Comments on the Home Office consultation on proposals for stronger powers for the Forensic Science Regulator – December 2013

The Royal College of Pathologists (RCPath) is making this submission as part of the consultation on new statutory powers for the forensic science regulator. RCPath is an educational and standards setting body which oversees clinical standards for the conduct of post-mortem examinations. This response provides information on the views of the RCPath on the questions proposed in the consultation document.

RCPath believe it is extremely important to emphasise the difference between forensic pathology and forensic science. Indeed, in page 10 of the consultation document this issue is alluded to as follows: "In addition to the processes, a further definition is needed for ‘forensic science’. This covers a large and growing number of disciplines – currently the definition is taken to mean traditional crime scene or laboratory based forensics, but there are other areas which could be included. Again, this definition will also be relevant in determining who the Regulator’s other statutory powers will be applicable to".

- Forensic pathology is the area of pathology dealing with the investigation of death and the interpretation of injuries in the medico-legal context. It involves post mortem examinations and opinion evidence, not for example scientific tests with numerical results.
- Forensic science could be described as scientific tests or techniques used in connection with the detection of crime.

Much of the document in accordance with the above description of forensic science seems to be geared to accreditation of laboratories and validation of specific laboratory tests, for example ISO 17025. Such validation and calibration is a desirable and attainable goal in some specific laboratory tests, for instance to determine the specific concentration of a drug in a body fluid. This is one area where the distinct difference between the scientific disciplines and pathology is most apparent; it is not possible to calibrate a procedure as diverse, complex and nuanced as a post mortem examination. The best equivalence is publication of standards with which we expect all pathologists to comply; we already have this in the Code of Practice and Performance Standards for Forensic Pathology, which was published last year and is to be under rolling review by the Forensic Pathology Specialist Group (FPSG) and RCPath. There are a number of the questions in the consultation that are thus not applicable to forensic pathology.

There is also an appraisal system for individual pathologists which includes Continuing Professional Development requirements and this is the key to revalidation and a licence to practice issued by the General Medical Council (GMC). Given the diverse nature of autopsy practice, to ensure quality of forensic pathology service provision, it is important to ensure that each individual practitioner is regularly required to demonstrate their professional competence and evidence that they are practicing in line with an accepted code of practice. We already have this in place. The introduction of Critical Conclusions Checking which is now universal in England and Wales (and corroboration in Scotland) is an additional check that could be viewed as the forensic pathology equivalent of validation/calibration. Quality is further checked/enhanced by peer review in appropriate cases and the annual national forensic pathology audit.
Forensic pathology is already in effect regulated four fold: we are required to comply with standards set by the GMC, the RCPath, and the Home Office and, of course, our work/opinions are subject to scrutiny in court. It is difficult to see the requirement for any further regulation to be imposed on forensic pathologists.

As to whether or not the Regulator should have statutory powers, RCPath believes that pathologists who are operating within generally accepted norms of practice should not have a problem with their work being reviewed by the Regulator, irrespective of their statutory powers, PROVIDED that the standards are set by forensic pathologists themselves and not by external agencies/individuals who do not have direct experience of forensic pathology practice.

In summary, it is our opinion that the current system of regulation in place for forensic pathology is already suitably overseen by the FPSG, Pathology Delivery Board and Forensic Science Regulator and is robust and fit for purpose. Any statutory powers provided to the Regulator are unlikely to affect this, unless such intervention was to increase the burden of bureaucracy, in which case it would potentially have a negative effect on provision of forensic pathology services.

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2nd January 2013