing shortfall must be urgently addressed.

Innovation and Technology

The confirmation from NHS England, in December 2021, that pathology services will receive £140m for digital pathology and Laboratory Information Management Systems (LIMS) this financial year was welcome news.

While the advent of artificial intelligence (AI) in pathology is exciting, and the NHS should be a world leader in the development and use of AI in pathology thanks to investments in this area to date, a great deal of work is required to get to the point where AI is fully developed and can be used safely, at scale, in healthcare. As a result, it is very unlikely that AI will address the severe workforce gaps we see in the short term, but rather will contribute to future developments in medical safety and efficiency in the medium term.

Appropriate use of pathology tests can ensure correct decisions and pathways are utilised. Demand optimisation strategies to educate healthcare professionals combined with patient facing information, such as via LabTestsOnline, will help ensure inappropriate testing does not lead to unnecessary treatment and waste of scarce NHS resources.

Community Diagnostic Centres

The government's commitment to building more community diagnostic centres is a step in the right direction. We welcome the move to introduce easier access to diagnostic services centred around patients.

Quicker, easier access through a 'one stop shop' will lead to earlier diagnoses, leading to better outcomes for patients and the potential to save lives. However, these new diagnostic centres need to be introduced with sufficient resources, in terms of staffing, IT provision and connectivity with other systems (such as pathology networks and GP practices).

While the new community based centres are unlikely to have many pathology services incorporated, they will nevertheless generate significant new workload for local and regional pathology labs that will require adequate facilities, staffing and IT interoperability to ensure the level of efficiency and quick turnaround required.

In order to adhere to the 'Point of care testing in community pharmacies' guidance (Jan 2022) and its "Buy it right", "Use it right", "Keep it right" ethos, HCPC registered Biomedical Scientists and other laboratory experts should also be involved in the selection of equipment, quality assurance and governance of diagnostic devices when used for patient care.

Bigger Picture

It must be acknowledged that COVID-19 has not just impacted health services in England and that, due to the nature of pathology and laboratory services, recovery plans also need to be implemented across the four nations, ensuring that pathology services are prioritised.

Fully linked up, standardised and interoperable laboratory IT systems, capable of receiving, sharing and delivering vital diagnostic test results to clinical pathways, need prioritising across the whole of the UK. This in itself will also drive better data collection opportunities to inform important workforce considerations, laboratory infrastructure and deliver on Big Data opportunities for the benefit of all healthcare.

Conclusion

To deliver the Elective Care Recovery Plan the NHS will need diagnostic services to significantly increase capacity and efficiency. Without pathologists, biomedical scientists, clinical scientists and the wider laboratory teams providing the huge array of services that directly inform over 70% of clinical decisions, pathology services will be unsustainable and fall short of that needed to address the elective care backlog in a timely manner.

There must be urgent investment in pathologists, biomedical scientists, clinical scientists and laboratory staff, in new ways of working and interoperable IT systems, and we must commit to adopt the technology that will help us find, develop and use more efficient patient pathways.

Contact details

This briefing was collated by Janine Aldridge, Public Affairs Officer.

E: janine.aldridge@rcpath.org

T: 020 7451 6769

About the Royal College of Pathologists

The Royal College of Pathologists is a professional membership organisation with more than 11,000 fellows, affiliates and trainees, of which 23% are based outside of the UK. We are committed to setting and maintaining professional standards and promoting excellence in the teaching and practice of pathology, for the benefit of patients.

About the Institute of Biomedical Science

With over 21,000 members in 74 countries, the Institute of Biomedical Science (IBMS) is the leading professional body for scientists, support staff and students in the field of biomedical science. We provide our members with professional standards and support to ensure world class patient care, give them access to training, qualifications and knowledge to progress their careers and provide a strong, respected and progressive voice to promote and represent their profession at all levels.

About the Association for Clinical Biochemistry and Laboratory Medicine

The Association for Clinical Biochemistry and Laboratory Medicine (ACB) is a professional membership organisation dedicated to the practice and promotion of clinical science. As a major body for clinical biochemistry, immunology and microbiology in the United Kingdom, we work nationally and internationally to promote the highest standards in laboratory testing and patient care.